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Terms and Conditions: DirectAxis Personal Loan Customer Protection Plan

The DirectAxis Personal Loan Customer Protection Plan ("the Plan"), which is a mandatory Credit Life Insurance policy, is subject to the terms, conditions and exclusions set out in this document.

1. Who is the insurer?

FirstRand Life Assurance Limited ("FirstRand Life") is the insurer. Any reference to "we, us, our, ourselves" in this document shall mean FirstRand Life or DirectAxis SA (Pty) Ltd, as the case may be.

2. Who is covered under the Plan?

The person covered under the Plan is the one who is listed in the Quotation for a DirectAxis Personal Loan and who entered into a valid Credit Agreement ("**Credit Agreement**") with DirectAxis Loans. The insured person is referred to as "you, your, yourself" in this document". You are only covered for the benefits set out in these Terms and Conditions.

3. What risks are you covered for (benefits)?

Your cover is based on the disclosure of your employment status at date of application for this Plan:

- In the case of your Death or Permanent Disability, the outstanding balance of your total obligations under the Credit Agreement will be settled.
- If you are diagnosed with any of the listed **Critical Illnesses**, the outstanding balance of your total obligations under the Credit Agreement will be settled.
- If you become **Temporarily Disabled**, all your obligations under the Credit Agreement that become due and payable will be paid for up to12 months, during the Remaining Repayment Period of the Credit Agreement, or until you are no longer disabled, whichever is the shorter period. You will be allowed to make multiple claims for Temporary Disability for the duration of your Plan. However, the claims made must not be related to the same Temporary Disability event.
- If you become Unemployed or if you are Unable to Earn an Income, other than as a result of Permanent or Temporary Disability, all your obligations under the Credit Agreement that become due and payable will be paid for up to 12 months, during the Remaining Repayment Period of the Credit Agreement, or until you are able to find employment or earn an income, whichever is the shorter period. You will be allowed to make multiple claims for being Unemployed or Unable to Earn an Income for the duration of the Plan. However, the claim must not be related to the same Unemployment or Inability to Earn an Income event and must not be with the same employer.

We are entitled to request confirmation of your employment or medical status as we deem fit at any time in any form to confirm your continued Unemployment or Inability to Earn an Income or Temporary Disability. If we pay a claim for Temporary Disability or Unemployment or Inability to Earn an Income, we will waive your monthly premium for the period during which we pay the benefit. We will pay the amounts on the due dates of the instalments, starting on the first due date after the date when the claim arose.

4. Covered risk events definitions

- Critical Illness means the insured person being diagnosed with one of the four SCIDEP defined Critical Illnesses (Severe Cancer, Coronary Artery Bypass Graft, Heart Attack and Stroke) provided that they are classified as severe by a Specialist. Critical Illness also means Coma, Kidney Failure, Major Organ Transplant and Third-Degree Burns as defined in these Terms and Conditions.
- **Disability** means you becoming physically or mentally impaired, whether totally or partially, or temporarily or permanently, such that your ability to earn an income or meet the obligations under the Credit Agreement is impaired, and includes, but is not limited to, Occupational Disability. This can either be:
 - **Permanent** or **Permanently** means Disability that is irreversible and continuous;
 - Temporary or Temporarily means Disability that lasts for more than a month but is not Permanent.
- Occupational Disability means a form of disability where your impaired ability to earn an income or meet the obligations under the Credit Agreement arises from a physical or mental impairment, which renders you unable to continue your employment, own occupation, profession, or trade.
- **Specialist** means a medical practitioner, as defined in the Health Professions Act 56 of 1974, who has undergone further medical education in a specific field of medicine relevant to your diagnosis, by completing a multiple year residency and practices and is registered as such at the Health Professions Council of South Africa.
- Stroke is defined as irreversible death of brain tissue caused by inadequate blood supply or haemorrhage within the skull. A Specialist must diagnose a new acute Stroke and this diagnosis must be supported by findings on brain imaging. The Stroke must result in a permanent objective neurological deficit that is evident on physical examination. Severity of the Stroke will be assessed by a full neurological examination by a Specialist neurologist any time after three months after the onset of the Stroke.

- For the above definition, the following are not covered:
 - Transient Ischemic Attack (TIA);
 - o Brain damage due to an accident or injury;
 - Disorders of the blood vessels affecting the eye including infarction of the optic nerve or retina;
 - Migraine and vestibular disorders; and
 - Asymptomatic silent stroke found on imaging.

