



## **PRODUCT OPTION AMENDMENT FORM - CORPORATE**

PRINCIPAL INSURED DETAILS	
Policy Number:	When should upgrade start date be:
Name and Surname:	
ID number / Passport.:	Mr Mrs Miss Dr Other
Date of birth:	Email Address:
Contact details: Home no.:	Work no.:
Fax no.:	Cell no.:
Postal address:	
	Code:
Residential address:	
	Code:
OPTION SELECTION	
PRIMARY STANDARD MAIN MEMBER SPOUSE	CHILD Premium per month R
PRIMARY STANDARD + ACCIDENT & EMERGENCY MAIN MEMBER SPOUSE	CHILD TOTAL PREMIUM PAYABLE R
PRIMARY CARE + HOSPITALISATION MAIN MEMBER SPOUSE	CHILD
DECLARATION BY APPLICANT	
I, the undersigned, hereby declare:	
<ol> <li>That to the best of my knowledge and belief the information provided in connection with this application whether in my own handwriting or not, is true and I have not withheld any material facts which are known to me. (A material fact is likely to influence the assessment of this application by Sanlam Primary Health Insurance. If you are in any doubt as to whether a fact is material or not, you should disclose it.)</li> <li>That I understand that any relevant material fact omitted in this proposal form may lead to Sanlam Primary Health Insurance. If you are in any doubt as to whether a fact is material or not, you should disclose it.)</li> <li>That I understand that any relevant material fact omitted in this proposal form may lead to Sanlam Primary Health Insurance not meeting claims, should the omitted fact have been of such importance that the risk may not have been accepted in the first instance, in terms of the policy. This may lead to the cancellation of this policy or rejection of claims without refund of premiums.</li> <li>That I understand that this is an Accident and Health policy with stated benefits in terms of the Short-term Insurance Act 53 of 1998 and not a Medical Scheme product.</li> <li>The sharing of claims information and underwriting information by Insurers is essential to enable the insurance industry to underwrite policies, assess risks fairly, reduce the incidence of fraudulent claims and protect the public interest in terms of limiting excessive premium increases.</li> <li>Is psecifically consent to Sanlam Primary Health Insurance and EssentialMED (Pty) Ltd contacting my current medical practitioner to verify any medical details as provided in my application form.</li> <li>If utther consent to such information being disclosed to Sanlam Primary Health Insurance and EssentialMED (Pty) Ltd for purpose of verifying the disclose as provided on my application form.</li> <li>That I will advise Sanlam Primary Health Insurance and EssentialMED (Pty) Ltd of</li></ol>	
Signature of policy holder	Date:
Spouse (If married in	
community of property)	Date:
Declaration and informed Consent in terms of the Protection of Personal Information Act 4, of 2013 (POPIA)	
We at GENRIC Insurance Company Limited (GENRIC) respect your right to privacy. We need to collect and process some of your personal information in terms of various Privacy and Data Management laws and are bound by the terms and provisions of the Protection of Personal Information Act, regarding the acquisition, usage, retention, transmission and deletion of your personal information. Your personal information from the collected is for the primary purpose of providing you with insurance cover and for all other activities and processes incidental to and relevant to this purpose. As this information forms the basis of our assessment	

We at GENRIC Insurance Company Limited (GENRIC) respect your right to privacy. We need to collect and process some of your personal information in terms of various Privacy and Data Management laws and are bound by the terms and provisions of the Protection of Personal Information. Act, regarding the acquisition, usage, retention, transmission and deletion of your personal information Act collected is for the primary purpose of providing you with insurance cover and for all other activities and processes incidental to and relevant to this purpose. As this information forms the basis of our assessment and terms, we offer you, it must be correct, complete, and up to date. We will always comply with all relevant regulations in dealing with your information and keep it secure and confidential at all times. Your information shall be kept confidential; however, we shall disclose it to certain third parties as required and other insurers for the specific purpose of insurance and to reduce and prevent any form of fraudulent activity. Should you decide to cancel this insurance contract you further consent to GENRIC, in retaining the information in line with the legally permitted retention period, for statistical and reporting purposes only. Should you decide not to accept the proposal, the information is required and only used for statistical and research purposes. I hereby voluntary consent to GENRIC processing my Personal Information. I understand the purposes for which my Personal Information is required and for which it will be used. I give GENRIC permission to process my Personal Information as provided above.

Our Privacy Notice and POPIA Policy provides the details of how we deal with the personal information of our clients, and it is available on our website at the following address: https://www.genric.co.za.

Sanlam Primary Care is administered and Underwritten by GENRIC Insurance Company Limited (GENRIC), an Authorised Financial Services Provider (FSP 43638) and Licensed non-life Insurer. Sanlam Primary Care is not a Medical Scheme. The cover is not the as that of a medical scheme and is not a substitute for a medical scheme membership.

Financial Planning

Investments

Insurance

Retirement

Wealth

Sanlam Health Solutions

2 Strand Road, Bellville, South Africa PO Box 1, Sanlamhof 7532, South Africa

Sanlam Health Solutions Reg no 1959/001562/06 Licensed Financial Services and Registered Credit Provider (NCRCP43) Refer to the Sanlam website for directors and company secretary details. T 0861 007 702

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www.sanlam.co.za