Cancer Cover

Welcome to Instant Life. We are a predominantly online insurance administrator operating from offices in Johannesburg, South Africa. Our mission is to provide simple and relevant insurance products at the lowest possible cost to our clients. Contact us at clientservices@absainstantlife.co.za or call us on 086-000-0072. Or find out more about us at www.absainstantlife.co.za. Instant Life offers you cancer cover according to the policy terms included in this document and is underwritten by Absa Life Limited, an insurer licensed to conduct life insurance business. Instant Life and Absa Life are authorised financial services providers.

Your cover	
this policy	Policy number Draft First issued 01 August 2023 Last updated 01 August 2023
'you', the policy owner	Jane Sample, born 01 January 1980, living in South Africa. As policy owner, you're the only person who can authorise changes to this policy and the proceeds of any claim under this policy will only be paid to you or to your estate.
the 'insured person'	Jane Sample, a Female, born 01 January 1980, living in South Africa, insured as a Non-Smoker. The insured person is the person whose health is insured under this policy.
cash back	Every 10 years and on 31 January 2045, being the last day of the month in which the insured turns 65, we'll give you back 20% of all your payments made since your last cash back benefit. This benefit will only be paid if the policy is still active, each payment has been paid in a timely manner, and no claim has been made.
what you're covered for	We'll pay you a lump sum of R500,000.00 if the insured person is diagnosed with cancer* requiring a major intervention such as chemotherapy, radiotherapy or surgery for the first time. (*see definitions)
what you're <u>not</u> covered for	 You're not covered for the following less invasive forms of cancer: all cancers in situ and all pre-malignant conditions, these being early stage cancer where there is no invasion of surrounding tissue. all tumours of the prostate unless classified as having progressed to at least clinical TNM classification T2N0M0.
	 all skin cancers, other than malignant melanoma that is more than 1.5 mm thick. Chronic Lymphocytic Leukaemia stage 0.
	We'll not make any payment under this policy if;
	 symptoms or diagnosis of cancer occur on or before 03 February 2024 being six months from the actual start date of this policy; or
	 the insured person fails to follow reasonable medical advice to prevent, minimise or repair the condition; or

• the insured person dies within 14 days of the claim event.

We'll not make any payment under this policy if the insured persons cancer is caused or accelerated by any of the following:

your policy starts	On 04 August 2023 . If you miss your first payment your policy will be suspended and you will not be covered until we successfully collect your first payment.
your payment	Your payment is R89.71 per month. No VAT is charged on this policy.
annual increase	Each year, on the anniversary of your cover start date, your payments will increase by 7.5% to take account of the insured person's advancing age. Additionally, we'll increase your cover each year by 5% (with a related payment increase) to keep pace with the cost of living. You can decline the 5% cover increase in any year or you can ask us to permanently exclude these cover increases. If you twice decline a cover increase, we'll no longer offer it. We'll notify you at least 20 days ahead of any payment increase.
cover ends automatically	On 31 January 2045 , being the last day of the month in which the insured person turns 65, or on the day we pay out any claim, whichever occurs first.

Eligibility

who can buy this policy	This policy can be purchased by people aged 20 to 59. A partner or spouse will need to be insured under a separate policy.
how much cover you can buy	You can buy as many policies from us as you wish. However, if you purchase Cancer Cover and/or Critical Illness Cover with us totalling more than R3 million without our written consent, we're only liable to pay out the first R3 million unless there has been full disclosure on existing and/or simultaneously applied for critical illness and cancer cover(s) which have been acknowledged by us.
misrepresentation of existing cover	It's your responsibility to provide the correct information about your existing cover with other insurers. We rely on your information to issue your policy. If you're not absolutely truthful or if you fail to disclose all relevant information to us, we can at our discretion void* (*see definitions) your policy or change the terms of your policy as we deem appropriate.
misrepresentation of income	It's your responsibility to provide the correct information about your earnings or income. We rely on your information to issue your policy. If you're not absolutely truthful or if you fail to disclose all relevant information to us, we can at our discretion void* (*see definitions) your policy or change the terms of your policy as we deem appropriate.
being truthful	It's your responsibility to be absolutely truthful with us. We rely on your information to issue your policy and pay any claim. If you're not absolutely truthful or if you fail to disclose all relevant information or misrepresent information to us, we can at our discretion void* (*see definitions) your policy or change the terms of your policy as we deem appropriate. If your claim is based on false or incomplete information we won't be liable to pay the claim and we can, at our discretion, void your policy. If, after we pay any claim, we find that it was based on false or incomplete information, all claim payments must be refunded to us.
	offer you cover or assess your risk which was not provided or disclosed at the time of the application for cover under this policy, or that which was disclosed in a prior or subsequent or separate application, will not be considered as having been disclosed unless communicated in writing to clientservices@absainstantlife.co.za and the receipt and acknowledgement thereof is confirmed in writing by Instant Life by way of an endorsement letter stating that your cover remains unaltered. Without any endorsement letter being issued, the additional information will have no bearing on this policy.

Changes

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change policy owner	When you purchase this policy you are automatically the policy owner. You cannot change or assign the ownership of this policy to anyone else.
policy changes	You can make changes to your policy at any time by going to our website and logging into myinstantlife.co.za.
contact and banking details changes	You can make changes to your contact and banking details at any time by going to our website and logging into myinstantlife.co.za. Ensuring that your details are always up to date will help ensure you receive our communication.
increase your cover	You can apply at any time to increase your cover by going to our website and logging in to myinstantlife.co.za to make the changes online. However we're not obliged to approve the increase. Our approval will depend on several factors such as your state of health and your reasons for seeking the increase. Additionally, from time to time we may approach you with an offer to increase your cover on favourable terms.
decrease your cover	We'll always reduce your cover if you request it. You can do this online at myinstantlife.co.za. There are no conditions or penalties. A decrease in your cover will decrease your ongoing payments.
change in circumstances	 You must let us know within 30 days if you: change country of residence; or travel or temporarily reside in another country for more than 42 days; or change occupation or there is a change in the nature of your occupation; or stop smoking for at least 12 consecutive months. Where this happens, the cover and payment on your policy will be reviewed and
payment reviews	could change or be cancelled. We will not change your payments for 5 years from the policy start date. After that, once a year we may review payments to determine if the experience of policies like yours has changed from what we expected at the policy start date. If we then decide to change the payments, we will let you know at least 30 days before the new payment is due.
	If we change the payments, we will not change it again for another 5 years.
Cancellation	
cooling-off period	You can cancel this policy within 31 days after receipt of the policy document. The payments made during this time will be refunded provided that no claim has been made.
cancelling this policy after the cooling-off period	You can cancel this policy after the cooling-off period by either sending us an email at cancellations@absainstantlife.co.za or calling us on 086-000-0072 15 days before your next payment date. We will immediately stop all future payments and any payments you have already made to us are not refundable. Your policy will terminate at the end of the period for which you have paid.
no cash value	The policy contains no savings, investment or surrender value, nor does it
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participate in the profits of Instant Life or Absa Life Limited. The policy has no cash value if cancelled.

Payment how we calculate Your payment is based on the cover you select and your gender, smoking habits your payments and declared state of health at the time you apply. If your health deteriorates from year to year, it has no impact on what you pay. currency All transactions are in South African Rands. payment Your payments follow a monthly cycle. They're due each month on the day of the frequency & duemonth that you select for your monthly payments. If your payment date falls on a date Saturday, Sunday or public holiday, payment will be made on the preceding working day. payment You may only pay by debit order from a South African bank account. methods banking details The banking details provided must be the banking details of the insured person or their spouse* (*see definitions). No other bank account other than those in either your name or your spouse will be accepted. If the banking details are based on false, incomplete or fraudulent information we won't be liable to pay any claim and all benefits and payments will be forfeited. additional bank Any bank charges charged by your bank to you are for your own account. charges If you miss your first payment your policy will be suspended and you will not be policy suspended for non-payment covered until we successfully collect your first payment. If this happens we'll notify you of the missed payment at your last known email address. We will not be liable to pay a claim while your policy is suspended. If you miss a payment, other than your first payment, we will grant you a grace grace period for period of 30 days in which to make up the missed payment whilst still being non-payment covered. If this happens we'll notify you of the missed payment at your last known email address. policy terminated If we do not receive payment within 30 days of a missed payment your policy will for non-payment immediately terminate. If this happens: we'll notify you of the termination at your last known email address we'll not refund any payments • we'll not be liable to pay a claim relating to any period after the cover has been terminated whether or not you received notification of the missed payment • you'll need to reapply for a new policy if you still require cover after 30 days since policy termination. However we're not obliged to approve the new application. Our approval and the payment offered will depend on several factors including your state of health. policy Your policy may only be reinstated within 30 days of termination. We will reinstatement reinstate your policy provided that all outstanding payments due to us are made.

