

# LEGAL HERO APPLICATION FORM

 New Application Upgrade Reinstatement Legal Hero Black R249 p/m = R200 000 Cover, R5000 Bail, R20 000 Accidental Death, Claim-Free Cashback. Legal Hero Core R175 p/m = R150 000 Cover, NO Bail, NO Accidental Death, NO Cashback or any other additional benefits.Signature if you agree to once-off R100 for golden Membership card (your choice): 

NAME:  SURNAME:

MR  MRS  MISS  ID NUMBER:  HOME LANGUAGE:

ADDRESS:  (to receive letters from us) POSTAL CODE:

CELL:  EMAIL:

TEL:  EMPLOYER:  SAPS/ DEP EDU TOWN/AREA

UNION:  I agree to receive information on the latest product offerings, competitions and newsletters (FREE): YES  NO   
**If YES, Legal Hero may contact me via one or all of the following:** EMAIL  SMS  DIRECT CALL   
I understand that I may contact Legal Hero to stop contacting me with regards to the above at any point.

MARITAL STATUS:  NAME OF SPOUSE:

NAME(S) OF UP TO 4 CHILDREN:  NAME & SURNAME  NAME & SURNAME  NAME & SURNAME  NAME & SURNAME

## PERSAL

I, the undersigned: FULL NAME: 

ID NUMBER:  RANK:  DEP CODE ID NO.:

DEPARTMENT:  PREMIUM:  PERSAL NUMBER:

hereby authorize the Accountant of the Department of  my salary until such time as I cancel this authorization in writing or until I substitute it with a new authorization.

to deduct from my salary each month the premium of R  applicable

for the cover selected with effect from (month)  2020 and monthly thereafter, and pay this amount to Guardrisk Insurance Company Limited, Institution code - 0290 ("Guardrisk") from whom I have obtained a policy, until such time as I cancel this authorization in writing, or until I substitute it with a new authorization. In the event of this deduction being dishonored, the policy will lapse, subject to the grace period as stipulated under the terms and conditions. No deductions are accepted for arrear or any other premiums. I understand that this signed document is required in the Guardrisk offices 10 (ten) working days prior to the deduction date; if not, the deduction will only qualify for the following calendar month's deductions, and cover will only commence the following month.

Should the relevant premium rate be adjusted by Guardrisk as a result of an inflation related increase in premium rate, I confirm that the adjusted premium rate may be deducted from  SIGNATURE:  DATE:

## BANK DEBIT ORDER:

DEBIT ORDER MANDATE FRB Minimum Requirements for Written Authority and Mandate for Debit Payment Instructions

A. Authority:

Given by: 

NAME OF ACCOUNTHOLDER

Address:  POSTAL CODE:

Name of Bank:  Branch code:  Branch:  (place account was opened)

Account No.:  Type of Account (tick applicable):  Current Cheque  Savings  Transmission

Amount:  Date:  Abbreviated Name as Registered with the Bank:

Beneficiary's Address:  POSTAL CODE:

This signed Authority and Mandate refers to our contract dated  ("the Agreement"). I hereby authorise Phakama on behalf of Legal Hero (Pty) Ltd to issue and deliver payment instructions to your Banker for collection against my above-mentioned account at my above-mentioned Bank (or any other bank or branch to which I may transfer my account) on condition that the sum of such payment instructions will never exceed my obligations as agreed to in the Agreement and commencing on  and continuing until this Authority and Mandate is terminated by me by giving you notice in writing of not less than 20 ordinary working days, and sent by prepaid registered post or delivered to your address as indicated above. The individual payment instructions so authorised to be issued must be issued and delivered as follows: monthly, bi-monthly, three monthly, six monthly, annually, weekly, bi-weekly (delete that which is not applicable). In the event that the payment day falls on a Sunday, or recognised South African public holiday, the payment day will automatically be the preceding ordinary business day. Payment

Instructions due in December may be debited against my account on  I understand that the withdrawals hereby authorised will be processed through a computerised system provided by the South African Banks. I also understand that details of each withdrawal will be printed on my bank statement. Such must contain a number, which must be included in the said payment instruction and if provided to me should enable me to identify the Agreement. This number must be added to this form in Section E before the issuing of any payment instruction. **B. Mandate:** I acknowledge that all payment instructions issued by you shall be treated by my above-mentioned Bank as if the instructions have been issued by me personally. **C. Cancellation:** I agree that although this Authority and Mandate may be cancelled by me, such cancellation will not cancel the Agreement. I shall not be entitled to any refund of amounts which you have withdrawn while this Authority was in force, if such amounts were legally owing to you. **D. Assignment:** I acknowledge that this Authority may be ceded or assigned to a third party if the Agreement is also ceded or assigned to that third party, but in the absence of such assignment of the Agreement, this Authority and Mandate cannot be assigned to any third party.

Signed at  on this  day of  2020.

(Signature as used for operating on the account)

(Assisted By)

**E. Agreement Reference Number:** This Agreement reference number is LEGALHERO followed by your policy number once issued. **F. Premium Adjustment:** Should the relevant premium rate be adjusted by Guardrisk as a result of an inflation related increase in premium rate, I confirm that the adjusted premium rate may be deducted from my bank account until such time as I cancel this authorization or until I substitute it with a new authorization.

PLEASE TICK PREFERRED DEDUCTION TYPE: PERSAL: BANK DEBIT ORDER: 

## Declaration and Record of Advice: I, the undersigned hereby apply for legal insurance and confirm the following:

- The policy benefits and exclusions were properly explained by the Legal Hero Representative;
- I undertake to immediately familiarizing myself with the terms and conditions of the policy and will notify Legal Hero within 30 days should I not understand a specific section of the policy;
- I am aware that litigation matters originating before the commencement date of the policy or during any applicable waiting period, as explained in the terms and conditions, will not be covered;
- I am aware that the merits of my case will be taken into account when litigation (in court) cover is considered;
- I realize and understand that I will not be covered if my premium is in arrears;
- I acknowledge that receipt of the monthly premium by Legal Hero is my responsibility;
- In the event that my premium is one month in arrears, I hereby authorize Phakama to debit my bank account with the necessary amount to cover my premium in order to avoid this policy to lapse;
- In terms of Section 8(4) (a) of the Financial Advisory and Intermediary Services Act of 2002, General Code of Conduct, I have taken particular care considering whether or not the advice provided to me is appropriate considering my objectives, financial position and particular needs, as I understand and acknowledge the fact that the marketer who introduced this policy to me is under time constraint to conduct a full analysis in respect of my risk profile and financial needs;
- I am employed and my monthly gross income, exceeding R3 500, is sufficient to meet the monthly policy contributions;
- I have received, read and understood the statutory disclosure relevant to short term insurance policyholders;
- I hereby authorise Legal Hero (Pty) Ltd to appoint the underwriter for this policy, GuardRisk Insurance Company Ltd;
- I acknowledge that the party hereby authorised to effect the drawing(s) of my account may not cede or assign any of its rights to any third party without my prior written consent and that I may not delegate any of my obligations in terms of this contract/ authority to any third party without prior written consent of the authorised party;
- I warrant that all information given in this application is true and complete.

Please note that debit orders are drawn by 'Phakama' on behalf of Legal Hero.

 I am interested in Funeral HeroINITIALS & SURNAME:  SIGNATURE:  DATE: Agent's details:  Agent's code:  Agent's Signature: