



Tel: (014) 592 9333

FSP 51964 • Req. No: 2010/088394/23

00001

POLICY NUMBER:

TYPE OF POLICY:

Initial Funeral Value:.....

1. Surname:.....

2. First Names.....

3. Title

MR	
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MRS	
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MISS	
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4. Marital Status ☐ Married ☐ Single ☐ Divorced ☐ Other:.....

[illegible]6. Age:

8. Address:

9. Email:

10. Cell No:

B. PLAN SELECTION:

Single

BUDGET	18-64	R120		65-84	R140	
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EXECUTIVE	18-64	R170		65-84	R190	
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SUPER 18-64 R200 65-84 R270

SINGLE FAMILY INCOME 18-65 ☒ R120 ☐ 18-65 ☐ R140 ☐

Family

18-64 ☐ R170 ☐ 65-84 ☐ R190 ☐

18-64 R250 65-84 R270

18-64 ☒ R280 ☐ 65-84 ☒ R300 ☐

MAIN MEMBER AND SPOUSE

18-65 R130 18-65 R150

MORE PLANS:

Bronze Family Plan 18-64 65-74 75-89

Platinum Family Pan 18-74 R350

Silver Family Plan	18-64	R380	
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Gold Family Plan	18-64	R490	
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65-74 R240

65-85 R400

65-85 R520

75-89	R300	
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Livestock Stand Alone (Max entry age 64)

Cow Single Family Bronze Family Plan

R160	
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Silver Family Plan

R200	
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Gold Family Plan	R200	
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Platinum Family Plan

R160	
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Top Ups:

After Tears - R2 000

- Single
- Family
- Bronze Family Plan
- Silver & Gold Family Plan
- Platinum Family Plan

Age: 18-64

R 10	
R 15	
R 20	
R 25	
R 20	

Age: 65-84

R 15	
R 20	
R 25	
R 30	
R 25	

Groceries - R5 000

- Single
- Family
- Bronze Family Plan
- Silver & Gold Family Plan
- Platinum Family Plan

Age: 18-64

R 30	
R 40	
R 50	
R 70	
R 50	

Age: 65-84

R 40	
R 50	
R 60	
R 80	
R 60	

Grave (Selected Locations) - R8 000

- Single
- Family
- Bronze Family Plan
- Silver & Gold Family Plan
- Platinum Family Plan

Age: 18-64

R 40	
R 50	
R 75	
R 90	
R 75	

Age: 65-84

R 45	
R 60	
R 85	
R 100	
R 85	

Tombstone - R10 000

- Single
- Family
- Bronze Family Plan
- Silver & Gold Family Plan
- Platinum Family Plan

Age: 18-64

R 50	
R 70	
R 100	
R 120	
R 100	

Age: 65-84

R 60	
R 90	
R 120	
R 140	
R 120	

Livestock -Cow - R15 000

- Single
- Family
- Bronze Family Plan
- Silver & Gold Family Plan
- Platinum Family Plan

Age: 18-64

R 90	
R 120	
R 140	
R 170	
R 140	

Age: 65-84

R 100	
R 130	
R 160	
R 190	
R 160	

Livestock - Sheep / Goat - R2 850

- Single
- Family
- Bronze Family Plan
- Silver & Gold Family Plan
- Platinum Family Plan

Age: 18-64

R 30	
R 40	
R 50	
R 70	
R 50	

Age: 65-84

R 40	
R 50	
R 60	
R 80	
R 60	

Disclosure for the Top Ups:
Top up/s cannot be chosen for a plan type other than the main policy selected. Eg if a single member policy is selected the top up will automatically be for a single member policy. Maximum age for top up selection is 64.

C. FAMILY DETAILS:

ELIGIBLE MEMBERS

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[illegible]

17. Payment Options: Cash ☐ Bank Debit Order ☐ Easy Pay ☐

JOINING PREMIUM.....

18. Beneficiary:.....

MONTHLY PREMIUM.....

19. Relation:.....

[illegible]

21. Does any of the applicants already have a policy at

The International Funeral Society (TIFS)? ☒ Y ☐ N Policy No:.....

NOTE: If you exceed the maximum cover the rules in Point 10 of the Conditions will apply

E. DECLARATION

I, the undersigned, hereby declare that I understand the above questions, and that all information given, is true and I understand that any false information or non-disclosure can result in a claim not being paid and all premiums forfeited.

Signed at.....on this day of20.....

OFFICE USE: Name of Representative.....CODE:.....

Policy Premium:.....Extra PREMIUM:.....

Receipt Date:.....Receipt No:.....Monthly Premium:.....

Checked by:..... Date:..... UNDERWRITTEN BY:.....

THE INTERNATIONAL FUNERAL SOCIETY & UNDERTAKERS (PTY) LTD
FUNERAL POLICY – TERMS AND CONDITIONS (Applicable to all funeral insurance products)

1. LEGAL NATURE OF POLICY

This policy is a funeral insurance policy issued and/or administered by The International Funeral Society & Undertakers (Pty) Ltd ("the Company") a juristic rep under license no 51964, acting through its appointed insurer and underwriting partners. These Terms and Conditions form part of the policy contract and are binding on the Principal Member and all covered persons.

2. UNDERWRITING AND REGULATORY STATUS

Policies are underwritten by Assupol, Clientele, One-Life, RMA, Anayasure, OMI and/ or Hollard, authorized Financial Services Providers, and are governed by the Financial Intermediary and Advisory Services Act (FAIS) and all applicable insurance legislation.

3. ELIGIBILITY AND COVERED PERSONS

Cover applies only to the Principal Member and those dependents or extended family members whose details are provided at application or added in accordance with policy rules and accepted by the insurer. No person is covered unless accepted and premiums are paid. **Children and dependents have to be related to either the main member or spouse.**

4. CHILDREN'S COVER

Children are covered from birth up to age 21. Students and permanently disabled children may qualify for cover beyond age 26, subject to insurer approval.

For children under the age of 14, benefits are limited to a percentage of the Principal Member's policy amount as follows:

0–11 months: 20%; 1–5 years: 25%; 6–13 years: 50%

5. COMMENCEMENT OF COVER

Cover commences only once the first premium has been received and the policy has been accepted. No cover exists before this time.

6. PREMIUMS

Premiums are **payable by the 10th of every month in advance** at the rate agreed at inception or as amended from time to time. The policy remains in force only while premiums are paid and up to date. No benefits are payable if the policy is not in good standing at the date of death.

7. JOINING FEE

All new policies have a standard joining fee of R100, the joining fee is payable immediately upon application and no policy will be issued until such payment has been received.

8. PREMIUM REVIEWS

Premiums are not guaranteed and may be reviewed annually based on claims experience, changes in the risk profile, membership composition, average age, or other material factors. Any premium increase will not necessarily result in a corresponding increase in benefits.

9. WAITING PERIODS

A waiting period applies to natural death as specified per product. Accidental death is covered immediately after receipt of the first premium, provided the policy is active. Waiting periods may re-apply after a lapse, reinstatement, or when additional members are added.

10. BENEFITS

Benefits vary by product and may include funeral services, groceries, livestock, cash benefits, or funeral-related support. Benefits are subject to limits, availability, and these Terms and Conditions.

Maximum cover per person is R100 000, should a client have more than one policy and total cover exceeds R100 000, the total benefit will not exceed the R100 000 maximum.

11. LIVESTOCK BENEFIT (WHERE APPLICABLE)

Where livestock forms part of the benefit, the Company will, as far as reasonably possible, provide livestock of a suitable market-related size for funeral purposes, supplied alive or as a carcass. If livestock cannot be supplied, a cash alternative may be paid. Transport is provided only to a designated collection point. **Should the client elect to receive a cash payment instead of the livestock benefit, the following limits apply, Cow- R15 000, Sheep/Goat-R2850.**

12. CASH ADVANCE

In order to receive the cash advance, benefit the following requirements have to be met, the deceased's remains need to be in storage with the Company or associated/ agreed undertaker, claim form as well as death certificate has to be submitted and police report in case of unnatural death. The Company holds the right to withhold cash advance payment should additional requirements are not met.

13. CASH OPTION ON STRUCTURED POLICIES

Where a policy provides for structured funeral benefits, the Principal Member or beneficiary may elect to receive a cash payout instead of the structured benefit. In such cases, a cash handling and administration fee will be deducted from the payout, subject to a maximum of R1,500.

14. GRACE PERIOD, LAPSE AND REINSTATEMENT

A grace period of one (1) month applies after a missed premium. If two consecutive premiums are unpaid, the policy will lapse and cover will cease. Reinstatement is subject to insurer approval and may include waiting periods.

15. COOLING-OFF AND CANCELLATION

The Principal Member may cancel the policy within thirty-one (31) days of commencement and receive a refund if no claim has occurred. Thereafter, either party may cancel with one (1) month written notice. No refunds apply after cancellation.

16. CONTINUATION OPTION

Should the Principal Member cease to be a member of a group or scheme policy, the Principal Member may apply, within 30 days from the last premium payment, for conversion to an individual funeral policy, subject to underwriting acceptance. Any unexpired portion of the waiting period for natural death will continue to apply.

17. EXCLUSIONS

No benefit will be payable if death results directly or indirectly from: Suicide within the first twelve (12) months; Illegal or criminal activities; War or acts of terrorism; Radioactive contamination; a divorced spouse or person no longer legally related

18. CLAIMS AND FRAUD

Claims must be submitted within six (6) months of death with all required documentation. Fraudulent claims or misrepresentation will result in claim rejection and may lead to policy cancellation.

19. QUERIES, COMPLAINTS AND DISPUTE RESOLUTION

For queries or complaints, clients may contact the Company's Client Retention Department. If unresolved, the client has the right to refer the matter to the relevant Insurance Ombudsman.

Contact Details: Email (General): info@tifsu.co.z Email (Claims): claims@tifsu.co.za Phone: 087 330 0412 WhatsApp: 060 887 2167

20. GENERAL

This policy has no surrender value, and no loan value. Benefits may not be ceded. Policy documents will be issued within 31 days of inception. This policy is governed by the laws of the Republic of South Africa.

CLIENT DECLARATION AND SIGNATURE

I, the undersigned Principal Member, confirm that: This policy and its Terms and Conditions were explained to me in a language I understand; I understand the benefits, waiting periods, exclusions, and premium obligations; I understand that cash options may be subject to a handling fee; and I agree to be bound by these Terms and Conditions.

Principal Member Name: _____ **ID No:** _____

Signature / Thumbprint: _____ **Date:** _____

Agent Name & Code: _____ **Agent Signature:** _____