



Funeral Fund



At a glance

Cover your funeral expenses

- ▶ Pays an immediate lump sum on the death of the insured.
- ▶ Ensures most, if not all, funeral expenses will be covered in the event of an unexpected death.
- ▶ You can choose to cover your family (that is, two adults and your children) at a discounted premium.

Level of cover

- ▶ Cover can be for one or two adults as well as your children.
- ▶ \$12,000 for each adult life.
- ▶ \$6,000 for children aged 10 or more at date of death.
- ▶ \$2,000 for children aged less than 10 years at date of death.

Standard benefits

Main benefit

- ▶ No medical questions are asked.
- ▶ You are covered immediately for accidental death.
- ▶ If death in the first year is other than by accident, we make a full refund of the premiums paid.
- ▶ If death in the second year is other than by accident we will pay one and a half times the premiums paid.
- ▶ From year three onwards you will receive full cover.
- ▶ You can include your whole family at a discount.

Funeral Fund rates

The level fortnightly premium per \$12,000 Sum Assured, payable for ten years.

Entry age next birthday	Male non-smoker	Male smoker	Female non-smoker	Female smoker
17 - 25	12.50	14.50	11.00	12.50
26 - 30	14.50	16.50	12.50	14.00
31 - 35	17.00	20.00	15.00	16.50
36 - 40	20.50	22.50	18.00	20.00
41 - 45	24.50	27.00	20.50	23.00
46 - 50	29.50	32.50	25.00	27.50
51 - 55	35.00	39.00	30.50	33.00
56	36.50	40.50	31.50	34.50
57	37.50	41.50	33.00	35.50
58	39.00	43.50	34.50	37.00
59	41.00	45.50	35.50	38.50
60	43.50	48.00	37.50	40.50
61	46.00	51.00	39.50	42.00
62	49.50	54.00	42.50	45.50
63	53.00	58.00	45.50	49.00
64	57.00	62.00	49.00	53.00
65	61.00	66.00	53.00	57.00

- ▶ For a child up to age 18 next birthday the additional cost is \$4.00 per child per fortnight.
- ▶ For a second adult life on the same policy, a discount is available of \$1.00 per fortnight.



Why you need it

- ▶ Minimise the financial and emotional impact of an unexpected death.
- ▶ Funeral expenses have to be paid, usually well before estate settlement and insurance payouts.
- ▶ Funeral Fund can provide you with peace of mind, knowing that your and/or your family's funeral expenses are covered in the event of your/their death.
- ▶ A 'no worries' approach to the major immediate post-death expense.

Key facts

Ages

- ▶ Entry age for an adult is age 17 to 65 next birthday.

Premiums

- ▶ Payable fortnightly or monthly by direct debit.
- ▶ Premiums are fixed at the rate determined on the rate chart (see opposite) over the 10 year payable period.



Funeral Fund

Funeral Fund policy benefits, Terms and Conditions

On the death of a life insured, Fidelity Life Assurance Company Limited (We, Us) will pay any benefits to the policy owner (You, Your), or on Your death, to the second adult life insured, subject to the terms and conditions below and provided that premiums are paid when due.

Benefits

On the death of a life insured by any cause after two years' cover or by accident during the first two years' cover, the sum insured payable is:

- a) \$12,000 for an adult life insured.
- b) \$6,000 for a child life insured aged 10 or more at the time of death.
- c) \$2,000 for a child life insured aged less than 10 years at the time of death subject to any limitation imposed by section 67B of the Life Insurance Act 1908.

On the death of a life insured by a cause other than by accident during the:

- a) First year of cover, the benefit payable is a return of premiums paid for that life insured; or
- b) Second year of cover, the benefit payable is a return of 1.5 times premiums paid for that life insured.

Policy conditions

This policy is subject to the following conditions together with endorsements, if any, made on it.

Period of cover

1. Cover commences for a life insured when the application has been accepted by Us and the initial premium for that life insured has been received.
2. Cover for children born or adopted subsequent to the commencement date shown in the schedule is subject to You giving written notice to Us and payment of the appropriate premium.
3. Provided that premiums are paid when due, this policy will cease on the latest to occur of:
 - a) The death of the adult life insured, where there is only one adult life insured, or
 - b) The death of the survivor of the adult lives insured, or
 - c) When the youngest child life insured attains age 21.
4. When a child life insured attains age 21 cover under this policy ceases for that child. Within three months of attaining age 21 that child may start a Funeral Fund where the sum insured is payable on death by any cause from inception.

Premiums

5. Premiums are payable in advance.
6. Premiums are payable for 10 years for each life insured but to a maximum age of 21 years for each child life insured.

