



LNIG Hollard Life
The Investment Series

GOAL BASED SAVINGS PRODUCT

LEFISOANA



Introducing your policy

Welcome to LNIG Hollard Life

LNIG Hollard Life is committed to providing world class service. Our aim is to ensure that all our communication with you is honest and easy to understand. We wrote this policy in plain English.

We will pay a valid claim and investment fund value, if applicable, for the benefits set out in this policy on condition that:

- you pay the *total premium* set out in this policy;
- you give us all the information we ask for that materially affects our risk; and
- you keep to the terms and conditions of this policy.

The parties to this policy

The policy is a legal contract between you and Lesotho National Life Assurance Company Limited, trading as LNIG Hollard Life. Only you have rights under this policy.

- 'We', 'us' and 'our' refer to Lesotho National Life Assurance Company Limited, trading as LNIG Hollard Life, registration number 195/267. LNIG Hollard Life is a registered insurance company and an authorised financial services provider.
- 'You' and 'your' refer to the *policyholder* named in the policy schedule who is the owner of this policy.

Key definitions used in this policy

We have given a specific meaning to certain words. These words appear in *italics*. The glossary at the end of this document gives the definitions that have the same meaning anywhere in this policy. Certain definitions only apply to a specific benefit section and will appear at the end of each benefit schedule. The most common definitions used in this policy are below.

- '*policyholder*' refers to you, the owner of the policy named in the policy schedule.
- '*insured person*' refers to a person that meets the conditions for eligibility and who is listed on the policy schedule. Each benefit section tells you which *insured person* is eligible for the specific benefit.
- '*main insured person*' refers to the person named in the policy schedule who we accepted as the *main insured person*.

How to read this policy

- The plural of these words is used where appropriate.
- The headings in the policy are for reference only and will not affect the meaning of the terms and conditions to which they relate.
- When we refer to a specific section of this policy, the reference will include the name of the heading. For example, certain benefits might have additional events when the benefits end as set out in **When cover or benefits for an insured person ends** under the benefit section.
- Days refer to ordinary calendar days, including weekends and public holidays.
- Month means a calendar month excluding the first day, including the last day and including weekends and public holidays.
- Words which refer to natural persons will also refer to legal persons.
- 'He', 'him' and 'his' refers to a male or female

Additional information document

The **Additional information document** is a separate document that contains contact details, disclosures, and other important information to ensure you always have all the information you need. This document does not form part of your policy.

It is important to keep the **Additional information document** with your policy wording and policy schedule.

You can contact us on the contact details set out in the **Additional information document**.

Your policy

This policy is a legal contract between you and us and includes your **application**, the **policy wording** and the **policy schedule**.

- The **application** is where you asked us to provide benefits to all the *insured persons* under this policy, and where you agreed to pay the monthly *total premium*.
 - The application could be the electronic or physical form that you completed when you applied for this policy; or
 - If this policy was sold to you telephonically, the recording of the conversation we had with you, the *main insured person* and any other *insured person* will be part of this policy. The conversation includes all the information given to us.
 - If you make any changes or additions to the policy after the *policy start date*, the electronic or physical form you completed, or the recording of the telephonic conversation we had with you when you made the changes will also be part of this policy.
- The **policy wording** includes the general terms and conditions and the benefit sections as explained below:
 - The **general terms and conditions** (this document) includes all the terms, conditions and exclusions that apply to all the benefit sections. You must read the general terms and conditions together with each benefit section and your policy schedule.
 - The **benefit sections** set out the terms and conditions specific to the selected benefit.
- The **policy schedule** is issued with your policy documents and sets out (amongst other things) the details of the *policyholder* and the *insured persons*. It also sets out which benefits you chose, benefit amounts, the *benefit premium*, *benefit contribution*, *total premium* and all other information that is not set out in the policy documents.

You must carefully read these documents together. Make sure you understand what you bought as well as what your responsibilities are. If you do not keep to the terms of this policy, it may result in us not paying a claim or cancelling your policy and your investment fund value will be returned to you.

If you find any errors on the **policy schedule**, please tell us immediately on the contact details set out in the **Additional information document**.

We are not bound by any changes unless we have agreed to them in writing and have included them into this policy by issuing you with a new **policy wording** or a new **policy schedule**. This **policy document** replaces all previous **policy documents**.

The **policy document** will always be the final determining factor in the event of any disagreement around meaning or interpretation.

GENERAL TERMS AND CONDITIONS

Index

A.	Policy Conditions	4
B.	Total premium and changes to the policy	5
C.	Your responsibilities	7
D.	General Exclusions – when we will not pay any benefits	8
E.	Claiming under this policy	8
F.	Ending this policy	10
G.	General Conditions	11
H.	General Disclosure	12
I.	Glossary of defined terms	14



A. Policy Conditions

1. Conditions for eligibility

Any person to be insured under this policy must:

- a. be an eligible person as set out in the benefit schedule, and be listed on the policy schedule;
- b. be within the age limits set out in the benefit schedule;
- c. be a citizen of Lesotho or have been given the necessary permission from the Lesotho authorities to live and work in Lesotho; and
- d. ordinarily reside in Lesotho.

2. When the policy starts

The policy will begin on the *policy start date*. An *insured person's* benefit starts on his *benefit start date*, subject to us having received the *total premium*.

3. When the policy ends

The policy ends on the earliest of:

- The *policyholder* no longer being eligible for any benefit;
- *Total premiums* are not paid, allowing for the grace period;
- The *policyholder* cancels this policy; or
- The *policyholder* dies.

3.1. When benefits for the main insured person ends

Cover for the *main insured person* ends when any of the following happens:

- any conditions for eligibility are no longer met;
- *total premiums* are not paid, allowing for the grace period;
- the *main insured person* ends this policy;
- the benefits reaches maturity, where applicable; or
- the *main insured person* dies. **Continuation of cover – The policy ends because of the death of the main insured person.**

4. Continuation of cover

4.1 Reinstating or Restarting the policy

If this policy ends because we do not receive payment of the *total premium*, or because you asked us to cancel the policy, you may ask us to either reinstate or restart the policy if the following conditions are met:

- You must ask us within four months from the last day of the month for which we received the *total premium*.
- We must have received a *total premium* for at least six months in a row immediately before the policy ended, before you may ask us to reinstate or restart your policy.
- If you want to reinstate or restart the policy, you must agree in writing to any terms we may offer. This means that your policy will be put in place again.

