|  |  |  |  |
| --- | --- | --- | --- |
| **NOTE: Please complete in BLOCK LETTERS** | | Tick (✓)applicable block(s) and complete where necessary | |
| New application | Preapproval | Increase in an existing loan | Takeover loan |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PART A: STUDENT DETAILS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Title (Mr/Mrs/Miss/Dr, etc) | | | | | | | | | | | |  | | | | | | | | | | | | Surname | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Identity no | | |  | | | | | | | | | | | | | | | | | | | | | First name(s) | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date of birth (ddmmyyyy) | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
| Gender: | | | | | | | | Male | | | | | | | Female | | | | | | | | | | | | | | | Race (for statistical purposes): | | | | | | | | | | | | | | | | | | Black | | | | | | | | | | | | | | | Coloured | | | | | | | | | | | | | | Indian | | | | | | | | | | | | White | | | |
| RSA resident? | | | | | | | | Yes | | | | | | | No | | | | | | | If 'No', country of residence | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Do you have tax obligations, tax liabilities or tax residencies outside of South Africa? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | | | | | | | No | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | |
| Are you a US citizen, a US person or a US national? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | | | | | | | No | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | |
| Marital status: | | | | | | | | Single | | | | | | | | | | | | | | | | | Married out of community of property | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Married in community of property | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | Divorced | | | | | | | | | | | | | | | | | Widowed | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Contact details | | | | | | Tel (w) | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | Tel (h) | | | | | | | |  | | | | | | | | | | | | | | | | | | | | Cell | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | Fax | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | Email address | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Preferred contact no: | | | | | | | | | Home | | | | | | | | | | Work | | | | | | | | | | | | | | | Cell | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| Are you an emancipated minor? | | | | | | | | | | | | | | | | | Yes | | | | | | | | | | | No | | | | | | | | | | | | | | | If 'No', are you assisted by your guardian? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | | | | | | | | No | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **ADDRESS DETAILS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Residential address | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Postcode | | | | | | | | | | | |  | | | |
| Postal address | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Postcode | | | | | | | | | | | |  | | | |
| Period at this address (years) | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | Period at previous address (years) | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Residential status: | | | | | | | | | Live with partner | | | | | | | | | | | | | | | | | | | | | | | | Live with parents | | | | | | | | | | | | | | | | | Own property | | | | | | | | | | | | | | | | | | | | | | | Rent property | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **EMPLOYMENT DETAILS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Income category: | | | | | Salary earner | | | | | | | | | | | | | | | Contract worker | | | | | | | | | | | | | | | | | | | | | | | Student | | | | | | | | | | | | | Other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Present employer | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Occupation | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Employed since | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Number of years at previous employer | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| Industry | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **SPOUSE DETAILS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (Please complete if married in community of property.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Title (Mr/Mrs/Miss/Dr, etc) | | | | | | | | | | | |  | | | | | | | | | | | | Surname | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Identity no | | |  | | | | | | | | | | | | | | | | | | | | | First name(s) | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **LOAN DETAILS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total loan amount | | | | | | | | R | | | | | | | | | | Indicate the total loan amount paid to you to date in terms of the student loan agreement: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | R | | | | | |
| Additional amount required | | | | | | | | | | | | | R | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| Please provide a breakdown of the loan amount required in the budget table below: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | Tuition fees | | | | | | | | | Books | | | | | | | | | | | | | | Accommodation | | | | | | | | | | | | | Equipment | | | | | | | | | | | Total | | | | | | | | | | | Less own resources | | | | | | | | | | | | | | | | | | | Loan amount | | | | | | | |
| Total for the year | | | | | | | | R | | | | | | | | | R | | | | | | | | | | | | | | R | | | | | | | | | | | | | R | | | | | | | | | | | R | | | | | | | | | | | R | | | | | | | | | | | | | | | | | | | R | | | | | | | |
