









Benefits

A tax free lump sum of R10,000 is paid when your employee covered under the policy dies.

Cover eligibility

To be eligible to be covered under the policy, employees must be:

- 18 to 64 years old when they are added to the policy. For new policies, employees up to age 69 can be
 included at inception, provided they have been employed by the company since they were aged 64 or
 younger.
- Permanently employed or on contracts of at least 6 month duration.
- Legally employed & actively at work for at least 20 hours a week in South Africa.

All eligible employees must be included on the policy (or all eligible employees in a clearly defined group such as call centre agents or field workers). The decision to include or exclude an individual employee from the policy cannot be at the discretion of the employer or employee.

Actively at Work

An employee must be at work - either on site or off site with permission - and able to attend to all their normal duties on the day that their cover is supposed to start or, if cover is increased, on the day that the increased cover starts (Actively at Work). If they are on sick leave or disability leave, even if this is due to their being unable to attend work due to potential exposure to an infectious disease, the start of their cover (or increased cover) will be delayed until the insurer is given proof of the employee's good health or they complete eight consecutive weeks of service with the employer/policyholder without absence from employment. If the cover starts on a non-working day, or the employee is on authorised leave (including enforced leave and maternity leave but excluding sick leave or disability leave), then the above requirement is waived, provided that these conditions are met:

- 1. They were at actively at work on the last working day before cover began (or before they went on leave). In the case of new employees being added to an existing policy, this would not apply.
- 2. They would be able to attend work on the day that cover begins if they were not on leave, or it was a normal working day.

Free cover limits

If the company is insuring 5 or more employees, all employees will receive full cover as long as they are actively at work when the policy incepts.







If there are less than 5 employees being covered under this policy, a waiting period of 6 months will apply, during which the employee's cover will be limited to accidental causes only. It is possible that the need for a waiting period could be added or removed as you add or remove staff. Any changes will only affect new employees and not existing ones.

Cover termination

Mahala cover will terminate 12 months after the initial policy inception.

Individual employees will cease to be covered at midnight on the date their service with the employer terminates, or as soon as they turn 70.

Non-South African employees are only covered as long as they remain legally able to live and work in South Africa. If they lose this right, they will no longer be covered and they should be removed from the policy. In the event that the Employer misrepresents information in order to secure cover for their employees, then the underwriter will have the option to terminate the policy and cease cover with immediate effect

Beneficiaries

The beneficiary is the person who receives the pay out if the insured person dies.

Your employee may change or add a beneficiary at any time, but neither you nor any member of your family may be added as a beneficiary to this policy (except where you are the insured person).

If your employee has not chosen a beneficiary, the payout goes into their estate. If the beneficiary is a minor (younger than 18), the payout goes to their guardian for the minor's benefit. If the nominated beneficiary is deceased, the benefit will be paid into that beneficiary's estate.

Benefits can only be paid into a South African bank account.

Premiums

Your monthly premium

No premium is payable for the Simply Mahala benefit.







Claims

The claims process

We need to be informed within 180 days of the insured person's death, or the event which led to the insured person's disability claim.

Make sure your employees and their loved ones know that you have taken out this policy, and tell them how to contact us if a claim needs to be submitted. We will help them or their beneficiaries through the process when the time comes. Make sure your employees and their loved ones understand the importance of this policy. Tell them how to contact us if they ever need to claim.

The information provided at the time of application is critical in assessing the risk associated with your policy. The insurer relies on the information provided by the policyholder and/or insured persons to determine whether the insured persons were eligible for cover, the premium that should be charged, and terms of the cover provided.

If any of the information provided is inaccurate, this will impact the validity of the policy and future claims. In the event of a claim, we will review the information provided during the application process to ensure that it was accurate. If any non-disclosure or misrepresentation is found that would have impacted the initial decision to offer cover, the claim may be declined, or benefits reduced. If, after Hollard pays any claim, Hollard finds that it was based on false or incomplete information, all claim payments must be refunded to them

If the claim is declined by Hollard, the claimant has 90 days from when they are notified of this to make representation to Hollard so that they may review this decision. If the dispute is not resolved, then the claimant has 3 years from the original letter of rejection to institute legal action against Hollard by serving summons on it, failing which Hollard is no longer liable for the claim.