At our discretion, you will be given a choice to either restart or reinstate your policy.

a. When you choose to restart your policy:

- Your policy will restart on the first day of the month after you pay your *total premium*. Your next *total premium* will be due on the first of the following month.
- You will not have to pay the *total premiums* in arrears for the time from when the policy ended, to the date that you restart your policy.
- We will not pay for claims for an *Insured Event* that happened during the period that you did not pay your *total premiums*, unless the *Insured Event* occurred during the grace period.
- Your grace periods will start again as if you had bought a new policy on the date the policy restarts.
- All *Waiting Periods* will start again as if you had bought a new policy on the date the policy restarts.
- The date for determining of *pre-existing conditions* will not start again and will still be the original *Policy Start Date*.

b. When you choose to reinstate your policy:

- You will have to pay up all the *total premiums* for the time from when the policy ended, to the date that you reinstate your policy.
- We will not pay for claims for an *Insured Event* that happened during the period that you did not pay your *total premiums*, unless the *Insured Event* occurred during the grace period.
- Your grace periods will start again as if the policy has been active since the original *Policy Start Date*.
- Six (6) month *Waiting Periods* will start from the reinstatement of your policy. Original *Waiting periods* will also apply as from the original *Policy Start Date* of the policy.
- The date for determining of *pre-existing conditions* will not start again and will still be the original *Policy Start Date*.

4.2 The policy ends because of death of the policyholder

Investment benefits end on the death of the *policyholder* and cannot be continued.



B. Total premium and changes to the policy

1. The monthly total premium

1.1 What you must pay

You must pay the *total premium* as set out in the policy schedule.

We may decide to change the *total premium* at any time. We will tell you at least one month before the effective date of the revised *total premium*.

1.2 When you must pay

- a. The *total premium* is due in advance on the first of every month, but we will collect the *total premium* on the *premium collection date*.
 - For the policy to start, we must receive the first *total premium*. If we do not receive your first *total premium* the policy will not start.
 - For the policy to continue each month, the *total premium* must be paid on the *premium collection date*.
- b. We will allow a 30-day grace period (extra time to pay the *total premium*) from the first of every month after the first month for you to pay your *total premium*. This grace period does not apply to the payment of the first *total premium*.
- c. We may match your *premium collection date* to your salary pay date or any other appropriate date in order to prevent your policy ceasing due to non-payment and avoid unnecessary bank costs being incurred on your bank account.

1.3 If you do not pay the monthly total premium

- a. We will tell you when we do not receive the *total premium*.
- b. If any debit order instruction is rejected because of insufficient funds or for whatever reason, we will attempt to debit your bank account again within the 30 days grace period (extra time). If we are able to collect the *total premium*, the policy will continue.
- c. The policy will end on the last day of the month for which a *total premium* was received if:
 - the payment is not received within 30 days; or
 - you stop the debit order directly with the bank.
- d. We will pay a valid claim that happens during the 30 days grace period (extra time), but we will deduct the unpaid *total premium*.

2. When the policy conditions will change

We may change the terms and conditions of this policy at any time and not just at the *policy review date*. We will tell you at least one month before the effective date of any changes we make as set out below. We will send you an updated policy schedule, policy wording and an explanation of the changes.

2.1 We may make changes to the policy conditions

We may change the terms and conditions of this policy at any time and not just at the *policy review date*. Any change we make will not affect the extent of the benefits already provided and in force in terms of this policy.

If any statutory authority introduces measures which affect this policy or if the law changes, we will make the necessary changes and tell you of the reason for the changes. This could mean that we have to cancel a benefit section.

2.2 You may make changes to the policy

If you ask us to make any changes to the policy it will be effective from the date agreed to by us.

You may add benefits, or increase the benefit amounts of your existing benefits, subject to the conditions of the benefit and any other conditions we may set from time to time. We may decline your request to make the change requested.

The *waiting period* and investment preservation period, if applicable, will apply from the *benefit start date* of an additional benefit, or the date of the increase in the benefit amount.

You can ask us to reduce the benefit amounts

- If we reduce the benefit amounts, we will recalculate the *benefit premium* according to the reduced benefit amounts.
- If we reduced the benefit amounts, you will be able to increase the benefit amounts again later.

You can ask us to cancel some of the benefits on the policy

- If we cancel some of the benefits, you will be able to add them back on later subject to benefit eligibility conditions.



C. Your responsibilities

1. You must give us information

You must tell us when any of the following information changes.

- a. Information about the policyholder or main insured person
 - full name, address, and contact details;
 - identity number, date of birth and gender;
 - bank account details and any other information we need to collect your total premium if you chose to pay by debit order; and
 - *premium collection date*.
- b. Information about the *beneficiary/trustee*
 - full name, address and contact details;
 - identity number, date of birth and gender; and
 - relationship to the *main insured person*.

2. You must give us true information

We base our decision to insure the *insured person(s)* on the information you give to us. If any of this information is incomplete or incorrect, our decision will have been based on incomplete or incorrect information. If we had known the complete and correct information, we may not have agreed to the benefits of the *insured person(s)* for the amount set out in the policy schedule.

It is your responsibility to ensure that all *material information* we receive is complete and correct.

Proof of identification is required before any benefit is payable.

- If the age was incorrectly stated, we will recalculate the *total premium* according to the correct age and will adjust the benefits accordingly.
- If we would not have provided benefits for the *insured person* on his *benefit start date*, we will pay back *the total premiums* from his benefit start date, less any applicable administration fees.

3. You must always be honest

All dealings about this policy must be done honestly and in good faith. We will not accept any responsibility under this policy if you, or any person acting for you is dishonest or misrepresents any information.

- a. You will lose your right to claim if we are prejudiced or suffer a loss because of:
 - dishonest behaviour;
 - misrepresentation; or
 - criminal activity.
- b. We will cancel your policy from the *policy start date* or from the date of the actions listed above. If we cancel your policy from the *policy start date*, we reserve the right to keep the *total premiums* paid.
- c. We will take legal steps to recover damages from you and may lay criminal charges set out in this policy.

4. You must keep to the terms and conditions

You must keep to all the rules, terms, conditions and the claims process set out in this policy.

5. When you can transfer your rights under this policy to another person

You may not transfer your rights or benefits payable under this policy to another person or entity, except as provided for by any of the options set out in the **Conditions for cover** section.

If you try to transfer the rights to any other benefits in this policy to another person or entity, we will not recognise that contract. We will continue our contract with you on any of the other benefits as if you had not made a contract with someone else.



D. General Exclusions – when we will not pay any benefits

Certain benefit sections might have specific exclusions that apply in addition to these general exclusions. You must read this section together with each benefit section.

