

When paying your claim, we shall consider the first day of your hospitalisation to be the day you are registered as an in-patient.

WHAT WE DO NOT PAY FOR

We shall not pay any benefit if your hospitalisation arises directly or indirectly from any of the following:

- If you are hospitalised as a result of a reason listed in Section 3 “What We Do Not Pay For”;

SECTION 6 - MAXIMUM BENEFITS PAYABLE

The maximum benefit payable in the event of Your death, critical illness, hospitalization or retrenchment under this policy, together with any other policy issued by the insurer for the Hub is up to R15000 of the account balance owed to the Hub. Upon the happening of any event giving rise to a claim under the terms of this policy, all rights will be ceded to the credit provider and all benefits will be credited to Your account.

SECTION 7 - CLAIMS

At the date of any claim, your premiums and your Hub Account balance must be paid up to date. If 3 or more premiums are unpaid, the policy will be terminated.

All claims must be notified as soon as possible and no later than 120 days after the insured event by contacting the Hub, or by writing to the HUB (Pty) Ltd, Private Bag X03, Mount Edgecombe, 4300.

A claim form can either be sent to You or can be obtained at any Hub store. You must return it to the Hub within 30 days of receipt. Please ensure that all sections of the claim form are fully completed and relevant documents are enclosed and sent to the administrator.

Should You need any help in completing Your claim form, please contact the administrator at the Hub.

Should a claim be rejected by Guardrisk Life Limited, you will be notified within 10 days in writing.

SETTLING A CLAIM

We will need proof of Your death, critical illness, retrenchment or hospitalisation and the circumstances leading to Your claim. A death claim must be notified in writing and We will need to see a certified copy of Your death certificate and a certified copy of Your ID Book. If You are claiming for critical illness or hospitalisation, we will require a doctor’s certificate confirming your condition.

We may ask You to go for a medical examination with a doctor appointed by Us. We will pay the cost of the examination. If You are claiming for retrenchment, We will require confirmation from Your employer that you were retrenched. During the period of a claim, we will require proof that You have remained unemployed. You must pay any costs of obtaining this proof. We may ask for other evidence in support of Your claim.

If You have other insurance covering the same loss, We will settle Your claim on a proportionate basis. A claim that is accepted by Us as a completed and genuine claim, will be settled within 30 working days.

SECTION 8 - WHEN THE COVER ENDS

Your insurance cover under the policy will end and no further benefit will be payable, as soon as one of the following occurs:

- A benefit is paid in respect of death, critical illness or hospitalisation;
- You attain the age of 70;
- You fail to pay the monthly premium;
- You advise us that the policy should be cancelled;
- We advise You that Your insurance cover has ended.

SECTION 9 - GENERAL CONDITIONS

If You do not keep to the terms and conditions of the policy, You will not be entitled to any benefit under the policy. If You gave false or misleading information when You applied for cover under the policy, and this information affected the decision to insure You, Your cover under the policy will end and We will not pay any benefit.

If You give false or misleading information when You make a claim, You will not receive any benefit under the policy and Your cover under the policy will end.

If any benefit is paid as a result of Your false claim, You will have to repay any benefit You have received and We will take legal action against You.

The contract between You and Us is made up of the policy, any endorsement, any written statement of Your medical conditions and any other information provided by You including that in Your credit application. The rights under the policy cannot be transferred to anyone else and the policy cannot be used to protect any person other than You.

You are to inform the administrator within 30 days, of any change in Your personal details or those of Your partner, if Your Partner is a life assured, from those originally stated on Your application form when You applied for cover. When Your cover under the policy ends it will not have a cash value.

We have the right to change your insurance cover under the policy. You will be told at least 30 days before the change takes effect.

For the purposes of disclosure of private underwriting and claims information, You consent and acknowledge that the sharing of claims information and underwriting information (including credit information) by Insurers, is essential to enable the Insurance Industry to underwrite policies and assess risks fairly and to reduce the incidence of fraudulent claims, and accordingly, You waive any rights of privacy of insurance information in respect of any claim made. You also acknowledge that the information provided by You may be verified against other legitimate sources or databases.

You also waive any rights of privacy and consent to the disclosure of any information relevant to any insurance policy or claim concerning You.

The law of South Africa governs this policy.

SECTION 10-CANCELLATION

A policy may be cancelled at any time by giving notice in writing. This cancellation notice period is 30 days from written confirmation.

Should you fail to pay the required premium, Hub Club fees or Account payments, we will notify you in writing of termination of this policy – you will have 30 days to rectify or your policy will be cancelled.

I, the policy applicant, have received and understood the terms and conditions herein.

Surname:

First Name(s):

Account Card No.