Reasons a claim can't be paid

Unfortunately, no benefit can be paid if the death or injury is caused by any of the following:

- Participation in any terrorist activity, riot, civil commotion, rebellion or war.
- Radioactivity or nuclear explosion.
- For life cover: suicide or deliberate self-injury within 2 years of starting the policy. For funeral cover: suicide or deliberate self-injury within 1 year of starting the policy. For disability cover: attempted suicide or deliberate self-injury at any time.
- Refusal of treatment recommended by a registered medical practitioner.

Your employees must also inform Simply should they spend more than 90 days outside of South Africa within a calendar year. We reserve the right to discontinue their cover if this is the case.







DOCUMENTATION REQUIRED IN CASE OF A CLAIM

- Proof of employment and being Actively at Work at the time the cover commenced
- Certified copy of the insured person's ID
- Proof of insured person's residence status (for non-SA ID holders only)
- Certified copy of the/each beneficiary's ID
- Proof of the the/each beneficiary's bank details
- Certified copy of death certificate
- Completed funeral claim form
- DHA1663 notification of death register

Additional requirements

If the insured person dies within the first 2 years of the policy, extra documentation may be needed, such as:

- Motor vehicle accident report
- Police report / statement completed by the police
- Copy of the post-mortem report
- Result of any forensic laboratory investigations
- Inquest findings (if appropriate)
- Full verdict in the case of a murder (if appropriate)
- Completed medical report form together with copies of any specialist reports and investigations relating to the claim cause

We reserve the right to request additional supporting documents where required.

Changing your policy

Cooling-off

If you change your mind within 31 days of taking out your policy, you can cancel your policy with a full return of any paid premium.

Adding or removing employees

You must inform Simply of employees who have left your organisation and therefore need to be removed from the policy. We will contact these employees and offer them the option of converting to an individual Simply policy on beneficial terms.

It is also compulsory to add any qualifying new employees who have joined your organisation to the policy.

You can do these removals and additions yourself online or seek assistance from Simply or your broker.







You may also be able to integrate your payroll system with Simply (we are integrated with various systems), in which case these changes are taken care of automatically.

We will need to receive notification of changes in the employees covered at least 1 week before your premium due date, in order to make sure the right people are covered.

Adjusting benefits

The cover amount cannot be adjusted, although you can choose to take out additional benefits through a standard Flexi Staff Cover at any time.

Contacting simply

Please contact our team if you want to make any changes to your policy, including cancelling or coolingoff, or if you need to claim. You can also log in at any time to view or update your policy details.

Telephone: 021 045 1513

Email: admin@simply.co.za or claims@simply.co.za

Website: www.simply.co.za

Complaints

Should you have any complaints about the service Simply has provided, please contact us or Hollard immediately so that we can attempt to resolve your problem or complaint. We are committed to helping you in every way we can.

Simply Complaints

E-mail: complaints@simply.co.za

Hollard (Insurer)

E-mail: Mycomplaint@hollard.co.za

Office of Internal Arbitration at Hollard

Postal Address: PO Box 87419, Houghton, 2041

E-mail: lifeoia@hollard.co.za

If after contacting us, you still feel your complaint is unresolved, the matter can be pursued with the National Financial Ombud Scheme (NFO).

National Financial Ombud Scheme

E-mail: lifeoia@hollard.co.za







If you feel that Simply or the intermediary who sold you this product has contravened the provisions of FAIS, please contact the Simply Compliance Officer, or the FAIS Ombud.

Simply Compliance Officer

E-mail: compliance@simply.co.za

FAIS Ombud

E-mail: info@faisombud.co.za

GLOSSARY

Life insurance is full of strange language. Hopefully these definitions will help:)

Accidental death or disability

Death or disability caused by a sudden and unexpected event that happens at a clear time and place. An accident is usually something violent, external and outside your control that happens to the insured person.

Beneficiary

If the insured person dies or is disabled, the beneficiary is the person who receives the lump sum payment.

Cooling-off period

A 31-day window after the policyholder takes out the policy, during which the policy can be cancelled with a full refund of premiums.

Exclusions

These are situations or causes of claims where the cover cannot be paid out. They are explained in a section above called "REASONS A CLAIM CAN'T BE PAID".

Hazardous pursuits

These are unusually dangerous activities that the insured person engages in regularly, not occasionally. Examples include, but aren't limited to: big game hunting, boxing, mixed martial arts, outdoor rock climbing, skydiving, motor and boat racing, as well as white water rafting.

Insured person

The person whose life is covered by the policy. When the insured person dies or is disabled, a lump sum is paid out. There can be multiple insured persons covered under a Simply Funeral benefit.

Lump sum

A lump sum is the total amount of cover paid out in one payment, rather than the cover being paid out over time in smaller regular payments.







Natural causes

Causes of death or disability like disease and old age, rather than those related to violence or an accident.

Policyholder

The person who takes out the policy and who is responsible for paying the monthly premium.

Waiting period

This is the period directly after you've taken out the policy - you need to pay premiums, but the cover is limited until the waiting period is over. For more details of the cover during the waiting period, please see earlier in this document.

Underwriter

This is the company who will be responsible for paying any claims that are made. They are also referred to as the insurer in this document.

ADDITIONAL DISCLOSURES

Simply Financial Services

Simply Financial Services (Pty) Ltd (Simply), registration number 2011/132479/07, is an authorised financial services provider (FSP), FSP Number 47146, licensed by the Financial Sector Conduct Authority (FSCA) to distribute life insurance products.

Hollard holds a minority shareholding in Simply Financial Services.

Simply's contact details are as follows:

Physical Address: 3rd floor, Grove Exchange, 9 Grove Avenue, Claremont, 7708 **Postal Address:** 3rd floor, Grove Exchange, 9 Grove Avenue, Claremont, 7708

Website: www.simply.co.za

The Insurer

The Insurer is The Hollard Life Assurance Company Ltd (Hollard), registration number 1993/001405/06. Hollard is a licensed life insurer and authorised financial services provider. Hollard is a public unlisted company and has Professional Indemnity insurance and Fidelity Guarantee insurance in place. Hollard's compliance officer can be contacted at **compliance@hollard.co.za**.

Application process

This Hollard insurance product is distributed by Simply online and through a call centre, as well as by independent intermediaries. By signing up for a Simply policy underwritten by Hollard, you agree to be bound by Hollard and Simply's T&C's. Once your application has been submitted to Simply, we will evaluate your application and check the personal and banking details provided to ensure that they are correct and relevant to you as an applicant. You will be able to review the application and correct any







mistakes in your application. Once Simply has received the application and accepted it on behalf of Hollard, you can cancel the policy at any time by sending an email to: **cancellations@simply.co.za**.

The Mahala Cover contract

Your contract consists of your application, policy schedule and policy documents.

Simply's Mahala Cover policies are underwritten by Hollard, which means that Hollard is responsible for paying claims to beneficiaries and ensuring you are provided with everything detailed in your policy document. Simply markets, distributes and services the policies, including your own. The cover you have with Hollard is explained fully in this document. Be sure to read this document carefully, double check all the details in this document and contact us if you have any questions.

Simply as a binder holder

Hollard is the insurer of your policy and Simply is the binder holder. This means that Simply performs key functions on behalf of the insurer, such as issuing and administering the policy and managing the claims process. Simply is paid binder fees by Hollard for these functions equal to 30% of each month's premium (excl. VAT).

Financial Advice

Simply is an authorized FSP, marketing, distributing and servicing long-term insurance products underwritten by Hollard. Simply's representatives do not provide financial advice as defined by the Financial Advisory and Intermediary Service Act, 37 of 2002 (FAIS). Where this product has been sold by an independent intermediary mandated by Hollard, they may provide advice and may be licensed to do so.