In addition to any specific exclusions set out in each benefit section, we will not pay a claim for an *insured event* because of any of the exclusions listed below:

1. Criminal activities

We will not pay a claim or benefit if any *insured event* is directly or indirectly caused by criminal activities. Criminal activity means the *insured person* is or was:

- under investigation for committing a crime;
- being prosecuted for committing a crime; or
- convicted by a Court of Law for having committed a crime.

We will delay our claims decision until the finalisation of the investigation, or the criminal trial (as applicable). The *claimant* must give us proof of the outcome of the investigation or the criminal trial (as applicable).

2. The insured person was not eligible

We will not pay a claim or benefit for an *insured person* if he was not eligible or did not meet the definition of *insured person* on his *benefit start date*.

If we do not pay the claim or benefit because the *insured person* was not eligible, we will refund all the *total premiums* we have received since his *benefit start date*.

3. Insured event or accident before *the benefit start date*

We will not pay a claim or benefit for an *insured person* if the *insured event*, or *accident* leading to the *insured event* happened before his *benefit start date*.



E. Claiming under this policy

1. Nominating a beneficiary

1.1 The policyholder must tell us who the beneficiary and/or trustee is

You must nominate a *beneficiary/trustee* to receive the benefits in the event of the death of the *policyholder*.

- We will pay the total benefit to the *beneficiary*.
- You may nominate more than one *beneficiary*.
- You may change or withdraw the nomination at any time.
- The change or withdrawal of the nomination shall not be binding on us unless you told us in writing and the name of the *beneficiary* is reflected in the policy schedule.
- A *beneficiary* will have no interests or rights in the policy during the lifetime of the *policyholder*.
- Nominations in a will or any other testamentary instrument that the *policyholder* agreed to, shall not affect or invalidate any existing *beneficiary* nomination that we have recorded.

1.2 If the beneficiary is under the age of 18

If the *beneficiary* is under the age of 18 we will pay the benefit to the legal guardian or the trust.

- The *policyholder* must tell us who the legal guardian is or give us the details of the trust.
- The *policyholder* must have set up a trust before his death for the purpose of receipt of benefits payable on his death, where the beneficiary is under the age of 18.

1.3 If there is no beneficiary

- If there is no *beneficiary* it means that:
 - the *policyholder* died without nominating a *beneficiary*;
 - the *beneficiary* is not alive when *the insured person* died;
 - the *beneficiary* cannot be located within 12 months of the death of the *insured person*; or
 - the *beneficiary* is under the age of 18 and there is no legal guardian or trust.
- We will pay all benefits payable to the *beneficiary* to the first of the following *claimants*:
 - the *insured person's* spouse, *child*, *parent*, brother or sister.
- The *claimant* must be over the age of 18 and must provide proof of his relationship to the *insured person*.
- If a person other than one of the *claimants* listed above contacts us to claim the *insured person's* benefit, we will pay the benefit to the *insured person's* estate.

2. How to claim

If there is a claim for a benefit payable under this policy:

- You must tell us of the claim in writing within 180 days** from the date of the *insured event*. We will tell you what evidence and other documents we need to process the claim.
- You must send us the evidence and other documents we ask for within the time that we will give you.** All the information you send must be in the format we prescribe and without expense to us.
- If you do not follow the steps above**, or you do not send us the information we ask for within the time we gave you, you will lose your right to claim.

3. Who we will pay

If we assess a claim or an investment fund transaction as valid, we will pay the benefits or *investment fund value* to you or the *nominated beneficiary*.

4. If you do not agree with our claims decision

If we do not accept a claim, cancel this policy or if the *claimant* disputes the amount of the claim, the *claimant* may request us to review our decision.

We will only review our decision if he sends us a written request to review within 90 days (the "representation period") of the date that he receives our rejection letter and covers all costs of the review.

Alternatively, the *claimant* may contact the Central Bank of Lesotho (CBL) on the contact details set out in the **Additional information document**. The Central Bank of Lesotho is the regulator of the insurance industry.

5. How we calculate interest

- The *benefit amounts* will not attract any interest for the first six months from the date that we accepted the claim.
- An unclaimed benefit as set out in **Section E – If we cannot make payment**, will attract interest after six months from the date that we accepted the claim. We will calculate interest on a monthly basis at a rate of:
 - The Central Bank of Lesotho money market interest rate that is applicable during the period that the benefit remains unclaimed;
 - less our administration fee.

6. If we cannot make payment

It is your responsibility to ensure that the contact details of the *policyholder*, the *main insured person* and the nominated *beneficiary* are correct.

If anything prevents us from making a payment within six months from the date that we accepted a claim, the benefit is an unclaimed benefit. We will keep the claim open until we have obtained the outstanding information that will enable us to pay the claim.

We will take the following steps to trace the *policyholder*, the *main insured person* or the nominated *beneficiary* (as applicable):

- We will attempt to contact the *policyholder*, the *main insured person* or the nominated *beneficiary* (as applicable) to tell them of the available benefit.
- If we cannot reach the *policyholder*, the *main insured person* or the nominated *beneficiary* (as applicable) we will compare our internal database with an external database or make use of an external tracing company.
- We will repeat the tracing process after three years from the date that we accepted the claim, and again after ten years from the date that we accepted the claim.
- If after ten years from the date that we accepted the claim we are still unable to trace the *policyholder*, the *main insured person* or the nominated *beneficiary* (as applicable), we will not repeat the tracing process.
- If we have to repeat the tracing process at any time, we will deduct administrative, tracing and management fees that we incur because of tracing, from the value of the claim. The administrative, tracing and management fees may change over time.
- We will not trace the *policyholder*, *main insured person* or the nominated *beneficiary* (as applicable) where the value of the claim is less than M 1,000.00, and where the cost of tracing is more than the benefit.



F. Ending this policy

1. Cancelling this policy

1.1 When we may cancel

We may cancel this policy by giving you one month's written notice.

a. Cancellation

- You may cancel this policy by giving us one month's written notice, if it is any date later than one month after the *policy start date* of receiving the policy summary.
- At the end of the notice period, this policy will automatically end. You may ask us to restart or reinstate the policy as set out in **Section A - Continuation of cover**.

1.2 Total premiums paid after cancellation

If you pay us any *total premium* after the date that this policy ends, we will refund the *total premiums* to you.

1.3 The policy ends when:

- you do not pay the *total premiums* due under this policy as set out in the Total premium and changes to the policy section;
- all benefits under this policy have been paid;
- the *policyholder* or the *main insured person* dies;
- the notice period for cancelling this policy (as set out above) comes to an end.