Claims

need to assess your claim	For a cancer claim, we'll need a written opinion from a medical specialist* (*see definitions) confirming that the insured person has been diagnosed with cancer (as defined in this policy document), when symptoms of cancer first appeared and/or when the cancer was first diagnosed. Should additional information be required, this will be communicated at time of claim and we're entitled to seek a second opinion which we'll pay for. We're not obliged to pay a claim until we receive all the information we require, including the result of HIV tests. It's your responsibility to ensure that the HIV test results indicated in your application are made available to us when any claim is made.
	A fraudulent claim, or use of any fraudulent means, false information or knowingly allowing anyone to act on your behalf to provide false information to obtain a benefit will result in immediate termination of the policy and all benefits and payments made in respect of this policy will be forfeited. We may further, initiate legal action against the defrauding party.
	To lodge a claim either: • visit our website: www.absainstantlife.co.za or • send an email to: claims@absainstantlife.co.za or • call us on 086-000-0072
who we pay	The proceeds of any claim paid under this policy will only be paid to you, the policy owner.
	There is a time limit of 180 days from the date of the claim event to submit a claim. Once a claim is submitted there is a time limit of 180 days to submit all required information. If either of these timelines are not met the claim may become void.
	An unclaimed benefit is a benefit that has not been paid to you because a claim was not submitted or we were not able to contact or locate you or a claimant.
Compliance	
we protect your privacy	All information you provide us will be held securely and confidentially. The only use of this information will be to process your application and any claim and to administer your policy. From time to time we may wish to offer you other products, however, if you don't want this information you can request that we don't send it to you.
South African law applies	This policy is governed by South African law. Any legal action in relation to this policy must be conducted in South Africa.
the underwriter	The underwriter of this policy is Absa Life Limited, an insurer licensed to conduct life insurance business, and a registered Financial Service Provider under the

Financial Advisory and Intermediary Services Act.

Definitions

cancer	Cancer is a disease characterised by the uncontrolled growth of malignant cells that destroy tissue and are able to spread through the body via lymph or blood. Cancer typically invades organs such as the lungs, breast, prostate, bowel, liver, kidney, brain, bone, colon, spleen, cervix, testes and vagina and also includes leukaemia, Hodgkin's lymphoma, non-Hodgkin's lymphoma and malignant melanoma.
medical specialist	A practicing medical specialist, licensed to practice his or her medical specialty within South Africa, Botswana, Namibia, Israel, UAE, the European Union, UK, USA, Canada, Australia, New Zealand, Hong Kong, Singapore, Japan or South Korea and whose specialty qualifies him or her to make a diagnosis related to cancer.
smoker	Means a person who has smoked a cigarette or any form of tobacco or nicotine, including vaping, in the past 12 months.
spouse	Means person you are married to or your life partner or who you have been living with for at least 6 months.
to 'void' your policy	This means your policy will be considered never to have existed, payments you have made may not be refunded at our discretion and no claim will ever be paid.
we, our, us	'We', 'our' or 'us' means Instant Life and /or Absa Life Limited.
cancer	Cancer is a disease characterised by the uncontrolled growth of malignant cells that destroy tissue and are able to spread through the body via lymph or blood. Cancer typically invades organs such as the lungs, breast, prostate, bowel, liver, kidney, brain, bone, colon, spleen, cervix, testes and vagina and also includes leukaemia, Hodgkin's lymphoma, non-Hodgkin's lymphoma and malignant melanoma.
medical specialist	A practicing medical specialist, licensed to practice his or her medical specialty within South Africa, Botswana, Namibia, Israel, UAE, the European Union, UK, USA, Canada, Australia, New Zealand, Hong Kong, Singapore, Japan or South Korea and whose specialty qualifies him or her to make a diagnosis related to cancer.
you, your, me, my	'You', 'your', or 'me', 'my' means the policy owner.

How you answered our application

When you applied for this policy on **01 August 2023** we asked you, Jane Sample, the following questions and these were your answers;

Have you ever had an HIV test?	No
Do you currently have or have you ever suffered from any serious condition or a condition that requires ongoing medical care or treatment, for example hypertension, diabetes, cholesterol, asthma, heart attack, stroke etc.?	No
Do you have any condition or ailment that impairs your abilities for example blindness, depression, back or joint problems or loss of hearing?	No
In the last 2 years, were you prescribed chronic medication for more than 2 weeks or been hospitalized for more than 4 nights?	No
Have you had an application for life insurance being declined or denied, postponed or charged an additional premium, or have you made a claim from any long term insurance benefit?	No
Will you be seeing a doctor for medical tests or treatment or, are you waiting for results of tests done recently?	No
What is your height (cm)?	175
How much do you weigh (kg)?	75