SIGNATURE OF ACCOUNT HOLDER:

Date of Signature

If there is anything that you do not understand, or you find that you are not covered for something you have asked for, or you wish to review your cover, please telephone The Hub (Pty) Limited on 0861 88 88 99 between 8:30am and 4:30pm, Monday to Thursday and 8:30am to 3:00pm Friday.

Policies are administered by The Hub (Pty) Limited Registration No. 2004/033029/07, otherwise referred to as “HUB”, 20 Marshall Drive, Mount Edgecombe, 4302, Durban or Private Bag X03, Mount Edgecombe, 4300.

The Hub (Pty) Ltd is licensed in terms of the Financial Advisory and Intermediary Services Act 37 of 2002 (“FAIS Act”), FSP Number 38683.

All Hub Financial Services products are underwritten by Guardrisk Life Limited, a subsidiary of MMI Holdings.

the Hub

SUPERIOR ACCOUNT PROTECTION

PLAN GROUP POLICY

GROUP POLICY NUMBER: SAPP791(2)

PROVIDES DEATH, CRITICAL ILLNESS, HOSPITALISATION
AND RETRENCHMENT BENEFIT

In return for You paying the premium and continuing to meet all the conditions for cover, if Guardrisk Life Ltd (Guardrisk) accepts the premium, it will provide insurance cover under the Hub Superior Account Protection Plan Group Policy, as described in this document.

SECTION 1 – DEFINITIONS

Words appearing in this contract in bold print have specific meanings which are explained below:

Administrator

The Hub (Pty) Ltd.

Agreement

The card or club agreement through which You have arranged insurance cover under the policy.

Financial Services Provider

The Hub (Pty) Ltd has been licensed in terms of the Financial Advisory and Intermediary Services Act 37 of 2002 (“FAIS Act”), FSP Number 38683. According to the FSP Licence, The Hub is authorised to render intermediary Services in respect of Long-Term Insurance Product Category: A, B1 and V. A copy of our FSP licence and the conditions of the licence are available on request.

Cancer

Malignant tumours characterised by the uncontrolled growth and spread of malignant cells and invasion of tissue. This includes leukaemia and Hodgkin's Disease but excludes non-invasive cancers in situ and skin cancer other than malignant melanoma.

Coronary Artery Disease Requiring Bypass Surgery

A condition for which you undergo open-heart surgery on the advice of a Consultant Cardiologist to correct narrowing or blockage of one or more coronary arteries with by-pass grafts. No cover will be provided in respect of non-surgical techniques such as balloon angioplasty or laser relief.

Critical Illness

One or more of the following conditions: heart attack, cancer, stroke, major organ transplant, coronary artery disease requiring bypass surgery and kidney failure. Critical illness must be confirmed by a doctor with the appropriate specialist knowledge.

Doctor

A medical practitioner registered with the South African Medical and Dental Council. The doctor who confirms your condition when you are making a claim cannot be you, a relative or a close friend.

End Date

The last day of Your insurance cover as defined in Section 8 "WHEN THE COVER ENDS".

Full-time Employment

When You are working for at least 20 hours a week and receiving a salary or wages under a contract of employment that does not have a known or implied finish date.

Hazardous Pursuit

Flying other than as a fare paying passenger, hang gliding, ballooning, land and water-based motor sports, winter sports, sub aqua diving, mountaineering, and any other activity which would reasonably be expected to enhance the chance of a claim under the policy.

Heart Attack

The death of a portion of the heart muscle as a result of inadequate blood supply as evidenced by an episode of chest pains, new electro-cardiographic changes and elevation of cardiac enzyme levels.

Hospitalisation

Being admitted to hospital and registered as an in-patient because of an accident or illness.

Kidney Failure

End stage renal failure resulting in chronic irreversible failure of both kidneys, as a result of which regular renal dialysis or a renal transplant is required.

Major Organ Transplant

The receipt of a heart, liver, lung, kidney, pancreas or bone marrow by means of a transplant.

Insurer / We / Us / Our

Guardrisk Life Limited.

Monthly Instalment

The sum You must pay to the Credit Provider each month in respect of the agreement.

Period of Insurance

The period between the start date and the end date for which You have paid the premium and We have agreed to accept it. The first period of insurance begins at the start date and all periods of insurance must be consecutive.

Policy

The Hub Superior Account Protection Plan Group Policy.

Policyholder

Guardrisk Life Limited – Cell number 57.

Premium

The monthly premium You must pay Us for cover under the policy.

Retrench / Retrenchment

Termination of Your work by Your employer due to adverse business conditions, the liquidation of the company, or the introduction of new technology, or the re-organisation of Your employer's business, resulting in staff reductions. You must be in full-time employment and not self-employed to be eligible for this cover.

Self-employed

Means you work for yourself or your own legal entity/trust; you govern your own hours of work and that your income does not fall in the scope of the 4th schedule of the income tax act.