G. General Conditions

1. Good faith

We will always act in good faith in our mutual dealings. If we make an administration error, we will correct the error so that you do not lose any benefits you should have had or give you any benefits that you should not have had.

Our liability

Our liability in terms of this policy is conditional on you, or anyone acting on your behalf, keeping to all the terms and conditions of this policy.

- All claim payments are subject to the verification of the validity of any claim.
- Our payment of any benefit is a full and final discharge of our responsibilities under this policy. Once we have paid a valid claim, we will not be responsible for anything else.
- Our responsibility does not exceed the benefit for which you have paid *total premiums*.
- Payment of a benefit under this policy will not affect any other benefit under this policy, as long as we received *total premiums* for all benefits.

2. Your privacy

We respect the confidentiality of your personal information. However, it is essential for insurance companies to share claims and underwriting information with outside parties for the fair assessment and underwriting of risks, and to reduce the number of fraudulent claims.

We may communicate your personal information to other insurance companies, and to our service providers who assist us in managing your benefits and our relationship with you. We will always do this as permitted by the relevant privacy legislation.

3. We will send correspondence to you

We will send all correspondence to your last known address or email address or contact numbers. We assume that you received and read our correspondence if it was addressed to you.

4. Non-variation

If we agree to change any deadlines or requirements in terms of this policy, it will be valid if it is in writing and it does not mean that we have agreed generally or in all cases to change the deadlines or requirements.

5. Currency

Total premium and benefits payable under this policy must be paid in Maloti only.

6. Law

We will govern and interpret the policy in accordance with Lesotho law in the courts of Lesotho.



H. General Disclosure

Disclosures of your Personal Information

We care about the privacy, security and online safety of your personal information and we take responsibility to protect this information. Below is a summary of how we deal with your personal information. For a more detailed explanation, please read our official Privacy Notice on our website.

- **Processing your personal information:** We have to collect and process some of your personal information to provide you with our products and services as required by insurance, tax and other legislation.
- **Sharing your personal information:** We will share your personal information with other insurers, industry bodies, credit agencies and service providers. This includes information about your insurance, savings, claims and *total premium* payments. We do this to assess claims or investment fund transactions, prevent fraud and to conduct surveys. We may also share your personal information to trace you or your beneficiaries for any unclaimed benefits. You can check if unclaimed benefits are due to you by contacting us by telephone at +266 2231 4144, e-mailing us at investments@lnighollard.co.ls, or visiting your nearest LNIG Hollard Life branch.
- **Accessing your medical information:** We may also ask you to send us any medical information we need to accurately assess your claims if applicable.
- **Protecting your personal information:** We take every reasonable precaution to protect your personal information from theft, unauthorized access, and disruption of services.
- **Receiving marketing from us:** Please contact our client services contact center if you want to change your marketing preferences. Remember that even if you choose not to receive marketing from us, we will still send you important communication about this product.
- You,
 - acknowledge that the sharing of claims, investment fund transactions and underwriting information (including credit information) by insurers is essential to enable the insurance industry to underwrite policies and assess risks fairly and to reduce the incidence of fraudulent claims;
 - in the public interest and with a view to limiting *total premiums*, consent to such information being disclosed to any other insurance company or its agent; and
 - also consent to the disclosure of any information relevant to any insurance claims or investment fund transactions concerning you or any insured person you represent.

Anti-Money Laundering

- We are required by anti-money laundering legislation to obtain specific information from you and certain related parties, to enable us to establish and verify your and related parties' identity.
- Related parties include, but is not limited to, the owner of the policy, *total premium* payer, a claimant, a beneficiary, the employer in a group scheme, the main member, and beneficiaries in a group scheme.
- You understand that different information will be required depending on the type of client and related party and we may require supporting documentation.
- This requirement applies when we receive the application for insurance and/or savings benefits, on an ongoing basis while the policy is in force and when a claim or investment fund transaction is made under the policy.
- You and related parties agree to co-operate fully with us and to provide us with all such information and documentation requested as soon as possible or within a timeframe that will be communicated to you.
- You understand that if we do not receive the information and documentation requested from you or from a related party within a reasonable time, we may be unable to provide you with insurance and/or savings benefits or pay a claim or investment fund transaction, and in terms of the anti-money laundering legislation we will be required to cancel your policy, and any other existing policies thereafter.

- You consent to the processing of your personal information and to the disclosure of your personal information to any regulatory body, tax authority, or to comply with anti-money laundering legislation.
- You consent to us conducting ongoing monitoring of your transactions and activities related to your business relationship with us, as required by anti-money laundering legislation, and understand that we are not required to disclose our monitoring activities to you.
- If we are unable, for whatever reason, to conduct ongoing monitoring of your transactions and activities we may be unable to provide you with insurance and/or savings benefits and we may have to cancel your existing policies.
- We will therefore be unable to process a claim before the claimant has provided us with the required information and documents for us to establish and verify their identity.



I. Glossary of defined terms

We have given a specific meaning to certain words. These words appear in *italics*. This glossary gives the set of definitions that have been used in this document and that have the same meaning anywhere in this policy. This glossary does not include definitions that only apply to a specific benefit section. Those definitions will appear at the end of each benefit section.