A Stroke (definition as above) is severe if there is severe impairment and you need constant assistance, as measured by:

- The inability to do three or more basic activities of daily living (ADL); or
- A Whole Person Impairment (WPI) of greater than 35%.

WPI figures are calculated as per the American Medical Association Guides to the Evaluation of Permanent Impairment (6th Edition).

- Basic Activities of Daily Living (ADL): Includes:
 - Bathing the ability to wash/bathe oneself independently.
 - Transferring the ability to move oneself from a bed to a chair or from a bed to a toilet independently.
 - Dressing the ability to take off and put on one's clothes independently.
 - Eating the ability to feed oneself independently. This does not include the making of food.
 - Toileting the ability to use a toilet and cleanse oneself thereafter, independently.
 - Locomotion on a level surface the ability to walk on a flat surface, independently.
 - Locomotion on an incline the ability to walk up a gentle slope, or a flight of steps independently.
- **Cancer** is defined as any malignant tumour characterized by the uncontrolled growth of malignant cells and invasion of tissue. The term Cancer includes, but is not limited to, leukaemia, sarcoma, and lymphoma, unless excluded below. The diagnosis must be made by a Specialist and confirmed with a pathology report.
- In terms of the above definition, the following are excluded:
 - All tumours which are histologically described as benign, pre-malignant, borderline malignant, or have low malignant potential;
 - Any tumour classified as carcinoma in-situ (Tis) or Ta by the AJCC Cancer Staging Manual;
 - All non-melanoma skin cancers and
 - Prostate cancer unless histologically classified as having a Gleason score greater than 6 or having progressed to at least stage T2N0M0 as classified by the AJCC Cancer Staging Manual.
- Severe Cancers of all types, except prostate, leukaemia, lymphoma and brain tumours, are defined as Stage 4 cancer in the general classification used by the American Joint Committee for Cancer for the type of Cancer involved.

Severe prostate Cancer

	Any T, N1 – 3, M0 any Gleason
	Any T, any N, M1, any Gleason

• Severe leukaemia and lymphoma

This benefit will pay for any one of the following diagnoses:

- Acute Myeloid Leukaemia;
- Chronic Lymphocytic Leukaemia, Stage III or IV on the Rai classification;
- Chronic Myeloid Leukaemia (requiring bone marrow transplant);
- Acute Lymphocytic Leukaemia (adults);
- Hodgkin's/Non-Hodgkin's lymphoma Stage IV on Ann Arbor classification system; or
- Multiple Myeloma Stage III on the Durie-Salmon Scale.

• Severe brain tumours

WHO grade IV	On diagnosis
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• Coronary Artery Bypass Graft (CABG) is defined as the actual undergoing of open-heart surgery or minimally invasive surgery, to correct narrowing or blockage of two or more coronary arteries with insertion of bypass graft(s). The surgery must have been deemed necessary by a Specialist.

In terms of the above definition, the following are not covered:

- Coronary angioplasty;
- o Stent insertion; and
- All other intra-vascular catheter-based procedures.
- Heart Attack is defined as death of a portion of the heart muscle as a result of inadequate blood supply. A Specialist must make the definite diagnosis of an acute myocardial infarction. All three (3) of the following criteria must be present and consistent with the diagnosis of an acute myocardial infarction:
 - Clinical symptoms;
 - Characteristic electrocardiographic changes; and
 - The characteristic rise above accepted normal values of biochemical cardiac specific markers.

In terms of the above definition, the following are not covered:

- Angina, stress (Takotsubo) cardiomyopathy and all other forms of acute coronary syndromes.
- Severe Heart Attack is defined as the death of heart muscle, due to inadequate blood supply, as evidenced by any of the following combinations of criteria:
 - Compatible clinical symptoms AND raised cardiac biomarkers; or
 - Compatible clinical symptoms AND new pathological Q-waves on ECG as defined in Annexure A (b); or

- New pathological Q-waves on ECG as defined in Annexure A (b) AND raised cardiac biomarkers; or
- ST-segment and T-wave changes on ECG indicative of myocardial injury as defined in Annexure A (a) AND raised cardiac biomarkers.