| **Note**   * **Fulltime students**: Monthly payments for the interest, fees and, if applicable, insurance on the loan amount are payable in the month following the disbursal of the loan amount. * **Parttime students**: Monthly instalments (calculated on the loan amount, interest, fees and, if applicable, insurance) are payable in the month following disbursal of the loan amount. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **INITIATION FEE (complete only if first loan)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Do you wish to pay the initiation fee upfront or do you wish to include it in the loan? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Upfront | | | | | | | | | | | | | | | | | | | | | | Include in loan | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **ACADEMIC DETAILS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Student status: | | | | | | | | Parttime | | | | | | | | | | Fulltime | | | | | | | | | | | | | | | | | | | | | | | Accommodation: | | | | | | | | | | | | | | | | Residence | | | | | | | | | | | | | Private | | | | | | | | | | | | | | | | | | | | | | |
| Student no | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Educational institution | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Field of study | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Major subject | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Year of study | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Expected final year | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **If the applicant is a fulltime student, the income and expenditure table (part C) must be completed by the surety. If the applicant is a parttime student without a surety and is employed, the income and expenditure table (part C) must be completed by the applicant.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **OTHER STUDY LOANS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Institution | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Loan amount | | | | | | | | | | | | | | | | | | R | | | | | | | | | | | | | |
| Balance outstanding | | | | | | | | | R | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **CREDIT LIFE INSURANCE** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| The credit life insurance is optional. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Do you choose to have credit life insurance? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes  No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If 'Yes', please tick the appropriate option: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| We will arrange this for you. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| You will arrange your own insurance. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Note: Ensure that the insurance option was discussed with the applicant and hand the NEDBANK (Student Loans) INSURED BENEFIT SCHEME document to the client.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **PAYMENT HISTORY (Student)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Are you currently under or have you applied for debt review? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | | | | No | |
| Do you have any rearrangement in place with a credit provider as a result of debt counselling? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | | | | No | |
| Do you have any dispute in progress with a credit bureau? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | | | | No | |
| Do you have a *curator bonis*? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | | | | No | |
| Are you under administration? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | | | | No | |
| If you are married in community of property, is your spouse currently under or has he/she ever applied for debt review? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | | | | No | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **PART B: SURETY DETAILS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Title (Mr/Mrs/Miss/Dr, etc) | | | | | | | | | | | |  | | | | | | | | | | | | Surname | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Identity no | | |  | | | | | | | | | | | | | | | | | | | | | First name(s) | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date of birth (ddmmyyyy) | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
| Gender: | | | | | | | | Male | | | | | | Female | | | | | | | | | | | | | | | | Race (for statistical purposes): | | | | | | | | | | | | | | | | | | Black | | | | | | | | | | | | | | | Coloured | | | | | | | | | | | | | | Indian | | | | | | | | | | | | White | | | |
| RSA resident? | | | | | | | | Yes | | | | | | No | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Marital status: | | | | | | | | Single | | | | | | | | | | | | | | | | | Married out of community of property | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Married in community of property | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | Divorced | | | | | | | | | | | | | | | | | Widowed | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Contact details | | | | | | Tel (w) | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | Tel (h) | | | | | | | |  | | | | | | | | | | | | | | | | | | | | Cell | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | Fax | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | Email address | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Preferred contact no | | | | | | | | | Home | | | | | | | | | | Work | | | | | | | | | | | | | | | Cell | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
| Are you an emancipated minor? | | | | | | | | | | | | | | | | Yes | | | | | | | | | | | No | | | | | | | | | | | | | | | | | | If 'No', are you assisted by your guardian? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | | | | | | | No |
|  | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  |
| **ADDRESS DETAILS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Residential address | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Postcode | | | | | | | | | | | |  | | | |
| Postal address | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Postcode | | | | | | | | | | | |  | | | |
| Period at this address (years) | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | Period at previous address (years) | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| Residential status: | | | | | | | | | | Live with partner | | | | | | | | | | | | | | | | | | | | | | Live with parents | | | | | | | | | | | | | | | | | Own property | | | | | | | | | | | | | | | | | | | | | | | Rent property | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **EMPLOYMENT DETAILS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Income category: | | | | | | | | | | Salary earner | | | | | | | | | | | | | | | | | | | | | | Contract worker | | | | | | | | | | | | | | | | | Student | | | | | | | | | | | | | | | | | | | | | | | Other | | | | | | | | | | | | | | | | | | | | |