Beneficiary	A person or entity that you chose to receive an <i>insured person's</i> benefits on the death of the <i>insured person</i> . This is known as nominating a beneficiary.
<i>Benefit premium</i> or <i>Benefit contribution</i>	The monthly cost of the selected benefits on this policy for each <i>insured person</i> , as set out in the policy schedule.
Benefit start date	The <i>benefit start date</i> for each <i>insured person</i> or benefit may be different. This is the date when an <i>insured person's</i> insurance for a specific benefit begins under this policy, as set out in the policy schedule.
Claimant	The person who has told us about a claim and whose claim was accepted by us.
Insured event	Is something that happens to an <i>insured person</i> under this policy that results in us paying out a claim. The <i>insured event</i> is set out in each benefit section.
Main insured person	Refers to the person named in the policy schedule who we accepted as the <i>main insured person</i> .
Material information	Information that affects our decision to provide benefits to an <i>insured person</i> on the terms and conditions in this policy.
Period of insurance	Means the period between the <i>policy start date</i> or the <i>benefit start date</i> and the date when the policy ends, subject to the receipt of your monthly <i>total premium</i> .
Policyholder	Refers to you, the owner of the policy named in the policy schedule.
Policy review date	The month on which we will review your policy every year, as set out in the policy schedule. This is the date on which we: - will automatically increase the <i>benefit premium</i> or <i>benefit contribution</i> (if applicable); - may make changes to the policy conditions.
Policy start date	The date benefits for the <i>main insured person</i> begins under this policy. The date is set out in the policy schedule. The <i>policy start date</i> will be the later of: - the first of the month during which we received the first <i>total premium</i> ; and - the date that we agree to restart this policy.
Pre-existing condition	A medical condition, illness, bodily injury or disability that: - existed at any time before the <i>insured person's benefit start date</i> ; and - the <i>insured person</i> knew about, or reasonably knew about it or experienced symptoms on.
Premium collection date	The date in each month as set out in the policy schedule, on which you agreed for us to collect the <i>total premium</i> as: - a debit to your bank account; or - a deduction from your salary.
Total premium	The <i>total premium</i> is set out in the policy schedule and is the total of: - the monthly <i>benefit premiums</i> ; and - the monthly <i>benefit contributions</i> .
Spouse	Spouse means a person related to the principal member/policyholder through a legally recognised union under the laws of Lesotho which may either be customary or civil.
Waiting period	This is the period during which we will not pay any claims if an <i>insured person</i> died because of suicide, attempted suicide, self-inflicted injury, natural causes, or <i>pre-existing conditions</i> . The <i>waiting period</i> begins from the <i>benefit start date</i> .

GOAL BASED SAVINGS PRODUCT BENEFIT SECTION

Index

A.	Goal Based Savings benefit	16
1.	What is the goal based savings benefit	16
2.	Who is eligible for the savings benefit	16
3.	How does it work	16
4.	When the savings benefit ends	17
B.	Premiums and changes	17
1.	The monthly premiums	17
2.	When the benefit conditions will change	18
C.	Claiming under this benefit	18
1.	Who we will pay the benefit to	18
2.	When we will pay the benefit	18
D.	Glossary of defined terms used on this benefit	19



A. Goal Based Savings benefit

1. What is the goal based savings benefit

This policy allows the *main insured person* to save a specific amount of money monthly, subject to the *minimum investment amount*, for the *investment period* towards a specific *maturity value* as chosen by the *main insured person* when the policy is bought and as stated in the policy schedule.

We guarantee that the *maturity value* of this policy will be the amount selected when the policy is sold/started if all conditions of payment and withdrawals are met.

The goal-based savings policy must be taken as a stand-alone policy. This means that you do not need any other LNIG Hollard Life product to take out this policy.

2. Who is eligible for the savings benefit

- a. The *main insured person* is eligible for the goal-based savings policy.
- b. The *main insured person* must be 18 years or older, but under the age of 76 years at the *benefit start date*.
- c. The *main insured person* may have more than one goal-based savings policy subject to policy limitations, if applicable.

3. How does it work

Your monthly *benefit contributions* are invested every month by us, after we have deducted the following:

- the *benefit contribution allocation charge*; and
- *monthly benefit fee*.

Your investment fund value is charged an *investment administration fee* every month.

This policy allows you to save on a monthly basis while securing the *maturity value* within the investment period. This means that the *maturity value* is guaranteed, subject to the terms and conditions in this document.

If selected, when the *main insured person* dies, we will continue to honour the original terms of the contract and pay out the goal amount at maturity, without the beneficiaries having to pay the *benefit contributions* for the remaining term.

3.1 Investment periods

The benefit will start when the first *total premium* has been received.

The benefit has a minimum investment period of 5 years and cannot exceed 20 years.

3.2 Investment Preservation Period

We require that your investment period is at least a minimum of 5 years in order for us to be able to offer the *maturity value* guarantee and to allow meaningful accumulation of your *benefit contributions*.

3.3 Early Access

For us to provide the guaranteed *maturity value* of this policy we do not grant you early access to your investment fund value.

3.4 Withdrawal

- a. If you want access to your investment fund value, you must take the full investment fund value.
- b. You will need to submit written instruction to us. This will be actioned as follows:
 - The requested amount will be paid into your bank account within 10 working days of receiving the completed application, supporting documentation and successful approval of the request.
- c. The investment fund value will be subject to the surrender penalty table listed below:

Duration In-Force	Portion of Unit Account to Be Paid
<1 Year	75%
1 – 2 Years	80%
2 – 3 Years	85%
3 – 4 Years	90%
4 – 5 Years	95%
5+ Years	100%

d. If you wish to make a full withdrawal of the investment fund value, the surrender penalty table will be applicable as well as the *withdrawal fee*.

3.5 Benefit contribution waiver

- You can only select this option at the start of the policy, as indicated on your policy schedule.
- You may only select this benefit if you are not older than 60 years at the *benefit start date*.
- If selected, in the event of your death, we will waive the future *benefit contributions* you would have made during the investment period to ensure that the *maturity value* is still achieved at the *maturity date*.
- We will pay the *maturity value* to your nominated *beneficiary* at the maturity date.
- A waiting period of six (6) months apply to this benefit in the event of your death as a result of natural causes.

4. When the savings benefit ends

This includes all the events when the savings benefit ends on this policy. Certain benefits might have additional events when cover ends as set out in the benefit section above.

4.1 When the savings plan ends

Cover for the *main insured person* ends when any of the following happens:

- death of the *main insured person*, without the contribution waiver being selected;
- a full withdrawal of investment funds at any point in time;
- the benefit maturing – reaching the policy term as indicated on your policy schedule;
- you stop paying your *total premiums* and you choose not to reinstate nor restart your policy.

Upon the ending of the savings benefit, the remaining investment fund value will be paid out to the *main insured person* or the *beneficiary*.



B. Premiums and changes

1. The monthly premiums

1.1 What you must pay

You must pay the *total premium* as set out in the policy schedule.
You cannot change the *benefit contribution* to this policy.

1.2 You can make ad-hoc benefit contributions.

You can make additional *benefit contributions* on an ad-hoc basis. These need to be at least the *minimum ad-hoc benefit contribution* on the policy.

There will be no guarantee on ad-hoc contributions.

The *ad-hoc monthly benefit* fee will be levied against your *ad-hoc benefit contributions* and the *investment administration* fee will be levied against your investment fund value.

You may access your ad-hoc investment fund value and withdraw from them subject to the rules stated in Section 3.4 above.

2. When the benefit conditions will change

We will tell you at least one month before the effective date of any changes we make as set out below. We will send you an updated policy schedule, an endorsement to the policy wording or an explanation of the changes.

Unless you tell us that you do not want to continue with this policy, we will automatically renew your policy on the terms set out in the updated policy schedule and policy wording.

2.1 You may make changes to the policy

If you ask us to make any changes to the policy it can only be done on the policy anniversary and will be effective from the date agreed to by us, subject to the terms and conditions as set out in this document.



C. Claiming under this benefit

You must read this section together with the **Claiming under this policy** section of the **General terms and conditions**.

1. Who we will pay the benefit to

If we assess a claim or payment as valid, we will pay the investment fund value in the following instances:

- On your death with the contribution waiver option selected, to your *beneficiary* at the *maturity date*;
- On your death without the contribution waiver option selected, to your *beneficiary*; or
- On the withdrawal or any other investment fund transactions, including the *maturity value* at the maturity date, to you.

If there is no nominated *beneficiary*, we will pay the benefit as set out in the **If there is no beneficiary** section of the **General terms and conditions**.

2. When we will pay the benefit

We will pay the investment fund value, subject to the terms and conditions of this policy, as soon as we have assessed a claim or payment as valid.



D. Glossary of defined terms used on this benefit

These definitions only apply to the Goal-based Savings benefit section. We have given a specific meaning to certain words. This glossary does not include definitions for common words used throughout the policy. You must read this section together with the **Glossary of defined terms** section of the **General terms and conditions**.

Investment period	The period of time (term) chosen by the <i>main insured person</i> at the <i>benefit start date</i> for which all <i>benefit contributions</i> must be received without interruption before the <i>maturity value</i> can be paid.
Maturity value	The value of money you will receive at the end of the <i>investment period</i> if you have paid all <i>your benefit contributions</i> as stated in this benefit schedule. This value will be less the amount as indicated on <i>your policy schedule</i> .
Maturity date	The date at which the <i>maturity value</i> of the policy is payable which is after the end of the investment period, as selected and indicated on <i>your policy schedule</i> .

We have mentioned specific charges and minimum values in this benefit schedule. This table gives the amount or value for these specific factors.

Allocation charge	5.00% of the <i>benefit contribution</i>	The cost we charge to manage and administer your policy, monthly from every <i>benefit contribution</i> we receive.
Minimum benefit contribution	M 470.00 per month.	The minimum amount that you need to contribute monthly in order to take out this policy.
Minimum ad-hoc benefit contribution	M 700.00	The minimum amount that you need to contribute when making an ad-hoc contribution. This is in addition to your regular monthly contribution.
Monthly benefit fee	0.50% of the <i>benefit contribution</i> per month	The cost we charge for providing the guarantee on the product and investment charges.
Ad-hoc monthly benefit fee	0.25% of the ad-hoc <i>benefit contribution</i> per month	The cost for investment charges.
Withdrawal fee	M 250.00	The fee to pay if you wish to completely withdraw from your policy and your investment fund value will be paid out to you. Your policy will then terminate.
Investment administration fee	1.00% of the investment fund value per month excluding VAT	The monthly fee that will be charged based on your investment fund value and will be taken deducted from your investment fund value.

GOAL BASED SAVINGS PRODUCT PRODUCT SPECIFICATION

Index

A. General Product Description	21
B. GBSP Outline	22
C. Contributions	23
D. Portfolios	24
E. Benefits, Investment Term, Early Access, Surrender Value, Withdrawals, Reinstatement and Termination	24
F. LNIG Hollard Life Goal Based Calculator	26



A. General Product Description

The Investment Series consists of the following standalone savings products:

- Goal-Based Savings Product (GBSP), and
- Discretionary Savings Product (DSP)

This document will focus on the "**Goal-Based Savings Product**" (GBSP).

The GBSP:

- Allows clients to save money each month in a savings policy that has been uniquely structured and customized to meet their own individual savings needs. This means that:
 - Clients will need to define a goal savings amount that they would want to achieve at a defined point in time in the future or multiple points in time in the future.
 - A monthly contribution will be defined upfront. This is the amount that the client will need to contribute on a monthly basis in order to reach their defined goal savings amount within the specified time period.
- The goal can either be a single goal amount in a certain number of years' time or a savings plan of multiple goals and multiple maturity dates.
- This benefit will be offered to clients as a standalone product.
- The product allows clients to withdraw from their investment value (value of their savings policy) subject to the withdrawal rules highlighted below.

The value of the total specified goal amount:

- Will be guaranteed at the policy maturity date or dates.
- The maturity date or dates are defined by the client.

The policyholder can access their funds:

- Upon maturity and the benefit will be paid out to the policyholder.
- Prior to goal maturity whereby the policy will lapse.
- There is no paid-up option available on this product.

In the event of the death of the main life:

- If the main life selected the mortality waiver option, the total goal amount will be paid out at the defined goal maturity date/s as defined by the policyholder.
- If the main life did not select the mortality waiver option, then the total savings amount accumulated will be paid to:
 - The nominated beneficiaries, or
 - The deceased's estate.



B. GBSP Outline

Product Description

- Allows clients to save money each month in a savings policy that has been uniquely structured and customized to meet their own individual savings needs. This means that:
 - Clients will need to define a goal savings amount that they would want to achieve at a defined point in time in the future or multiple points in time in the future.
 - A monthly contribution will be calculated upfront. This is the amount that the client will need to contribute on a monthly basis in order to reach their defined goal savings amount.
 - Once the goal savings amount has been reached at the defined point in time, the goal amount will be paid out to the client and policy will terminate within the specified time period.
- This benefit will be offered to clients as a standalone product.
- The product allows clients to withdraw from their investment value subject to the withdrawal rules highlighted below.

Eligibility

- This product is available to all Lesotho citizens; or
- Individuals who have been given permission from the necessary authorities to live and work in Lesotho; or
- Individuals who ordinarily reside in Lesotho.

Entry Ages

- The entry ages (age last birthday) are as follows:
 - Minimum entry age: 18 years
 - Maximum entry age: 75 years
 - For those selecting the mortality waiver option, the maximum entry age is 60 years.

Ownership

- This is a savings policy and thus the policyholder is the owner of the policy.
- The policyholder is also the main life insured.

Policy Term

- The policy will start when the first contribution has been paid.
- The policy has a minimum term of 5 years. This is known as the "Investment Preservation Period".
- The policy term range is spanned in multiples of 1 year.
- The policy has a maximum term of the goal defined by the client; subject to not being greater than 20 years.

Investment Preservation Period

- A key parameter is the Investment Preservation Period.
- We require a minimum of 5 years in order to be able to offer the investment guarantee and to allow meaningful accumulation of contributions
- It is critical that the funds can accumulate for a sufficient period of time for the real benefits of saving to emerge, keeping it inline towards promoting a savings culture as intended.

Termination

- The policy will be terminated in the case of the following events:
 - Maturity of the goal term i.e. the savings goal has been reached.
 - Early access of the full investment value.
 - A full withdrawal of funds after the investment preservation period of 5 years.
 - The client chooses not to reinstate their policy.
- Upon termination, the balance of the investment value or goal savings amount will be paid out to the beneficiaries or the policyholder, respectively.

Cessions

- This policy may not be ceded.



C. Contributions

Regular Contributions

- The contribution payment frequency will be monthly.
- This means that the contributions will be collected on a monthly basis.
- The primary method of collection will be via salary deduction, debit order or cash.
- The monthly contribution will be calculated based on the following:
 - The goal savings amount,
 - The defined period or term whereby the savings goal needs to be reached.
 - For example:
 - If a client wishes to have a savings of M60 000 in 8 years' time, then the monthly contribution amount will be calculated so as to ensure that the client will achieve a total savings amount of M60 000 by the end of 8 years.
 - The minimum contribution calculated cannot be less than M470.00. This means that the minimum contribution must be at least M470.00.

Ad-hoc Contributions

- Ad-hoc contributions/deposits may be made to this policy and the following rules will apply:
 - Minimum contributions will be set at M700.00 per contribution.
 - There will be no guarantee on the ad-hoc contributions. This means that the capital amount invested as a result of ad-hoc contributions will not be guaranteed to the client at maturity.
 - There will be no allocation charge or commission levied on these contributions, but they will be subject to a monthly benefit fee and an investment value administration fee.
 - There is no guarantee of capital of any ad-hoc contributions.
 - Ad-hoc contributions will be managed and tracked as a separate policy on this system but will be presented to the client as a single policy with two separate investment balance.

Contribution Increases

- There will be no contribution increases.
- At application stage, the contribution will be defined upfront and will remain fixed for the entire term of the policy.



D. Portfolios

Underlying Portfolios

- The underlying portfolio will be selected and managed by LNIG Hollard Life and their Investment Committee.
- The client will not be able to choose the assets in which their funds will be invested.
- Information about the underlying assets will not be made available to the client as part of the standard communications strategy.



E. Benefits, Investment Term, Early Access, Surrender Value, Withdrawals, Reinstatement and Termination

Benefits

- This product is a savings vehicle that will guarantee the goal savings amount at the defined policy maturity terms.
- Any additional investment returns earned on the capital invested will not be passed on to the client.
- At the policy maturities, the goal savings amount will be paid out to the client as a cash lump sum, tax-free.

Investment Term

- The investment term is based on the defined term at which the savings goal will be realized.
- There is, however, a minimum investment term of 5 years.
- The maximum investment term (i.e. goal savings period) is 20 years.

Early Access

- This is a savings product, and so should allow clients to access their money saved.
- Clients can access their funds within the investment preservation period of 5 years; however:
 - There will be a penalty charge of M250 is applicable.
 - The investment value based on the surrender value table below less the penalty charge will be paid out to the client and the policy will lapse.

Surrender Value

- The product follows the below surrender value structure:

Duration In-Force	Portion of Unit Account to Be Paid
<1 Year	75%
1 – 2 Years	80%
2 – 3 Years	85%
3 – 4 Years	90%
4 – 5 Years	95%
5+ Years	100%

- The surrender value was set to recoup initial expenses in the event of early withdrawal.
- The surrender charge is set at M250 throughout the policy term.

Withdrawal

- After the 5-year investment preservation period, clients will be able to access their funds prior to the goal being reached. This is not ideal but will be permitted.
- The amount paid to the client will be the investment value less a termination charge and the policy will lapse. The amount paid will be cash lump sum.
- The termination of the policy is to preserve the purpose of the product.

Reinstatement and Lapse Options

- If a contribution is unpaid, there will be two options available to the client:
 - Reinstatement of the policy; or
 - Lapsing the policy.
- The client will be notified of the unpaid contribution and the two options will be presented to them.
- Reinstatement Option
 - The client will be given the option to reinstate their benefit by having the missed contributions collected at the next contribution collection date along with the contribution due at that date. The following conditions must be met:
 - The request to reinstate must be sent to LNIG Hollard Life within two months from the last day of the month for which the total premium has been received.
 - The total premium must have been received for at least six months in a row immediately before the policy ended, before there is a request to reinstate or restart the policy.
 - If the client chooses not to have this option or if the contribution collection is unsuccessful, the policy will lapse.
 - If the client has missed two consecutive contributions, then the policy will lapse.
- Lapse Option
 - If the client does not wish to reinstate their policy, the policy will lapse, and the investment value will be paid out to the client as follows:
 - If the policy lapses within the initial 5-year investment preservation period, the pay-out will be: "Surrender Value" – "Early Termination Fee"
 - If the policy lapses after the initial 5-year investment preservation period, the pay-out will be: "Guaranteed Investment Value to Date" – "Termination Charge"

Termination

- The policy will be terminated in the case of the following events:
 - Maturity of the goal term i.e. the savings goal has been reached.
 - A full withdrawal of funds after the minimum investment term of 5 years.
 - The client chooses not to reinstate their policy.
- Upon termination, the remaining investment value or goal savings amount will be paid out to the beneficiaries or the policyholder, respectively.

Beneficiaries

- The policyholder can nominate up to 5 beneficiaries per policy. This is in the event of the death of the policyholder.

Contribution Waiver

- The policyholder can select a contribution waiver option at sale stage. This cannot be selected once the policy is active and in force.
- This waiver protects the goal amount and ensures that the goal amount will be paid out at the defined point in time if the main member passes away before the maturity of the goal. All future contributions that are due will be waived, however there is a 6-month waiting period during which no mortality benefit is payable, except for accidental causes of death.
- This allows the policy to continue and the goal savings amount to be paid out to the beneficiaries at the original maturity date in the event of the policyholder's death before the goal is reached. Future contributions will not be required from the date of the death of the policyholder.
- This will be factored into the calculation of the contribution amount.



F. LNIG Hollard Life Goal Based Calculator

The Goal Based calculator is used to determine the regular monthly contribution required to save in order to reach the goal amount. The calculator can also determine the required goal amount in a specified number of years' time (minimum 5 years) if the client doesn't have a set goal in mind and needs some guidance.

The Goal Based calculator uses the same assumptions as the LNIG Hollard Life Pricing model to project the unit account. The contribution is grossed up by the bid-offer spread and the investment guarantee charge the mortality waiver cost (if selected), and the relevant allocation rate plus the policy fee.