Where raised cardiac biomarkers are referenced above, they are defined as any one of the following Troponin or Non-Troponin Markers:

Sensitive Troponin Markers Marker		Value**	
*Assay (test)	Troponin Type	Unit: ng/L	Unit: ng/ml
Roche hsTnT	TnT	> 1000	> 1,0
Abbott ARCHITECT	Tnl	> 3000	> 3,0
Beckman AccuTnI	Tnl	> 5000	> 5,0
Siemens Centaur Ultra	Tnl	> 6000	> 6,0
Siemens Dimension RxL	Tnl	> 6000	> 6,0
Siemens Stratus CS	Tnl	> 6000	> 6,0

*Use the relevant manufacturer's assay (test) or equivalent as it appears on the laboratory report.

**Values represent multiples of the World Health Organisation (WHO) MI rule in levels and not the 99th percentile values (upper limit of normal) as quoted on the laboratory result.

Marker		Value	
Assay (test)	Troponin Type	Unit: ng/L	Unit: ng/ml
Conventional TnT	TnT	>1000	>1,0
Conventional AccuTnI***	Tnl	>500	>0,5

*** or equivalent threshold with other Troponin I methods.

Non-Troponin Markers:

Marker	Value	
Raised CK-	Raised 2 times or more the upper limit	
MB mass	of normal laboratory reference range in	
	acute presentation phase	
Total CPK	Raised 2 times or more the upper limit	
elevation	of normal laboratory reference range in	
	acute presentation phase, with at least	
	6% being CK-MB	

A Heart Attack with severe permanent impairment in function with permanent impairment in one or more of the following functional criteria, as measured six weeks post-infarction:

Criterion	Value
NYHA classification	Class 4

METS	1 or less
LVEF	< 30%
LVEDD	> 72
Ultrasound FS in %	< 16%

• Notes: If more than one functional criterion is impaired, but their values do not conform to the definition of Severe Heart Attack (for example one impaired value meets the threshold for the definition of Severe and another does not), the final Severity should be determined by giving preference to the more objective criteria, i.e. in the following order: 1. LVEF, 2. LVEDD, 3. Ultrasound FS, 4. METS, 5. NYHA.

Annexure A Definitions of ECG changes

(a) ECG changes indicative of Myocardial Ischaemia that may progress to Myocardial Infarction:

- Patients with ST-segment elevation:
 - New or presumed new ST segment elevation at the J point in two or more contiguous leads with the cut-off points greater than or equal to 0.2mV in leads V1, V2, or V3, and greater than or equal to 0.1mV in other leads.
 - Contiguity in the frontal plane is defined by the lead sequence AVL, I and II, AVF, III.
- Patients without ST-segment elevation:
 - ST-segment depression of at least 0.1 mV;
 - T-wave abnormalities only.

(b) Definition of new pathological Q-waves:

- Any new Q-wave in leads V1 through V3;
- A Q-wave greater than or equal to 40 ms (0.04s) in leads I, II, AVL, AVF, V4, V5 or V6;
- The Q-wave changes must be present in any two contiguous leads, and be greater than or equal to 1mm in depth;
- Appearance of new complete bundle branch block
- Major organ transplant means receiving one or more of the following organs from a human donor during an organ transplant operation: kidney, heart, lung, liver, pancreas, or bone marrow. Bone marrow transplant is only covered if you have undergone pre-conditioning with myeloablative chemotherapy and/or radiotherapy. This excludes any other organs, parts of organs, or any other tissue.
- **Third-Degree Burn** is defined as a burn through the full thickness of the skin causing scarring. The third-degree burn must cover at least 20% of the body's surface area or involve half of the face. A Specialist must confirm the diagnosis and the total area involved using standardized, clinically accepted, body surface area charts.
- **Coma** means a state of continuous unconsciousness with no reaction to external stimuli. The Coma must persist for at least 96 hours and require intubation and mechanical ventilation to sustain life. The Coma must result in permanent objective neurological deficit that is evident on physical examination that has persisted for a continuous period of at least 30 days after the

onset of the Coma. This excludes coma deliberately induced by medical practitioners using drugs or other means.