| Present employer | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Occupation | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Employed since | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Number of years at previous employer | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| Industry | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **BANKING DETAILS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Bank | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Branch | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Type of account | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Account no | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **SPOUSE DETAILS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (Please complete if married in community of property.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Title (Mr/Mrs/Miss/Dr, etc) | | | | | | | | | | |  | | | | | | | | | | | | Surname | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Identity no |  | | | | | | | | | | | | | | | | | | | | | | First name(s) | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| As the spouse of the aforementioned surety, I consent to my spouse (the surety) binding himself/herself as surety and coprincipal debtor to Nedbank Limited for the amount specified in the suretyship for facilities granted to the principal debtor on the form usually used by Nedbank for this purpose. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signed by spouse | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | at | | | |  | | | | | | | | | | | | | | | | | | | | | | | on | | | | | / | | | | | | | | | | | / | | | | | | | | | | |  | | | |
|  | | | | | | | Signature | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | Place | | | | | | | | | | | | | | | | | | | | | | |  | | | | | Day | | | | | | | | | | | Month | | | | | | | | | | | Year | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Witness 1 | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Witness 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Signature | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Name | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **PAYMENT HISTORY (Surety)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Are you currently under or have you applied for debt review? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | | | | No | | |
| Do you have any rearrangement in place with a credit provider as a result of debt counselling? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | | | | No | | |
| Do you have any dispute in progress with a credit bureau? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | | | | No | | |
| Do you have a *curator bonis*? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | | | | No | | |
| Are you under administration? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | | | | No | | |
| If you are married in community of property, is your spouse currently under or has he/she ever applied for debt review? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | | | | No | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PART C: INCOME AND EXPENDITURE TABLE** | | | | | | | | | | | | |
| **INCOME** |  |  | | **EXPENDITURE (Household)** | | | | |  | |  | |
| Gross monthly basic salary | R |  | | Total property rental/home loan\* | | | | | R | |  | |
| Estimated future revenue from business (if sole proprietor) | R |  | | Vehicle | | | | | R | |  | |
| Travel/Car allowance | R |  | | Personal loans | | | | | R | |  | |
| Housing subsidy/allowance | R |  | | Overdraft | | | | | R | |  | |
| Medical aid allowance | R |  | | Credit cards | | | | | R | |  | |
| **Reimbursements** |  |  | | Clothing accounts | | | | | R | |  | |
| Petrol | R |  | | Furniture accounts | | | | | R | |  | |
| Cellphone/Telephone | R |  | | Other loans | | | | | R | |  | |
| Other | R |  | | Rates, taxes, water and electricity | | | | | R | |  | |
| **Commission** |  |  | | Groceries and clothing | | | | | R | |  | |
| Month 1 | R |  | | Domestic wages | | | | | R | |  | |
| Month 2 | R |  | | Telephone and cellphone(s) | | | | | R | |  | |
| Month 3 | R |  | | Entertainment and DStv | | | | | R | |  | |
| Overtime | R |  | | Fuel and maintenance | | | | | R | |  | |
| Sick pay | R |  | | Short-term insurance | | | | | R | |  | |
| Leave pay | R |  | | Life insurance and annuities | | | | | R | |  | |
| Bonus | R |  | | Investments and savings | | | | | R | |  | |
| **Other income** |  |  | | Education and school fees | | | | | R | |  | |
| Maintenance | R |  | | Medical expenses (excluding medical aid contribution) | | | | | R | |  | |
| **Additional income** |  |  | | Other | | | | | R | |  | |
| Net pension | R |  | |  | | | | | R | |  | |
| Net disability grant | R |  | |  | | | | | R | |  | |
| Other (specify) | R |  | |  | | | | | R | |  | |
| Gross property rental income | R |  | |  | | | | |  | |  | |
| **Total income** | **R** |  | | **Total monthly expenditure** | | | | | **R** | |  | |
|  |  |  | |  | | | | |  | |  | |
| **Deductions** |  |  | |  | | | | |  | |  | |
| PAYE | R |  | | \* Where the declared amount is less than the monthly home loan instalment reflected in the credit bureau data/student loan agreement, I warrant that the amount is my contribution to the monthly instalment and that my spouse/the other party or parties to the joint home loan is/are responsible for the remaining part of the instalment. | | | | | | | | |
| UIF | R |  | |
| Medical aid | R |  | |
| Pension/Provident fund | R |  | |  | | | | |  | |  | |
| Group insurance | R |  | |  | | | | |  | |  | |
| Industrial Council contributions | R |  | |  | | | | |  | |  | |
| Union fees | R |  | |  | | | | |  | |  | |
| **Total deductions** | **R** |  | |  | | | | |  | |  | |
|  |  |  | |  | | | | |  | |  | |
| **Net salary** | **R** |  | |  | | | | |  | |  | |
|  |  |  | |  | | | | |  | |  | |
| Total income | R |  | |  | | | | |  | |  | |
| Less total expenditure | R |  | |  | | | | |  | |  | |
|  |  |  | |  | | | | |  | |  | |
| **Surplus/Deficit** | **R** |  | |  | | | | |  | |  | |
|  |  |  | |  | | | | |  | |  | |
| **LEGAL AND GENERAL INFORMATION** | | | | | | | | | | | | |
| While Nedbank Group Limited and all its subsidiaries and associates and its cessionaries, delegatees and successors in title (collectively 'Nedbank') are constantly striving to provide a service that is intended to make your banking as easy and convenient as possible, all South African banks are legally obliged to verify and retain information received from you. This includes identity verification with statutory bodies. Apart from the information you will provide in this form, Nedbank may therefore require additional documentation and information from you. | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **PRIVACY CONSENT** | | | | | | | | | | | | |
| I provide Nedbank with my express consent to process my personal information as defined in legislation, including fingerprints, biometric personal identification details, photographs and identity verification in terms of the Financial Intelligence Centre Act, 38 of 2001, for purposes of providing financial services and preventing fraud and money laundering, and to send my personal information to third parties in order to provide a service to me, and also to send such information to foreign countries, when necessary, by electronic or other means for processing. I understand that such countries may not have specific data privacy laws. I further consent to Nedbank using my personal information to monitor and analyse my consumer behaviour. | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **COMMUNICATION AND MARKETING** | | | | | | | | | | | | |
| 1. In order to assist me to achieve my financial goals, Nedbank\*may contact me from time to time with information that meet my needs. | | | | | | | | Yes | | | | No |
| 1. I would like Nedbank to present exclusive offers from other organisations to me. | | | | | | | | Yes | | | | No |
| 1. Nedbank may request reputable research organisations to contact me. | | | | | | | | Yes | | | | No |
| 1. My preferred method(s) of communication is/are: | | | Email | | SMS | Direct mail | Telephone | | | All | | |
| 1. Nedbank may use a method of communication other than that preferred by me as well as my personal information to market its products to me, including for electronic marketing and telesales, until I give an instruction to the contrary. | | | | | | | | Yes | | | | No |
| \* 'Nedbank' refers to Nedbank Group Limited and all its subsidiaries and associates and its cessionaries, delegatees and successors in title. | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **FURTHER PROCESSING** | | | | | | | | | | | | |
| 1. Nedbank may search, update or place my records at credit reference bureaus and government agencies in order to verify my identity, assess my ability to obtain credit or to provide collateral of any kind, including guarantees or suretyships, and may, on request from another credit provider with whom I have applied for credit, give my personal information, including my credit reference data, to such credit provider and also make any enquiries that it deems necessary to confirm the details on this form for marketing purposes and to assess my creditworthiness. 2. Nedbank may use my personal information for debt enforcement, including recovery, collection, repayment, surrender, enforcement and cession of debts. 3. I confirm that I have fully disclosed my debt repayment history. | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **ELECTRONIC SIGNATURE CONSENT** | | | | | | | | | | | | |
| I acknowledge and agree to be bound by the agreement by my electronic signature and I am uniquely identified by my signature(s). A copy of the signed agreement will be emailed and/or handed to me for my record. Nedbank will store and archive the electronically signed agreement. | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **CONFIRMATION** | | | | | | | | | | | | |
| 1. Nedbank has explained this application form, the product and costs, where applicable, to me and I confirm that I fully understand the contents thereof and that I am completing it of my own free will. 2. I warrant that I have fully and truthfully answered all questions and responded to requests for information as part of the assessment process, and that I am not aware of any other information that may affect this application negatively. 3. Nedbank may undertake identity and fraud prevention checks and share information relating to this application with the Southern African Fraud Prevention Service. 4. All consent provided in this document will survive any contractual relationship that I have with Nedbank, unless I provide Nedbank with written notice that I have cancelled such consent. 5. Nedbank may obtain my account statements from financial institutions for the purpose of assessing this loan application, whether electronically or otherwise. | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **Note: The consultant who assisted you with this loan application is not entitled to charge you any fees or commission.** | | | | | | | | | | | | |
|  | | | | | | | | | | | | |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Signed at |  | | | | on | / | / |  |
|  | Place | | | |  | Day | Month | Year |
|  | | | | | | | | |
| By student | |  |  |  | | | | |
|  | | Signature |  |  | | | | |
|  | |  |  |  | | | | |
| By legal guardian (If student is under the age of 18) | |  |  |  | | | | |
|  | | Signature |  |  | | | | |
|  | |  |  |  | | | | |
| By surety | |  |  |  | | | | |
|  | | Signature |  |  | | | | |
|  | |  |  |  | | | | |
| Witness | |  |  |  | | | | |
|  | | Signature |  | Name | | | | |