This adjustment to the level contribution ensures that the net of charges amount will be sufficient to invest and reach the goal amount.

Select a single goal

- The policyholder inputs the present value of the goal into the calculator.
- This amount is projected with expected inflation until the maturity date and a target amount is set.
- The calculator then solves the necessary level (or escalating, if desired) monthly contribution needed to be saved for the goal amount to be reached.
- The final choice for the policyholder is whether they would like to be covered in the event of death and to select the contribution waiver for the goal amount to be reached with certainty.

Select multiple goals with one/more maturity dates

- The multiple goal calculator allows the policyholder to select more than one goal in the future and can specify if the policyholder would like the payment as a lump sum or broken into annual payments.
 - The calculator is suited to calculate an education plan for children that are attending school and/or university in the future (future development). The calculator assists in setting the goal amounts and solves the necessary level (or escalating, if desired) monthly contribution.
 - The policyholder can choose whether they would like to be covered in the event of death and to select the contribution waiver.
 - Finally, the benefit and contribution summary tab provide a dashboard view of the education plan.

Regulatory Requirements

The following KYC documents must be submitted to validate the identity and sources of funds of the policyholder:

- Proof of income
- Proof of identity
- Proof of residential address

The Investment Series

ADDITIONAL INFORMATION

Index

Introduction	29
About LNIG Hollard Life	29
How to claim for the benefits	29
How to resolve complaints	29
Combat insurance fraud	30
About your policy	30
Matters of importance	31

Introduction

This document contains contact details, disclosures, and other important information to ensure you always have all the information you need. Please keep this document together with your general terms and conditions, benefit sections and policy schedule. This document does not form part of your policy.

This policy could have been sold to you in two ways:

1. By LNIG Hollard Life sales representative. This means LNIG Hollard Life is the insurer.
2. By LNIG Hollard Life branch.

About LNIG Hollard Life

The insurer is Lesotho National Life Assurance Company Limited (Registration Number I95/267), trading as LNIG Hollard Life. LNIG Hollard Life is a registered insurer. LNIG Hollard Life receives your premium and is responsible for claims.

If LNIG Hollard Life sold you this policy through our internal call center or directly via the internet, we have a 100% financial interest in this transaction.

LNIG Hollard Life receives your premium and is responsible for claims. You can contact us on the below details:

Postal address

LNIG Hollard Life
Private Bag A203
MASERU
100
Lesotho

Physical address

LNIG Hollard Life
LNIG Hollard Head Office
202 Constitution Road
MASERU
Lesotho

Contact Us:

Tel: +266 22314144
Email: investments@lnighollard.co.ls

How to claim for the benefits

Please contact us on the contact details given above if you want to make a claim.

- a. The claimant must tell us of the claim in writing or by contacting us within 180 days** from the date of the insured event. We will tell the claimant what evidence and other documents we need to process the claim.
- b. The claimant must send us the evidence and other documents we ask for within the time that we will give them.** All the information that the claimant sends must be in the format we prescribe and without expense to us.
- c. If the claimant does not follow the steps above or** does not send us the information we ask for within the time we have given, the claimant will lose his right to claim.

How to resolve complaints

We hope that you never have reason to complain, but if you do we will do our best to work with you to resolve it through the following process. Please contact us on the details given above.

General complaints

- a. Speak to one of our customer care specialists.
- b. If required, ask to speak to a claims or administration manager to further discuss your concerns.
- c. If, after speaking to a manager, your complaint is not yet resolved, you can take the matter further by writing to our internal dispute resolution mechanism. Your concerns will be investigated by a person with full authority to deal with the complaint and we will inform you of the outcome within 15 working days of receiving your letter.

Rejected claims

If we do not accept a claim made in terms of this policy, cancel this policy or if the *claimant* disputes the amount of the claim, the *claimant* may request us to review our decision. We will only review our decision if the *claimant* sends us a written request to review within 90 days (the "representation period") of the date that the *claimant* receives our rejection letter, and covers all costs of the review

Complaining to the Central Bank of Lesotho

In the unlikely event that the *claimant's* concerns are not resolved to his satisfaction by our internal dispute resolution mechanism, the *claimant* may contact the Central Bank of Lesotho. The Central Bank of Lesotho is the regulator of the insurance industry and makes independent and fair decisions.

The Central Bank of Lesotho

P. O. Box 1184
MASERU
100
Lesotho
Tel: +266 222 326 01

Complaints about how this policy was sold

If you are not happy about this policy, the manner in which it was sold or the advice received, please write to The Head of Sales and Distribution on the LNIG Hollard Life contact details provided above.

Alternatively, you may also contact the Central Bank of Lesotho on the details given above.

Combat insurance fraud

Fraud impacts the insurance industry as a whole. It increases claims costs, which in turn increases premiums. It is also a criminal offence and punishable by law. We are committed to preventing fraud. If you suspect any fraudulent activity, you can contact us on the details given above.

About your policy

Please refer to the main policy wording, benefit sections and policy schedule for the following information:

- the complete nature and extent of benefits;
- your premium payment responsibilities, manner and frequency thereof, and the consequences of non-payment of premium;
- special conditions, exclusions; and how to cancel your policy.

Matters of importance

- All material facts must be accurately, fully, and properly disclosed by you. All information provided by you or on your behalf is your own responsibility.
- Misrepresentation, incorrect information, or non-disclosure by you of any material facts or circumstances may impact negatively on any claims arising from your insurance contract.
- The application form, general terms and conditions, benefit sections and the policy schedule, must be read as one document.
- You are entitled to a copy of the document that represents our contract with you, or a policy summary, within 30 days from the date of entering into or varying the policy. You are also entitled to a full copy of the policy upon request.
- If you have not received these documents, or you feel that the policy does not meet legal requirements, please submit your complaint in writing to us on the details given above.
- You must be informed of any material changes to the information provided above.
- If the information above was given to you verbally, it must be confirmed in writing within 30 days.
- Do not sign any incomplete or blank documents. No person may request or insist that you do so.
- Complete all forms in ink, keep all documents handed to you and make notes of what is said to you.

Contact Us:

Tel: +266 22313031

Email: investments@lnighollard.co.ls

Postal address:

LNIG Hollard Life
Private Bag A203
Maseru 100
Lesotho

 www.lnighollard.co.ls

 LNIG Hollard

 [@lnighollard.co.ls](https://www.instagram.com/lnighollard.co.ls)