- **Kidney Failure** means the total and permanent failure of both kidneys, requiring the use of permanent dialysis.
- Unable or Inability to Earn an Income means you are incapable of earning the total income that you earned from any occupation, work, job or business for a full calendar month, provided that you must have earned such income for at least three-consecutive calendar months after the Start Date of the Plan and immediately before you became unable to earn such income, and the reason for you becoming unable to earn an income may not be disability or pregnancy.
- Unemployed or Unemployment means you are not employed or engaged in any occupation, work, job or business for remuneration or profit.
- Retrenchment means your forced termination from employment under section 189 and/ or 189A of the Labour Relations Act, in respect of adverse business conditions, the liquidation of the company, the introduction of new technology and the re-organisation of the business resulting in staff reductions. You shall be regarded as retrenched if you remain unemployed.
- Self-employed means your primary income is earned from being a sole proprietor, or partner in a firm or association, or a member of a close corporation, or a director of a company or a trustee of a trust, or you are employed in a family-owned business.
- **Pensioner** means you are permanently retired from the workforce or any occupation or profession that provides your primary income, and you qualify to receive a pension which is paid from a pension fund or provident fund, or you qualify to receive an older person's grant.
- **Remaining Repayment Period** means the amount of time in which instalments are still payable based on the duration of the Credit Agreement. This is calculated from the date of the claim event.

5. What are the exclusions (when will you not be covered)?

We will not pay any amount, including benefits or refund of premiums, on:

• Death or Disability resulting from:

- Wilful self-inflicted injury or suicide within 12 months from the Start Date of this Plan; or
- Active participation in war, invasion, acts of foreign enemies, hostilities, warlike operations (whether war be declared or not), civil war, insurrection, rebellion revolution, civil commotion or uprisings, military power; or
- Any pre-existing condition/s that you were aware of and that affected you within 12 months prior to the Start Date of this Plan, for a period of 12 months after the start date of the Plan.
- Critical Illness resulting from:
 - o A Pre-Existing Medical Condition means any

illness or condition that you have (or should reasonably have) received, or have been recommended to receive, medical advice, diagnosis, care or treatment prior to the Start Date of your Critical Illness cover. No claim will be paid for any illness or condition that was caused or accelerated by a Pre-Existing Medical Condition. In addition, no claim will be paid if the date of the covered risk event or medical advice, diagnosis, care or treatment occurred prior to the Start Date of the Plan, or within a defined waiting period.

Unemployment or Inability to Earn an Income resulting from:

- Retrenchment or termination of employment within 3 months after the Start Date of this Plan, where the term of the Credit Agreement is more than six months;
- Lawful dismissal, including dismissal as a result of wilful misconduct that is a violation of some established, definite rule of conduct, a forbidden act, wilful dereliction of duty or misconduct;
- Voluntary forfeiture of salary, wages, or other employment income;
- Voluntary retrenchment or termination of employment;
- Resignation;
- Retirement;
- Participation in an unprotected strike; and
- Retrenchment of which you were aware of or received notice of during the 3 months prior to Start Date of the Plan.
- If you are **self-employed**, or employed in the informal sector on the Start Date of the Plan, you will not have cover for:
 - Unemployed or Unable to Earn an Income; and
 Occupational Disability.
- If you become a **Pensioner** after the Start Date of this Plan, you must notify us to remove the following benefits as they will no longer apply to you:
 - Unemployed or Unable to Earn an Income; and
 Occupational Disability.
- Any covered event if:
 - The terms and conditions of the Plan are not met; or
 - Any information provided upon taking out the Plan and the Credit Agreement, or updating any of the Plan details, or the submission of a claim, is materially incorrect, fraudulent misrepresented or omitted. We also reserve our rights to recover any amount paid on a claim, which later transpires to have been a fraudulent claim; or
 - The covered event arose from participation in a criminal activity.

6. When does the cover and Plan start?

Once your Plan is accepted by the Insurer ("Start Date"), the contract (which includes the Plan Schedule, Customer Agreement and Terms and Conditions, where applicable) will take effect from the cover Start Date, as reflected in your Plan Schedule. We will notify you once cover is accepted.

7. When does the cover and Plan end?

The Plan and all cover ends:

- When the outstanding balance under the Credit Agreement is settled;
- When the Plan is cancelled;
- When you are in arrears by more than one full premium on the Plan. The Bank may pay unpaid premiums on your behalf at its sole discretion and recover such payments from you. Where the Bank cannot pay the unpaid premiums for any reason whatsoever, the Bank will notify you by SMS/ MMS of the unpaid premium and give you time to rectify this on or before your next loan instalment payment. The Bank will notify you by SMS/ MMS when the Plan and all cover has ended and cannot be reinstated. All monies received after the Plan has ended, will be allocated to paying off your loan.
- o On the date of your Death.
- When a claim is paid on your Death, or for a Critical Illness or Permanent Disability.

Cancellation: Either party can end the Plan telephonically or in writing by giving a 31-day notice. You will have to provide us with a suitable replacement credit life insurance policy if you want to cancel this Plan.

90-day cooling-off period: You may cancel the Plan in the first 90 days from its Start Date and receive a full refund of any premium paid, if you have not claimed (this is known as the **"cooling-off period"**). Thereafter, you may cancel the Plan by giving us a 31-day notice, without any refund.

8. What must you pay?

You must pay the premium amount in accordance with the DirectAxis Personal Loan Quotation. DirectAxis will collect your premiums monthly on your behalf from your loan account and pay it to FirstRand Life when they are due.

Premium Adjustment: Premiums may be reviewed every year and may or may not be adjusted. Premium adjustments will only be done if it is not viable for us to provide cover under this product under this pricing anymore. The increase or decrease of premiums, or the termination of the Plan, will be done for everyone who has the Plan and not only you. In such cases, we will tell you 31 days ahead of time of any changes or termination being made.

9. How and when to make a claim

Notification and submission: The claimant (you or a family member or appointed executor) must notify us of a claim as soon as possible after the claim event occurs. The covered risk event occurs on the date of your Death; on the date you are diagnosed by a medical practitioner to be Disabled; or on the date you become Unemployed or are Unable to Earn an Income. The claimant must submit a claim within 12 months after the claim event occurring. If the claimant doesn't do this, we shall not be liable to pay any benefits under the Plan for such claim.

Notification can be done telephonically or by e-mail to DirectAxis Loans at the contact details provided in the Credit Agreement or to us by emailing Claims@directaxis.co.za or fnblifeclaims@fnb.co.za or by Telephone on 021 764 3519 or 087 736 7775.

Documentation: You can request claim forms, documents or information from DirectAxis Loans or from us at the contact details provided above. The claimant must:

- Complete and sign any claim form we need before we can begin with the claim;
- Give us all evidence and information we may need to decide on the claim;
- Give us any extra evidence or information we may need at any time; and
- Bear the cost of getting this evidence and information. This includes the cost of certified translations of evidence and information in a language other than an official language of South Africa, and the cost of evidence and information needed from outside the borders of South Africa.

Conditions: If you are diagnosed with a condition, illness or injury, you need to undergo reasonable medical treatment by appropriate medical practitioners (a qualified Specialist supervising your care for that specific condition, illness or injury). This is needed to reasonably prevent a claim event from happening. If a claim needs to be made, we may also need you to see a medical practitioner of our choice to give us extra evidence and information. We will pay the costs of such a medical practitioner. We will only pay the claim when all evidence and information has been accepted by us.

If we reject your claim: You have 90 days to lodge your objection in writing. We will reassess your claim based on any representations made in support of your request for a review and advise you of our final decision in writing. We shall be relieved of liability and a claim shall be deemed to have prescribed should summons not have been served on us within a period of 6 months of receipt of our final decision. This 6-month period is in addition to the 90 days referred to above.

10.General Terms and Conditions

This Plan does not have any surrender or paid-up value. This means that if you cancel the Plan, you will not receive any premiums back or any pay out. You also cannot borrow money against the Plan or use it as security for a loan other than the Credit Agreement.

At times, we may be lenient in enforcing the Terms and Conditions of the contract or the rights that we have in terms of it, if it is to your benefit. Such leniency will not prevent us from being able to enforce any existing or future right we have under the Plan.

Changes to the Plan: You can cancel a change to the Plan within 90 days of making it. We shall refund any additional premium paid as a result of that change if you haven't claimed.

11.Reviews and Cancellations

We have the right to change or cancel the Plan, benefits, premiums and/or eBucks rewards for any

reason, including but not limited to:

- Complying with legislation or other rules applicable to this Plan;
- Ensuring the Insurer's reputation remains intact and/or is not compromised;
- Products/plans no longer remaining financially feasible for the Insurer. This may be applicable to a product line and/or an individual policy;
- Undesirable and/or criminal activity.

In addition, we may place the Plan on hold and/or refuse any transaction, instructions or take any other action that we consider necessary to comply with the law and prevent or stop undesirable and/or criminal activity. Any legal issues will be decided in accordance with South African Law.