Remuneration

Simply is Hollard's representative authorised to market and sell this policy. Simply earns commission from Hollard for rendering services as intermediary (as defined in the Regulations under the Long-term Insurance Act), up to a maximum of 7.5% of each premium payable. Simply receives more than 30% of its total remuneration from Hollard.

HOLLARD DISCLOSURES

Protection of Personal information

Hollard may use your information or obtain information about you (including criminal and/or health information) for the following purposes:

- Underwriting.
- Assessment and processing of claims.
- Where applicable, credit reference searches or verification, credit scoring and assessment and credit management.
- Verification of personal information (including your identity, address and banking details).
- Updating your personal information.







- Claims checks (Industry Life & Claims Register(s)).
- Tracing beneficiaries.
- Debt tracing or debt recovery.
- Tracing where you are uncontactable.
- Prevention and detection of fraud, crime, money laundering (including anti-money laundering screening) or other malpractice.
- Market or customer satisfaction research or statistical analysis.
- Audit & record keeping purposes.
- Compliance with legal & regulatory requirements and in connection with legal proceedings.
- Sharing information with service providers including appointed administrators (Simply Financial Services as at time of policy issue) we engage to process such information on our behalf or who render services to us. These service providers may be abroad, but we will not share your information with them unless we are satisfied that they have adequate security measures in place to protect your personal information.

You agree that we may view, search and update your information.

You may access your personal information that we hold and may also request us to correct any errors or to delete this information. In certain cases, you have the right to object to the processing of your personal information.

You also have the right to complain to the Information Regulator, whose contact details are: http://www.justice.gov.za/inforeg/index.html (http://www.justice.gov.za/inforeg/index.html)

Tel: 010 023 5200 **Fax:** 086 500 3351

Email: popiacomplaints@inforegulator.org.za

Marketing

The Hollard Group (of which Hollard is a subsidiary) would like to offer you ongoing financial services and may use your personal information to provide you with information about products or services that may be suitable to meet your financial needs. Please SMS your ID number to 30994 if you would prefer not to receive such information and/or financial services.

To view the Hollard Group full privacy notice and to exercise your preferences, please visit our website on https://www.hollard.co.za/privacy-notice (https://www.hollard.co.za/privacy-notice).

SIMPLY DISCLOSURES

Protection of Personal information

Simply may use your information or obtain information about you for the following purposes:







- To provide you with our financial products and services, and maintain our relationship with you.
- To provide you with intermediary services.
- To execute a transaction in accordance with your request.
- To comply with legislative and regulatory requirements, including codes of conduct and requirements of our regulators (including the Financial Sector Conduct Authority and Prudential Authority).
- To perform any risk analysis or for purposes of risk management to you or our business in general.
- To record and/or monitor and have access to your telephone calls (i.e. voice recordings), correspondence and electronic communications to/with us (or any of our employees, agents or contractors) in order to accurately carry out your instructions and requests, to use as evidence and in the interests of crime prevention.
- For statistical analysis and research purposes; For audit and record-keeping purposes.
- For purposes of proof and legal proceedings.
- To conduct market research and provide you with information about our products and services from time to time via email, telephone or other means (for example, invite you to events).
- To process your marketing preferences (where you have unsubscribed from certain direct marketing communications, keeping a record of your information and request to ensure that we do not send such direct marketing to you again).

You agree that we may view, search and update your information.

You may access your personal information that we hold and may also request us to correct any errors or to delete this information. In certain cases, you have the right to object to the processing of your personal information.

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To view the Hollard Group full privacy notice and to exercise your preferences, please visit our website on https://www.hollard.co.za/our-world/company-overview/hollard-privacy.

Advertising

All models depicted in our advertising have no material relationship to any brand or person mentioned in our advertising.







Compliance

Simply's Compliance Officer deals with issues relating to Simply's FAIS compliance.

Our consultants who do not meet the full Fit and Proper Requirements as defined by FAIS render services under management supervision.

Simply has professional indemnity insurance.

Simply has and maintains an Anti-Money Laundering Poli cy in accordance with FAIS.