7. We allow thirty days of grace for the payment of any premium that is due. If a death occurs during the days of grace, the amount of unpaid premium will be deducted from the benefit payable.
8. If less than three years' premiums have been paid and the shortfall in premiums remain unpaid after the days of grace, then the policy shall become void and all premiums paid shall be forfeited to Us.
9. If at least three years' premiums have been paid and one or more premiums due remain unpaid after the days of grace, then the policy will become fully paid up for reduced sums insured as determined by Us.
10. If the policy is terminated for non-payment of premiums or is made fully paid up, it may be reinstated within one year to the full sums insured upon proof of the good health of each of the lives insured and payment of overdue premiums with interest.

Claims

11. The benefit payable is subject to:
 - a) Proof of the death of a life insured, and
 - b) Proof of the date of birth of the life insured, and
 - c) Delivery to Us of this policy document.
12. If the date of birth of a life insured is incorrectly stated on the application which results in an understatement of age, We will pay the benefit that would have been payable had the correct date of birth been stated.
13. If the smoking status of an life insured is incorrectly stated on the application as non-smoker, We will pay a pro-rata benefit.

General

14. If within thirteen months of the commencement of cover or from the date of reinstatement, a life insured whether sane or insane shall die by his or her own hand, no benefit shall be payable under this Policy for that life insured.
15. This policy does not acquire a cash value.
16. This policy is subject to the laws of New Zealand. We may make reasonable changes to the policy terms to reflect any changes in tax or other legislation that affect it.
17. If You are not satisfied with this policy, it can be cancelled by returning it to Us within 14 days of receipt. Any premiums paid will be refunded in full.
18. The maximum amount that We will pay on the death of a life insured under all Fidelity Funeral Fund policies is:
 - a) \$12,000 for an adult life insured, \$6,000 for a child life insured aged 10 or more at the time of death and \$2,000 for a child life insured aged less than 10 years at the time of death; or
 - b) Such other amount as We will determine from time to time.

Important note about this factsheet

This factsheet is a convenient summary of the key points of this insurance policy. It is not, and is not intended to be, a policy document. Details of definitions, benefits, terms and conditions are contained in the official policy document which is available from your financial adviser. You should read the policy document carefully to make sure you understand exactly what cover is provided under each benefit.

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Did you know? This product is printed on paper with fibre sourced from sustainable resources – Fidelity Life preserving our environment

FIDELITY LIFE ASSURANCE
COMPANY LIMITED HAS AN

A (EXCELLENT)
RATING

GIVEN BY A.M. BEST, A SPECIALIST INSURANCE RATING AGENCY

1. FIRST ADULT LIFE TO BE INSURED

Title Mr Mrs Ms Miss Dr Other

Surname

First name(s)

Residential address

Postcode

Mailing address, if different from above

Postcode

Male Female Smoker: Yes No Age next birthday Date of birth
Day Month Year

Telephone numbers Home - Daytime After hours Work - Daytime After hours Mobile - Daytime After hours

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Do you wish to be sent mail by Post Email or to both Email

2. SECOND ADULT LIFE TO BE INSURED

Title Mr Mrs Ms Miss Dr Other

Surname

First name(s)

Male Female Smoker: Yes No Age next birthday Date of birth
Day Month Year

3. CHILD/CHILDREN TO BE INSURED

First child to be Insured

Title Mr Miss

Surname

First name(s)

Male Female Smoker: Yes No

Age next birthday Date of birth
Day Month Year

Second child to be Insured

Title Mr Miss

Surname

First name(s)

Male Female Smoker: Yes No

Age next birthday Date of birth
Day Month Year

Third child to be Insured

Title Mr Miss

Surname

First name(s)

Male Female Smoker: Yes No

Age next birthday Date of birth
Day Month Year

Fourth child to be Insured

Title Mr Miss

Surname

First name(s)

Male Female Smoker: Yes No

Age next birthday Date of birth
Day Month Year

4. ADVISER TO COMPLETE

	Adviser name	Adviser number	I/C % split	R/C% split
Adviser 1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Adviser 2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Amount collected for first premium \$

Commencement date for Direct Debits only – Monthly 1st to 28th **OR** Fortnightly or single premium payment 1st to 31st
 Day of week Month Year

For single premium payments –

Amount of single premium \$ Single premium to be paid by Direct Debit Cheque Credit card

Credit card details – Name of cardholder

Credit card number

Card type Visa Mastercard Expiry date Signature
Day Month Year

To speed up the acceptance of this application, if we need further information we will contact your client directly (e.g. via email or telephone),

unless you indicate otherwise. No, please do not contact my client If 'Yes', when is the best time? am/pm

DECLARATION

Your Duty of Disclosure for the Life to be Insured and Policy Owner(s)

Before you enter a contract of insurance and before your contract of insurance commences you have a duty to disclose to Fidelity Life every matter that you know or could reasonably be expected to know is relevant to Fidelity Life's decision whether to accept the risk of insurance and if so on what terms. If you fail to comply with your duty of disclosure, Fidelity Life may cancel your policy from inception, alter the amounts and terms of the insurance or decline to consider any claim/s. If Fidelity life cancels your policy from inception, all premiums paid may be forfeited.