We will notify you via post, SMS, email or any other means at least 31 days before we make any changes or cancellations.

Applicable law: Any legal issues will be decided in accordance with South African Law.

Disclosure of material facts: It is your obligation to accurately and properly disclose all material facts to us. If any of the information or statements that you give us is wrong, or if you did not give us the relevant information when starting, or updating your Plan, we have the right to:

- · Change the Terms and Conditions of your Plan;
- Cancel your Plan from any date that we choose and to keep your premiums for the cover you had until the date of cancellation;
- Treat your Plan as if it had never started and refund your premiums, less any costs we have incurred (for example, administration costs);
- · Not pay out any claims; or
- Recover from you any amounts that we have paid for previous claims.

You must notify DirectAxis Loans when the status of your employment changes to ensure that your cover is appropriate. You are requested not to sign any blank or partially completed document.

You are entitled to a copy or written or printed record of your policy and any transaction requirement upon your request.

General: Because of the nature of the Plan and the fact that it only applies to the Credit Agreement, DirectAxis SA (Pty) Ltd has not done a complete financial analysis about your individual risk profile and financial needs for the purposes of the Plan. DirectAxis has considered the actual risk and liabilities of the Credit Agreement and the likelihood of the events occurring on a group basis. You should make sure that the Plan meets your needs and that you have all the information you need to make an informed decision.

If you are unsure, then you need to speak to your Financial Adviser. If DirectAxis completes or submits any transaction requirement on your behalf, you must be satisfied as to the accuracy and completeness of the details. Generally, premiums are not tax deductible and benefits paid are not taxable. However, any additional interest received by you will be taxable in your own hands. This should not be considered tax advice and you are advised to contact your own tax consultants for tax advice.

12.Complaints Procedures & Regulatory Disclosures

Product Supplier and Underwriter: FirstRand Life Assurance Limited ("FirstRand Life"), a licensed insurer, Licence No. 00102/001; Registration No. 2014/264879/06; 5 First Place, Bank City, 9 Kerk Street, Johannesburg, 2001; PO Box 1153, Johannesburg, 2000; Tel. 087 030 1999; Email: Claims@directaxis.co.za.

Administrator of the Policy

First National Bank ("FNB"), a division of FirstRand Bank Limited, an authorised financial services and credit provider (NCRCP20); Registration No. 1929/001225/06; 3rd floor, 1 First Place, Simmonds Street, Bank City, 2001; PO Box 1153, Johannesburg, 2000; visit the FNB website. Tel: 087 575 9404; Email: Claims@directaxis.co.za.

In the event of a claim, contact the Administrator on 021 7643519 or 087 736 7775 or email: claims@directaxis.co.za or fnblifeclaims@fnb.co.za.

If you have any policy administration related queries, contact DirectAxis on 021 764 5870 or email: clc@directaxis.co.za.

Financial Services Provider and Intermediary:

DirectAxis SA (Pty) Ltd (Registration no 1995/006077/07) is an authorised Financial Services Provider. FSP No. 7249. 108 De Waal Road, Diep River 7780. PO Box 44319, Claremont, 7735. Visit the Direct Axis website. Tel: +27 21 764 3000. Email: customerservice@directaxis.co.za

FirstRand Life, FNB and DirectAxis SA (Pty) Ltd are registered financial services providers for this class and type of product.

FAIS class and type of product: Category 1, Subcategory 1.22 (Long-term Insurance - Category B1-A).

FNB and DirectAxis SA (Pty) Ltd take responsibility for the actions of their authorised representatives insofar as they are providing financial services. Some representatives may be rendering services under supervision and will inform you accordingly.

FirstRand Life has appointed DirectAxis SA (Pty) Ltd as the intermediary and has entered into an agreement authorising DirectAxis SA (Pty) Ltd to market products on its behalf. There is an intermediary agreement between FirstRand Life and DirectAxis SA (Pty) Ltd, for which DirectAxis SA (Pty) Ltd receives a fee for services rendered for the Plan.

FirstRand Life, FNB and DirectAxis SA (Pty) Ltd are associates in terms of the FAIS Act.

DirectAxis SA (Pty) Ltd has no shareholding nor has any financial interest in the business of FirstRand Life, and did not receive more than 30% of its total insurance remuneration, including commission, from FirstRand Life in the preceding year.

