

**MASTER POLICY**

**PRIME ASSET HOSPITAL PLAN**

**WHEREAS**

The Insured named in the Schedule has applied to the Insurers for the insurance as hereinafter set out, the Insurers hereby agree, subject:

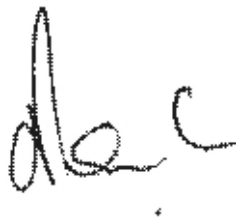
1. to any proposal or other information supplied by or on behalf of the Insured:
  - 1.1 disclosing all facts and circumstances known to the Insured that are material to the assessment of the risks insured hereby, and
  - 1.2 forming the basis of this Insurance, and
2. to the condition of prior payment of the Premium by or on behalf of the Insured and the receipt thereof by or on behalf of the Insurers, notwithstanding anything to the contrary set out in this Policy or any section thereof

to grant such indemnity subject to the terms, conditions, provisos and exclusions set out in the policy or as contained in any endorsement that may be issued in regard thereto.

This Insurance contract is conditional upon and will only come into effect following payment of the premium by the Insured and the receipt thereof by or on behalf of the Insurer.

***Signed at Johannesburg this 01 day of July 2010***

For and on behalf of the Insurers:-



.....  
Underwriter

**RTU SA (PTY) LTD  
CO REG NO 2004/025569/07  
UNDERWRITING MANAGERS  
FOR  
RENASA INSURANCE COMPANY LIMITED  
CO REG NO 1998/000916/06**

## General Schedule

### 1. CIRCUMSTANCES:

### COMPENSATION

#### 1.1 IN-HOSPITAL CONFINEMENT

Daily Benefit arising out of accident or illness.

An amount as per schedule A for each day spent in Hospital; subject to time deductible of 4 days in respect of illness.

The maximum period for which In-Hospital Daily Benefits will be paid for any one Insured Person arising out of any one occurrence is 26 weeks.

### SCHEDULE A

#### INSURED

#### HOSPITAL PLAN

In-Hospital Confinement (Accident or Illness)      R1000.00 per day

### A.1 OPERATIVE CLAUSE

A.1.1 If during the period of Insurance an Insured Person for reasons directly arising out of Bodily Injury or Illness shall be confined to a Hospital the Insurers will pay to the Insured Person the In-Hospital Daily Benefit stated in Schedule A.

### A.2 DEFINITIONS

#### A.2.1 Bodily Injury

bodily injury caused by accidental, violent, visible and external means and shall include bodily injury attributable to or caused by starvation, thirst and exposure to the elements as a result of an accidental occurrence, or drowning or gassing.

#### A.2.2 Day

a 24 hour period encompassing midnight

#### A.2.3 Hospital means

an establishment which meets all the following

requirements:

- (a) Holds a license as a hospital or nursing home (if licensing is required in the province or government jurisdiction);
- (b) Operates primarily for the reception, care and treatment of sick, ailing or injured persons as inpatients;
- (c) Provides organised facilities for diagnosis and surgical treatment.

A.2.4 Illness means

any physical illness not arising out of or caused by condition or defect pre-existing for up to 2 years before inception of this Policy (whether known to the Insured Person or not) and excludes:

- (a) Defects of vision;
- (b) Pregnancy but not the complications of pregnancy.

A.2.5 Physician means

a person currently legally licensed to practice medicine and surgery other than the Insured Person or a member of the Insured Person's immediate family.

**A.3**

**PROVISOS**

A.3.1 Where amounts recoverable from the Insurers are delayed pending finalization of any claim, payment on account will be made to the Insured Person at the Insured Person's option, on receipt by the Insurers of certification by a Physician appointed by the Insurers

A.3.2 The Insurers liability in respect of In-Hospital Confinement, is limited to a total of the amount stated in the Schedule and is in respect of any one Insured Person, irrespective of the number of Policies issued by the Insurers.

**B.**

**EXCLUSIONS**

The Insurers shall not be liable to pay Compensation in respect of any Insured Person

B.1 For Bodily Injury or illness caused by suicide, attempted suicide or intentional self-injury.