- ▶ I confirm that I have not been diagnosed with any illness or disease that is expected to cause death within 12 months.
- ▶ I acknowledge that this application collects personal information about me that I have the right to access and to correct. The information will be used by Fidelity Life, its officers, third parties for processing on Fidelity Life's behalf, its reinsurers and its advisers to calculate and administer the plan and for the purposes of promotion of insurance and investment services. This information may also be used for statistical purposes provided you are not identified Fidelity Life holds the information securely at 81 Carlton Gore Road, Newmarket, Auckland.
- ▶ The information may be disclosed outside of Fidelity Life group of companies where the disclosure is necessary for one or more purposes for which the personal information was collected, to the adviser named on this application (or allocated to your business), where required by law, to the policy owner and with your consent.
- ▶ I declare that I have read the notice explaining duty of disclosure, and have completed or read this application and the information given is true, accurate and complete. I have not withheld or misstated any material fact.
- ▶ No statement affecting this insurance has been made to any representative of Fidelity Life that is not recorded in this proposal.
- ▶ The information I have provided and the information provided by anyone else on my behalf in this proposal will form the basis of the contract between Fidelity Life and me.
- ▶ The contract of insurance will not commence until Fidelity Life has accepted this application and the first premium has been paid.
- ▶ I authorise Fidelity Life to obtain any information about the state of health of any life insured from any medical practitioner that I may have consulted.
- ▶ If I am not satisfied I may cancel the plan within 14 days of the policy document and receive a full refund of premiums paid.
- ▶ I shall be bound by the standard terms and conditions in the policy to be issued to me by Fidelity Life.
- ▶ If I have provided my email address in this application, or if I provide it at some stage in the future, I consent to receiving emails from Fidelity Life in respect of Fidelity Life and any further services.

Signature of First Life to be Insured

Date
Day Month Year

Signature of Broker/Adviser

Date
Day Month Year

Conditions of this authority to accept Direct Debits

1. The Initiator ...

- (a) undertakes to give written notice to me/us of the commencement date, frequency and amount of Direct Debit at least 10 calendar days before the first Direct Debit is drawn (but no more than 2 calendar months). Where the Direct Debit System is used for the collection of payments which are regular as to frequency, but variable as to amounts, the Initiator undertakes to provide me/us with a schedule detailing each payment amount and each payment date.
In the event of any subsequent change to the frequency or amount of the Direct Debit, the initiator has agreed to give written advance notice at least 30 days before the change comes into effect.
- (b) may, upon the relationship which gave rise to this Authority being terminated, give notice to the Bank that no further Direct Debits are to be initiated under this Authority. Upon receipt of such notice the Bank may terminate this Authority as to future payments by notice in writing to me/us.

2. The Customer may ...

- (a) at any time, terminate this Authority as to future payments by giving written notice of termination to both the Bank and the Initiator.
- (b) stop payment of any Direct Debit to be initiated under this Authority by the Initiator by giving written notice to the Bank prior to the Direct Debit being paid by the bank.
- (c) where a variation to the amount agreed between the Initiator and the Customer from time to time to be direct debited has been made without notice being given in terms of clause 1(a), request the Bank to reverse or alter any such Direct Debit initiated by the Initiator by debiting the amount of the reversal or alteration of a Direct Debit back to the Initiator through the Initiator's Bank. PROVIDED such request is made not more than 120 days from the date when the Direct Debit was debited to my/our account.

3. The Customer acknowledges that ...

- (a) this Authority will remain in full force and effect in respect of all Direct Debits passed to my/our account in good faith notwithstanding my/our death, bankruptcy or other revocation of this Authority until actual notice of such event is received by the Bank.
- (b) in any event this Authority is subject to any arrangement now or hereafter existing between me/us and the Bank in relation to my/our account.
- (c) any dispute as to the correctness or validity of any amount debited to my/our account shall not be the concern of the Bank except in so far as the Direct Debit has not been paid in accordance with this Authority. Any other disputes lie between me/us and the Initiator.
- (d) the Bank accepts no responsibility or liability for the accuracy of information about Direct Debits on Bank Statements.
- (e) the Bank is not responsible for, or under any liability in respect of
 - any variations between notices given by the Initiator and the amounts of Direct Debits.
 - the Initiator's failure to give written advance notice correctly nor for the non-receipt or late receipt of notice by me/us for any reason whatsoever. In any such situation the dispute lies between me/us and the Initiator.
- (f) notice given by the Initiator in terms of clause 1(a) to the debtor responsible for the payment shall be effective. Any communication necessary because the debtor responsible for payment is a person other than me/us is a matter between me/us and the debtor concerned.

4. The Bank may ...

- (a) in its absolute discretion conclusively determine the order of priority of payment by it of any monies pursuant to this or any other authority, cheque or draft properly executed by me/us and given to or drawn on the Bank.
- (b) at any time terminate this Authority as to future payments by notice in writing to me/us.
- (c) charge its current fees for this service in force from time to time.