DirectAxis SA (Pty) Ltd will not request you to sign any incomplete or blank documents in the course of rendering financial services. No person on behalf of DirectAxis SA (Pty) Ltd may request or insist that you do so.

All calls are voice recorded for quality and security purposes and will be made available upon request, where applicable.

FirstRand Life, FNB and DirectAxis SA (Pty) Ltd hold professional indemnity insurance.

In terms S3A(2)(a) of the FAIS General Code of Conduct, a Financial Services Provider is required to have a Conflict of Interest Policy. You can contact DirectAxis for a copy of the FirstRand FAIS Conflict of Interest Policy or access it on the Direct Axis website.

Plan or Claim Complaints: If you have any complaint about this Plan or a claim, please contact the Complaints Call Centre on 087 575 9408, or e-mail: Care@fnb.co.za.

Financial Services Provider Complaints: For any complaint matter relating to the financial service rendered by DirectAxis SA (Pty) Ltd. You can contact the Compliance Officer on phone number 087 030 1999 or email: FSCAcompliance@directaxis.co.za.

Unresolved Complaints:

- If we still dispute or reject your claim and you are not satisfied with the reasons provided for such rejection or if you have any unresolved dispute about this Plan, you may refer the matter to the Ombudsman for Long-term Insurance: Third Floor, Sunclare Building, 21 Dreyer Street, Claremont, Cape Town. Private Bag X45, Claremont, 7735. Tel: (021) 657 5000 Fax: (021) 674 0951. Email: info@ombud.co.za. Website:www.ombud.co.za
- If after you have contacted FNB or DirectAxis and you have any unresolved dispute about the financial service provided to you, you can contact the FAIS Ombudsman: Kasteelpark Office Park, 2nd Floor, Orange Building, Cnr Nossob & Jochemus Streets, Erasmuskloof, Pretoria. PO Box 74751, Lynnwood Ridge, 0040. Tel: 012 470 9080 / 012 762 5000. Email: info@faisombud.co.za.Website:www.faisombud .co.za.

DirectAxis direct interests

DirectAxis SA (Pty) Ltd holds ownership interests in Sanlam Personal Loans (Pty) Ltd. Registration number: 2001/016316/07. Extent of ownership: 30% DirectAxis SA (Pty) Ltd has a Joint Venture with Hollard Insurance Company Ltd. Registration number: 1952/003004/06 FirstRand Investment Holdings Proprietary Limited holds a 100% ownership interest in DirectAxis SA (Pty) Ltd.

13. FirstRand Privacy Term and Privacy Notice

- Your personal information (which, for the purposes of this term, includes special personal information) will be held by entities within the FirstRand Group.
- To better understand the entities that form part of the FirstRand Group and how your personal information is treated, please refer to FirstRand's Privacy Notice which forms part of this privacy term. The Privacy Notice can be found on our Platform (for example our banking app or website) or contact us to request a copy.
- In this privacy term references to "we", "us" or "our" are references to the entities in the FirstRand Group, and all affiliates, associates, cessionaries, delegates, successors in title or third parties (authorised agents and contractors), when such parties are acting as responsible parties or operators in terms of applicable privacy laws, unless stated otherwise.
- By accepting these Terms and Conditions or by utilising any products or services ("Solutions") offered by us, you acknowledge that in order to:
 - Conclude and fulfil contractual terms or obligations to you;
 - Comply with obligations imposed by law; or
 - To protect or pursue your, our, or a third party's legitimate interests, including offering solutions that best meet your needs; your personal information may be processed through centralised functions and systems across entities in the FirstRand Group and may be used for the purposes, in the manner, and with the appropriate controls as set out in our privacy notice.
- Where it is necessary to obtain consent for processing outside of this privacy term, we will explicitly seek your consent separately.
- We want to ensure that you fully understand how your personal information may be used. We have described the purposes for which your personal information may be used in detail in our Privacy Notice. We have also set out further information about accessing, correcting or objecting to the processing of your personal information in our Privacy Notice. We strongly advise that you read our Privacy Notice.
- For the purposes of these Terms and Conditions the responsible party is the party with whom you are contracting a Solution, as well as other entities in the FirstRand Group, which are listed in our Privacy Notice as responsible parties. For the contact details of these responsible parties, please see our Privacy Notice.