

FUNERAL COVER - CLAIM

1. POLICY DETAILS

Name of employer

2. YOUR DOCUMENT CHECKLIST

<input type="checkbox"/> The deceased's ID/passport with visible photograph, watermarks and legible text.	<input type="checkbox"/> Certified copy of death certificate (serial numbers must be visible) and notice of death form DHA 1663.
<input type="checkbox"/> The claimant's ID/Passport with visible photograph, watermarks and legible text	<input type="checkbox"/> In addition, if foreign national, a certified copy of deceased's passport and DHA 20.
<input type="checkbox"/> The claimant's proof of address (not older than 3 months).	<input type="checkbox"/> Claimant's proof of bank details from e.g. bank confirmation letter or bank statement.
<input type="checkbox"/> If unnatural cause of death – a police declaration clearly describing incident.	<input type="checkbox"/> Payslip as at date of death.
<input type="checkbox"/> Fully completed beneficiary nomination form.	

Death of a spouse

<input type="checkbox"/> Certified copy of marriage certificate OR: proof of customary or religious marriage OR: affidavit from independent third-party confirming relationship to member, e.g. tribal chief/community leader/minister of religion.	<input type="checkbox"/> The deceased's ID/passport with visible photograph, watermarks and legible text.
---	---

Death of a child

<input type="checkbox"/> Children older than 21, studying and financially dependent: proof of registration, most recent report card and/or confirmation of enrollment from the institution.	<input type="checkbox"/> The deceased's unabridged birth certificate.
<input type="checkbox"/> If unabridged birth certificate is not available: affidavit from independent 3rd party confirming relationship e.g. tribal chief/community leader/minister of religion	<input type="checkbox"/> If stillbirth, a doctor's note or DHA 1663 confirming gestation period at date of death and certified copy of mother's clinic card or Stillbirth Confirmation Report.

Death of a parent

<input type="checkbox"/> The deceased's ID/passport with visible photograph, watermarks and legible text.	<input type="checkbox"/> Affidavit from independent third-party confirming relationship to member, e.g. tribal chief/community leader/minister of religion.
---	---

PLEASE NOTE: ADDITIONAL DOCUMENTATION MAY BE REQUESTED IF NEEDED.

Initial here

FEDGROUP LIFE LIMITED

Fedgroup Financial Holdings (Pty) Ltd. is a licensed controlling company and companies within the Group are authorised FSPs.

Fedgroup Life Ltd. is a licensed life insurer. Reg. no. 2007/018003/06. FSP License no. 40607.

89 Bute Lane, Sandton. PO Box 782823, 2146. **T:** 011 305 2300

www.fedgroup.co.za

3. EMPLOYEE DETAILS

Full name/s	Surname	
Identity/passport number (if foreign national)	Date of birth DD - MM - YYYY	Contact number

4. DECEASED DETAILS

Principal Insured
 Spouse
 Child
 Parent
 Parent-in-law

Full name/s	Surname	
Identity/passport number (if foreign national)	Date of birth DD - MM - YYYY	Contact number

5. PAYMENT DETAILS FOR FUNERAL COVER CLAIM

To ensure fast payment and for your protection, payment will only be made by electronic fund transfers. Payment will only be made to the employee, nominated or default beneficiary or the estate of the deceased.

Name of account holder

Name of bank	Account number
Account type	Branch name

Please ensure that the above information is correct. Fedgroup Life will not be held responsible for delays, bank charges, penalties or damages due to incorrect details provided. A fee may be deducted from any payment returned to Fedgroup due to incorrect details.

Qualifying grocery and/or Transport benefits will be paid into the banking details noted above:

- Members that qualify for the grocery benefit are members with the option selected under their funeral benefit or members who have a life cover benefit with Fedgroup.
- Members that qualify for the transport benefit are members with the option selected under their funeral benefit.

Initial here

FEDGROUP LIFE LIMITED

Fedgroup Financial Holdings (Pty) Ltd. is a licensed controlling company and companies within the Group are authorised FSPs.

Fedgroup Life Ltd. is a licensed life insurer. Reg. no. 2007/018003/06. FSP License no. 40607.

89 Bute Lane, Sandton. PO Box 782823, 2146. **T:** 011 305 2300

www.fedgroup.co.za

6. DECLARATION BY EMPLOYER

We, the undersigned, hereby declare that the deceased qualified for benefits in terms of the Fedgroup Life Risk Policy at the date of death, that the above information is complete and correct, and that we recommend that the claim be admitted. I hereby warrant that I have been duly authorised by the employer to sign this form on its behalf

Employer/Line Manager full name/s	Surname

Authorised representative's signature

Date

DD - MM - YYYY

7. DECLARATION BY CLAIMANT

In my capacity as the Claimant, I declare and warrant that all statements and answers which may now or at the time be given in connection with this claim, whether in my handwriting or not, are true and complete. I further understand that any incorrect statements or non-disclosure, which materially affects the assessment of this claim, will entitle Fedgroup Life to declare this claim null and void.

Claimant's signature

Date

DD - MM - YYYY

On completion, please send this form with supporting documents to Phakama - claims@phakama.co.za

Keep me updated about your products and services

Y

N

8. LEGAL STUFF

Dotting your i's and crossing your t's. We have gathered all the important elements relating to our products here. To make it easy for you to familiarise yourself with this information, we have provided a summary of this below.

For the full version of our Legal stuff, please visit: www.fedgroup.co.za/Legal-Stuff



DECLARATION

In the financial services space, we need confirmation of the information you have provided and the information provided to you. This section houses all the relevant declarations.

POPIA

Ever wondered what happens to your information after you have provided it, or why you have to provide certain types of information? In this section, we explain what we do with your data and outline how it is used by all the companies within our

broader group. Fedgroup and its activities fall under the provisions of the Protection of Personal Information Act.

FICA

We need to make sure that you are who you say you are, just like those websites that ask you to identify all the images with stop signs in them. Only, this is a pretty serious security matter driven by the Financial Intelligence Centre Act. While it can be time consuming, we've made it super simple via the Fedgroup App.

TERMS AND CONDITIONS

Ts and Cs are the norm with most providers. In order to help you understand exactly what our offering is and how we deliver it, we've put together comprehensive terms and conditions to ensure that our stakeholders are not prejudiced by individuals looking to manipulate any unforeseen loopholes.

FEDGROUP LIFE LIMITED

Fedgroup Financial Holdings (Pty) Ltd. is a licensed controlling company and companies within the Group are authorised FSPs.

Fedgroup Life Ltd. is a licensed life insurer. Reg. no. 2007/018003/06. FSP License no. 40607.

89 Bute Lane, Sandton. PO Box 782823, 2146. **T:** 011 305 2300

www.fedgroup.co.za