**Insurance Policy Summary (Student Loans)**

**Why read this document?**

This document explains the death and disability cover provided for your student loan by the Nedbank (Student Loans) Insured Benefit Scheme. In easy terms it will help you understand:

* what you are covered for;
* how much it will cost you;
* what your rights are;
* what your responsibilities are;
* how the claims process works; and
* when this insurance policy will not pay out.

This document should be read together with the schedule attached to it. Together, these form your master policy summary as required by section 48 of the Long-term Insurance Act and the Policyholder Protection Rules of this act. If there is any difference between the document and the schedule, the schedule should override the document. The actual master policy, which can be viewed at your Nedbank branch, overrides both the document and the schedule should they differ.

**What am I covered for?**

This policy provides insurance cover for the amount of your student loan.

* This insurance will be paid out to the bank to settle your outstanding loan if you (the insured person):
* die; or
* become totally and permanently disabled (please see definition under ‘additional information’).
* The amount paid out for each of these events will be the lump sum benefit shown on your schedule.
* The insurance cover starts on the date of approval of the loan.
* All cover that is provided by this policy will come to an end when your loan is settled or the policy discontinued. The disability cover will automatically come to an end when you turn 30.

**How much will it cost me?**

Your monthly premium is shown on your schedule. It has been calculated according to the amount of cover that you need, the claims experience and factors such as your age and gender. This amount will be reviewed each year on the scheme’s policy anniversary date and may also change if the cover amount or any of the terms of the policy are changed.

**What are my rights?**

* You have a ‘cooling-off period’ of 30 days from the date on which you receive this document and the schedule in which you can cancel this insurance and receive a refund of all premiums that you have paid, less the cost of cover enjoyed to that date. However, this will be allowed only if no benefit has been claimed or paid in respect of this policy.
* You may view the master policy at your Nedbank branch.
* If you have any complaints, you can submit these in writing to:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| PARTICULARS OF CONTACT PERSONS | | | | | | |
| **Nature of enquiry** | **Contact person** | **Designation** | **Company** | **Telephone** | **Fax** | **Email address** |
| General enquiries | Mrs F Bosman | Manager:  Customer Services | Nedgroup Life  PO Box 149175  East End  4018 | 0860 263 543 | 031 364 2716 | customerservices@nedgrouplife.co.za |
| Policyholder benefits | Mrs K Muller | Manager:  Policyholder Benefits | Nedgroup Life  PO Box 149175  East End  4018 | 031 364 1029 | 031 364 0014 | Nedgrouplifecq@nedgrouplife.co.za |
| Compliance/ Complaints | Mrs A Vernes | Compliance Officer | Nedgroup Life  PO Box 149175  East End  4018 | 031 364 2512 | 031 364 0027 | compliance@nedgrouplife.co.za |
| Regulatory contact | Mr RL Blumeris | Public Officer | Nedgroup Life  PO Box 149175  East End  4018 | 031 364 1547 | 031 364 0027 | lblumeris@nedgrouplife.co.za |
| Complaints in respect of claims or other matters not resolved satisfactorily | Judge B Galgut | Long-term Insurance Ombudsman | Long-term Insurance Ombud Office  Private Bag X45  Claremont  7735 | 021 657 5000 | 021 674 0951 | info@ombud.co.za |
| FAIS complaints (relating to financial service provided) | Mr Charles Pillai | FAIS Ombudsman | FAIS Ombud Office  PO Box 74571  Lynnwood Ridge  Pretoria  0040 | 012 470 9080 | 012 470 9098 | charles@faisombud.co.za |

**What are my responsibilities?**

**Payment** – The premium will be deducted automatically from your account by Nedbank Limited and paid to Nedgroup Life Assurance Company Limited. However, it is your responsibility to check your bank statements to make sure that the premiums are paid correctly.

**How does the claims process work?**

**Death**

* Should you (the insured person) die, the claim must be submitted as soon as possible, but no later than 52 weeks (one year) after your death.
* For claims or queries contact Nedgroup Life Policy Holder Benefits Manager: Mrs K Muller, PO Box 149175, East End, 40 18. The email address is [Nedgrouplifecq@Nedgrouplife.co.za](mailto:boelifecq@boelife.co.za).

**Disability**

Your claim must be submitted not later than **seven months** after you became disabled.

**To claim**

* The necessary forms can be collected from the Nedbank branch where your account is held.
* Claims must be submitted in writing.
* All necessary proof must be submitted with your claim (this may not necessarily be restricted to proof of death or disablement). Further medical examinations may be required by Nedgroup Life Assurance Company Limited at its expense.

**Payment of claims**

In the event of a claim the outstanding balance will be paid into the student loan account.

**When will this insurance not pay out?**

This insurance will not be paid out in any of the following cases:

* If payment of your premiums is not up to date.
* If disability is caused by attempted suicide or self-inflicted injury.
* If disability is not total and permanent.
* If disability is due directly to an injury sustained, or a disease or condition that existed, or a surgical operation undergone during the six months immediately prior to the date of commencement of the policy and the insured person becomes disabled within the 12-month period immediately following the commencement of the policy.
* If, in the case of death, the claim is submitted more than 52 weeks (one year) after your death, or, in the case of disability, more than seven months after you became disabled.
* If anyone claiming any benefits under this policy uses any fraudulent means to do so.
* If the life assured is affected (temporarily or otherwise) by alcohol or drugs other than as prescribed by a medical practitioner.
* If the life assured commits any breach of criminal law.

Your insurance cover will automatically come to an end:

* when your loan has been repaid or, in the case of disability cover, when you turn 30; or
* if the master policy between Nedbank Limited and the underwriter, Nedgroup Life Assurance Company Limited, is cancelled.

**ADDITIONAL INFORMATION**

**Disability definition**

You will be considered totally and permanently disabled if:

* you are prevented by injury, surgical operation or disease from
* continuing your studies; or
* working in the profession that you have qualified for and that was the reason for the loan;

**OR**

* you have total and permanent loss of
* the sight of both eyes; or
* the use of both hands; or
* the use of both feet; or
* the use of one hand and one foot.

**Master policy**

* According to the master policy, Nedbank Limited (Reg No 1951/000009/06) is the proposer and policyholder, and you – the person who has taken out a loan for which this policy provides cover – are the insured person.
* Subject to payment of the premium, Nedgroup Life Assurance Company Limited (Reg No 1993/001022/06) undertakes to pay the sum insured on the death or disablement of the insured person/proposer.
* The policy is subject to the laws of the Republic of South Africa and the jurisdiction of its courts. The rules and conditions of the policy are consistent with the provisions of the Long-term Insurance Act and with the terms of the policy.
* The policy anniversary date is the date on which the master policy was signed between Nedgroup Life Assurance Company Limited and Nedbank Limited.
* Your premium will be reviewed annually on the policy anniversary date.
* Nedgroup Life Assurance Company Limited is an authorised financial services provider.

Should you have any questions, please call the Nedgroup Life Assurance Helpdesk on 0860 263 543.