Additional information you provided us

You also provided us this additional information... read through and confirm it's accurate; your answers;

Insured person's details

first name Jane middle name last name Sample email sample@instantlife.co.za alternate email mobile 654321 other phone SA ID / phone 000000000000 qualification post-graduate degree monthly 000000000000 qualification post-graduate degree monthly R50,000.00 monthly R20,000.00 monthly R50,000.00 monthly R20,000.00 income Cspouse) R20,000.00 Accountant Industry Finance and Banking Occupation Accountant In your No Vorgettion Accountant occupation doctors name doctors name income Salary doctors name medical aid existing cover R0.00				
email sample@instantlife.co.za alternate email mobile phone 654321 other phone SA ID / passport number 000000000000 qualification post-graduate degree monthly income R50,000.00 monthly income R20,000.00 employment status Full Time Employed occupation category Accountant Industry Finance and Banking Occupation Accountant In your current occupation da you spend at least 75% of your time working at a desk, either in an office or at home? No source of income Salary doctors name	first name	Jane	middle name	
mobile phone 654321 other phone SA ID / passport number 000000000000 qualification post-graduate degree monthly income R50,000.00 monthly income (spouse) R20,000.00 employment status Full Time Employed occupation category Accountant Industry Finance and Banking Occupation Accountant In your current occupation do you spend at least 75% of your time working at a desk, either in an office or at home? No source of income Salary doctors name	last name	Sample		
phone SA ID / passport 000000000000 qualification post-graduate degree monthly income R50,000.00 monthly income (spouse) R20,000.00 employment status Full Time Employed occupation category Accountant Industry Finance and Banking Occupation Accountant In your current occupation do you spend at least 75% of your time working at a desk, either in an office or at home? No source of income Salary doctors name	email	sample@instantlife.co.za	alternate email	
passport monthly R50,000.00 monthly R20,000.00 income (spouse) R20,000.00 monthly R20,000.00 employment Full Time Employed occupation Accountant status Finance and Banking Occupation Accountant Industry Finance and Banking Occupation Accountant In your No Current Occupation Accountant occupation do you spend at least 75% of your time Working at a desk, either in an office or at home? Source of Salary doctors name Doctors name		654321	other phone	
income income (spouse) employment status Full Time Employed occupation category Accountant Industry Finance and Banking Occupation Accountant In your current occupation do you spend at least 75% of your time working at a desk, either in an office or at home? No source of income Salary doctors name	passport	00000000000	qualification	post-graduate degree
status category Industry Finance and Banking Occupation Accountant In your No In your No current occupation do you spend at least 75% In your time working at a desk, either in an office or at home? source of income Salary doctors name		R50,000.00	income	R20,000.00
In your No current occupation do you spend at least 75% of your time working at a desk, either in an office or at home? source of Salary doctors name		Full Time Employed		Accountant
current occupation do you spend at least 75% of your time working at a desk, either in an office or at home? source of Salary income Salary	Industry	Finance and Banking	Occupation	Accountant
income	current occupation do you spend at least 75% of your time working at a desk, either in an office or	No		
medical aid existing cover R0.00		Salary	doctors name	
	medical aid		existing cover	R0.00

Insured person's postal address

address	sample street	suburb	sample suburb
city	sample city	postal code	12345
country	South Africa	physical same as postal address	Y
nsured p	erson's physical addı	ress	
nsured p	erson's physical addr	-ess suburb	sample suburb
			sample suburb South Africa

Declaration

It's your responsibility to be truthful with us and to disclose all information that is relevant to our decision to provide you cover. Any misrepresentation or non-disclosure may result in us refusing to pay any claim and/or amending the terms of this policy or voiding this policy.

I, Jane Sample, ID 000000000000, through my electronic acknowledgement confirm that:

- the information in this application is true and correct; and
- the person that will make the monthly payments is the insured person or their spouse; and
- I am aware of no other circumstances which might render me to be more likely to claim than the average member of the community; and
- I am aware of no other information which might be relevant to Instant Life's decision to offer me cover; and
- the questions and answers pertaining to my health and lifestyle are true and correct and I understand and agree to abide by the terms set out in this policy document; and
- I consent to the exchange of any information between Instant Life and any medical or other institution even after my death; and
- I have read the Legal disclosure and I have made an informed decision; and
- I hereby voluntarily provide informed consent for the processing of special personal information as supplied for on this form/call for the product/services being applied for.

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By ticking this box I confirm all of the above

I cannot confirm, because there are other circumstances which might be relevant to your decision to provide me cover. I would like Instant Life to contact me.

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