<< Policy Number >>

THIS IS TO CERTIFY THAT

<<Name of Policyholder>>

Is a registered **PRINCIPAL MEMBER of**

THE ZB CASH FUNERAL COVER PLAN
(“the Plan”)

POLICY SCHEDULE

Name of Policyholder: <<Full Name>>

Policy Commencement Date: <<Initial Policy Commencement Date>>

DETAILS OF LIVES ASSURED

Life Assured	Date OF Birth	ID Number	Benefit Type	Benefit Amount	Commencement Date
<<FullName>>	<<Date of Birth>>	<<ClientID>>	<<Funeral/Rider>>	<< Cover Amount>>	<<Date Dep Added>>
Monthly Contractual Premium				$ $ $ $	C C

ZB CASH FUNERAL TERMS AND CONDITIONS

TERMS	Definition
The Plan	ZB Cash Funeral Cover Plan
Principal Member	A person who has attained the age of 18 years and whose membership of the Plan has not been terminated
Immediate Family Member	Means in respect of a Principal Member, a spouse, biological children, persons under the legal guardianship of the Principal Member, any dependent natural parent of the Principal Member and any dependent natural parent of the spouse of the Principal Member.
Extended Family Member	Means in respect of a Principal Member, any other relationship apart from Immediate family members.
The Underwriter	Means the insurer, ZB Life Assurance Limited.
Commencement Date	Date at which funeral assurance cover shall commence i.e., first day of the month coinciding with or next following the payment of the first premium subject to underwriting.
Cool-off Period	1 calendar month (30 days) provides the client with the opportunity to cancel the policy and claim the first premium back if the proposer is unhappy with the policy. Thereafter, no premium refunds will be done.
Rider	Additional and optional cover to the existing cash funeral benefit i.e., tombstone, memorial, personal accident that applies to all dependents. School fees and Grocery benefit, only applies to Principal Member only.

CONDITIONS

a. The contract is an annually renewable term assurance policy, providing benefits on the death of the Life Assured within the tenure of the policy term.

b. Subject to the provisions and conditions stated herein, the Underwriter shall pay, on the death of the Principal Member or on the death of a registered Dependant, to the persons entitled thereto, a certain sum of money specified as funeral benefit cover by insurer at inception of the Plan or such amount as is selected by the Principal Member, notified to and accepted by ZB Bank Limited.

c. The sum assured for any immediate or extended family member covered under the policy shall not exceed the benefit amount of the Policyholder. Under no circumstances shall an additional life assured be covered for a higher benefit amount than the Policyholder

d. All premiums are due on or before the 1st of every month and are payable monthly in advance at the Principal Office of insurer or at such other place or in such manner as specified from time to time by ZB Bank Limited.

e. If due premium is missed, the Policy shall enter into a one calendar month (Grace period), where full benefits are available subject to payment of the missed premium and conditions regarding waiting periods have been met. After Grace period, cover is suspended and policy enters a three months suspension period with no cover. Missed premiums must be paid back and cover will resume immediately.

f. Policy shall lapse if premiums are not paid for at the end of the cover suspension period, and no rights thereunder nor on account of previous payment shall exist, except as herein provided.

g. If membership has lapsed due to non-payment of premiums, it may be reinstated within a period of six months from the due date of the first unpaid premium subject to the payment of all overdue premiums. Membership shall, however, not be capable of being reinstated where the Principal Member terminates it voluntarily.

h. ZB Life Assurance reserves the right to review premiums and cover at any given point. Premiums are automatically reviewed coinciding with the age last birthday thus adult rates will apply if a child attains 18 or 21 years. Senior adult rates will apply whenever Principal Member or Dependant/s attains 60 years. The maximum cover per Immediate Family Member below the age of 60 shall not exceed USD$5000. Benefit level for All Extended Family Members including Immediate Family members, above 60 years, shall be restricted to USD$2000 per person or as set from time to time.

i. Maximum age for a policyholder at entry is 74 years age last birthday, and no cease age. Immediate and Extended family members, maximum age at entry is 84 years age last birthday.

j. A Principal Member may request in writing a reduction or an increase of cover at any time. The regular premium will also decrease or increase to match the reduced/increased Sum Assured using the premium applicable at age at which changes are effected. The Dependant/s shall be deemed to have been registered or deregistered on the first day of the month coinciding with or next following the date of receipt of the written application for the registration or deregistration of the Dependant/s.

k. Membership of the Plan will not entitle the Principal Member or a Dependant to any surrender value or paid-up value.

l. In the event of a claim exceeding the maximum prescribed benefit, on the death of a person registered as a Dependant by more than one Principal Member, ZB Bank and The Underwriter shall only recognize the earliest instance of registration; all other instances of registration as Dependant shall be null and void.

m. No waiting period on accidental death, except in the event of natural and suicidal death.

n. To claim, submit the following documents to your agent or to any nearest ZB Bank service centre.
   - A burial order or death certificate.
   - A copy of the beneficiary/ Claimant's Identity Documents.
   - A copy of the deceased's Identity Documents
   - A police report if the death is by accident.
   - A completed claim form

o. Exclusions: The benefit shall not be payable if the death of the Dependant is caused or accelerated by:
   - Death due to natural causes in the first 3 months of cover for all Immediate family members aged 60 years of age and below.
   - Death due to natural causes in the first 6 months of cover for all Extended family members, and Immediate family members above 61 years of age.
   - Death due to suicide whether sane or insane, in the first twenty-four months of cover for all ages from the commencement date.
   - Nuclear activity or radioactivity.
   - Any violation of criminal law by the life assured.
   - Wilful exposure to danger by the life assured except in an attempt to save human life.
   - War, enemy hostilities, commotion, insurrection, revolution, military seizure of power or the usurping of power or any act of any person acting

- On behalf of or in connection with any organisation with activities directed towards the overthrow by force of the government de jure or de facto or the influencing of terrorism or violence.

ZB LIFE ASSURANCE
COMPLAINTS HANDLING PROCEDURE

HOW TO CONTACT US

1. **If You wish to contact us, you can phone us, send email or write to us:**

Physical Address
ZB Life Assurance Company
77 Jason Moyo Avenue,
Harare,
Zimbabwe.

Phone: +263: (242) 708800-9 / 703106 Monday to Friday between 8:00am and 4:30pm
Mobile: +263 772 143 280-3
Email: **zblifecomplaints@zb.co.zw**

Write to:

ZB Life Assurance Company
P.O Box 969
Harare
Zimbabwe

2. **If You feel You have not been treated fairly by ZB, you can contact the Insurance Regulator.**

Physical Address
Insurance and Pensions Commission
160 Rhodesville Avenue
Greendale
Harare

Phone 443358/443422/443261
Cell: 0772 154 281/ 0772 154 282/ 0772 154 283/ 0772 154 284
Fax: 0242 443304
E-mail: **enquiry@ipec.co.zw**