B.2 Over 70 years of age.

B.3 For Bodily injury as a result of the Insured Person parachuting or travelling by air other than as a passenger.

- B.4 For Bodily Injury or illness as a result of the influence of alcohol or drugs or narcotics.
- B.5 For Bodily Injury whilst actively participating in any riot or civil commotion or public disorder.
- B.6 For Bodily Injury whilst on service or on duty with or undergoing training with any military or police, or militia.
- B.7 For Bodily Injury as a result of participating in sport as a professional player.
- B.8 For any expenses attributable to Human Immunodeficiency Virus (HIV and/ or any HIV related illness) including derivatives or variations thereof howsoever caused. The onus of proof for this Exclusion shall be upon the Insured Person.
- B.9 For any Illness resulting from or due to venereal or other sexually transmitted diseases or related to these.
- B.10 For investigations, operation or treatment of a purely cosmetic nature; or for obesity; or undertaken to facilitate pregnancy or cure impotence or improve potency; or for psychotic or psychoneurotic or mental or related disorders.
- B.11 For asbestosis or asbestos-related diseases.
- B.12 For Bodily Injury or Illness directly or indirectly occasioned by or happening through or in consequence of nuclear weapons material or by ionizing radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from combustion of nuclear fuel. For the purpose of this exclusion, combustion shall include any self sustaining process of nuclear fission.
- B.13 For Bodily Injury or Illness whilst participating in, or as a result of Quad Bike riding.
- B.14 For influenza, laryngitis or sinusitis.
- B.15 When an accident results in injury to the spinal or spinal-nervous system, then unless such injury can be detected by means of X-rays, CT scanners, magnetic resonance images or neurological fallout, the maximum period for Total Disability shall be reduced from 26 weeks to 6 weeks.
- B.16 For chronic fatigue syndrome, “yuppie flu”, or myalgia.
- B.17 For any Illness arising during the first 60 days after First Inception of a Certificate of Cover.
- B.18 For any mental and/or nervous disorders, or any like condition arising from or attributable to stress or stress-related situations, or depression, other than those caused by an accident as defined in this Policy, or rest cures of any nature whatsoever.

**C.**

**CONDITIONS**

- C.1 This Policy and the Schedule shall be read together as one contract and any word or expression to which a specific meaning wherever has been attached in any part of this Policy or of the Schedule shall bear such specific meaning wherever it may appear.
- C.2 This Policy will be governed by the laws of the Republic of South Africa, whose courts shall have jurisdiction in any dispute arising hereunder.
- C.3 This Policy is not assignable. Compensation shall be payable only to the Insured Person or the Insured person's legal personal representative whose receipt shall effectually discharge the Insurers.
- C.4 Notice must be given to the Insurers in writing as soon as practicable of any occurrence which may give rise to a claim under this Policy, within a maximum period of 120 days.
- C.5 After incurring Bodily Injury or Illness for which Compensation may be payable under this Policy, the Insured Person shall, when reasonably required by the Insurers so to do, submit to medical examination and undergo any treatment specified. The Insurers shall not be liable to make any payment unless this Condition is complied with to their satisfaction.
- C.6 All certificates, information and evidence required by the Insurers shall be furnished in the form prescribed and without expense to the Insurers. The Insured Person shall submit to medical examination on behalf of and at the expense of the Insurers as often as shall be required in connection with any claim.
- C.7 In the event of the Insurers disclaiming liability in respect of any claim and an action or suit not being commenced within six months after such disclaimer, all benefits under this Policy in respect of such claim shall be forfeited.
- C.8 If any claim under this Policy be in respect of fraudulent or internationally exaggerated or if any fraudulent means or devices are used by an Insured Person or any one acting on the Insured Person's behalf to obtain any benefit under this Policy, all benefit in respect of that claim shall be forfeited.
- C.9 Minimum entry age is 18, maximum entry age is 60, and cover expires at age 70.