Start Date

The date Your agreement starts. For Critical Illness and Hospitalisation benefits, this shall be deemed to be the 1st July 2010.

Stroke

A cerebrovascular incident lasting more than 24 hours and resulting in permanent neurological damage. Evidence of permanent neurological deficit must be produced.

Unemployed/Unemployment

When You:

- Are entirely without work, including assisting, managing and or carrying out of any part of the day to day running of a business;
- Are not receiving any earnings from employment including payment in lieu of notice;
- Are available for and actively seeking work and can provide evidence of this.

Work/Working

Full-time employment.

You/Your

A person, including a Partner who is eligible and has been accepted for insurance cover under the policy.

SECTION 2 - ELIGIBILITY

To be eligible for cover under the policy, You must meet the following conditions at the start date:

- You must be a Hub Account holder to qualify for this Policy;
- Your Hub Account balance/instalment must be paid up to date;
- You must be the first named person on the SAPP application form, or be specified as the Partner of the first named person;
- You must be at least 18 and less than 65 years of age on the date of application for cover;
- You must be in good health;
- You must have full time employment continuously for 6 months immediately before the start date and be a registered employee;
- You must work, live and have the right to reside permanently in South Africa;
- You must not be aware of any impending unemployment;
- You must apply for cover and pay the premium;
- You must agree to keep to the terms and conditions of the policy.

SECTION 3 - LIFE COVER AND CRITICAL

ILLNESS COVER

WHAT WE WILL PAY

If You should die or suffer from a critical illness during the period of insurance, We will pay the outstanding balance of Your Hub account at the date the insured event occurred:

- Up to R15 000.

WHAT WE DO NOT PAY FOR – LIFE COVER

We will not pay any benefit if Your death arises directly or indirectly from any of the following:

- A self-inflicted injury, suicide or a suicide attempt;
- Any condition You had at the start date;
- Any condition for which You have received treatment or advice during the 12 months immediately before the start date;
- War, riot, radioactive contamination, nuclear accidents and similar risks;
- Your participation in a criminal act;
- Your participation in a hazardous pursuit;
- You being under the influence or above the legal limit of alcohol intake or drug abuse;
- Refusing medical treatment as recommended by Your own medical practitioner.

WHAT WE DO NOT PAY FOR – CRITICAL ILLNESS COVER

We will not pay any benefit if Your critical illness arises directly or indirectly from any of the following:

- Any condition for which the life cover will not pay;
- Any condition which arises within 90 days of the start date;
- Any condition for which you had received treatment or advice for during the 12 months immediately before the start date;
- Pregnancy, childbirth, the ending of pregnancy or any related complication;
- A medical procedure undertaken at your request which is in the opinion of a doctor not necessary to maintain the quality of your life;
- Unreasonable failure to obtain or follow medical advice;
- A critical illness arising while you are working outside of

South Africa.

SECTION 4 - RETRENCHMENT COVER

WHAT WE WILL PAY

If during a period of insurance You are retrenched due to new technology, re-organisation by the employer, liquidation of the company or staff reductions and remain unemployed for more than 90 continuous days, We will pay a benefit equal to the outstanding balance of Your account with Hub at the date the retrenchment occurred.

The claim must be submitted immediately on You being retrenched. You must return to work for at least 12 continuous months before You can make another claim for a retrenchment benefit.

WHAT WE DO NOT PAY FOR

We will not pay the monthly benefit if Your unemployment arises directly or indirectly from any of the following:

- If at the start date You knew or had reason to believe You might lose Your job;
- You had not been working continuously for the 12 months immediately before retrenchment occurred;
- You lose your job following the end of casual, seasonal, temporary or occasional work;
- You come to the expected finish date of a fixed term contract or You finish the job You were specifically employed to do;
- You resign or You accept voluntary unemployment;
- You lose Your job because of any strikes which You took part in or any lock out by Your employer;
- You lose Your job as a result of nationalisation or other government action;
- You lose Your job because of misconduct, fraud, dishonesty or any such acts carried out by You;
- If Your employer, branch, office or business is outside of South Africa;
- You lose Your job as a result of a reason listed in Section 3 "WHAT WE DO NOT PAY FOR".

SECTION 5 - HOSPITALISATION COVER

WHAT WE WILL PAY

If during a period of insurance you are hospitalised for more than 14 consecutive days, we shall pay a benefit equal to your outstanding balance of Your account with Hub at the date you were admitted to hospital as an in-patient. To receive the hospitalisation benefit you must:

- Have been in work when the hospitalisation occurred;
- Be under the continuous care of a doctor in respect of the reason for hospitalisation;
- Be prevented from working only as a result of this hospitalisation;
- Give us any evidence we may request to prove your claim is valid and continues to be so.