

Dollar Wealth Plan - Terms and Conditions

1. Key Terms used

“Advisor”	means an accredited financial services advisor.
“Application Form”	means the Dollar Wealth Plan Application Form completed by you and which must be accepted by The Insurer before the Policy comes into being.
“Beneficiary”	means the person or persons or company named as beneficiaries to receive the benefits of the Dollar Wealth Plan.
“Commencement Date”	Means the date from when the Customer is covered.
“Commission”	means the remuneration paid to your Financial Adviser in terms of the Commission Regulations promulgated under the Act.
“CPI”	means the inflation rate measure in the United States of America.
“Digital Dollar”	means a Digital Dollar issued by the Zing.World Digital Currency Exchange.
“Dollar Wealth Plan”	means is the insurance product approved by the FSA, which includes life cover.
“Financial Services”	means professional services involving the investment, lending, and management of money and assets and provision of life cover.
“FSA”	means the Seychelles Financial Services Authority and is the regulator for non-bank financial services in the Seychelles. Established under the Financial Services Authority Act, 2013, the Authority is responsible for the licensing, supervision and development of the non-bank financial services industry of the Seychelles.
“Insurer”	means Zing Life Assurance PCC (or ZINGLife), which is a registered and approved Seychelles Life Insurer with registration number 210290 and who underwrites the Dollar Wealth Plan. and is the issuer of the Policy Contract.
“KYC”	means Know Your Customer, alternatively known as know your client or simply KYC, is the process of a business verifying the identity of its clients and assessing potential risks of illegal intentions for the business relationship. The law requires us to KYC all customers.
“LBS”	Means Location-Based Services (LBS) which uses real-time geo-data from a mobile device or smartphone to provide information on the whereabouts of the Life Assured and the Claimant.
“Life Assured”	also known as the insured and the Customer whose life event will determine the provisions of benefits for the life cover by the Insurer.
“Policy Contract”	means collectively this Application Form, the Policy schedule and the Dollar Wealth Plan Brochure.
“Premium”	means the amount stated in US Dollars that you have agreed to pay for the Policy Contract.
“Probate”	is the process of administering a deceased estate?
“Public Holidays”	means the dates recorded here .
“Relevant Legislation”	means any legislation that applies to the Policy Contract, which shall include but not be limited to, the Act. Legislation shall include any regulation or notice promulgated thereunder from time to time.
“the Act”	means the Long-Term Insurance Act 11 of 2008 of the Republic of Seychelles and any regulation or notice promulgated thereunder.
“We, us and our”	refers to the Insurer.
“You and your”	refers to you as the Customer and who can also be the Life Assured set out in this Application Form.
“Your Personal Information”	refers to personal information about you, your Beneficiary as entered by You on the Application Form.
Waiting Period	means 3 months from the Commencement Date of the Policy Contract and is the period in which a claim for natural death causes will not be approved.
Welcome Pack	means a welcome letter and summary policy schedule.

2. Policy Acceptance

- 2.1. We will assess your application and let you know the results of our assessment. In terms of the Life Cover, we may do one of the following:
 - 2.1.1. Accept your application as it is; or
 - 2.1.2. Reject your application.
- 2.2. Your cover only starts on the Commencement Date:
 - 2.2.1. We notify you via email, to let you know (we have accepted your application or accepted risk); and
 - 2.2.2. After we have received the first Premium(s) on the date it is due or if satisfactory arrangements have been made for the payment of the first Premium;
 - 2.2.3. On the date when you have asked for cover to start provided that the conditions in clauses 9.4.1 and 9.4.2 have been met.
- 2.3. Documents that you will receive from us
 - 2.3.1. We will e-mail your Welcome Pack.
 - 2.3.2. It is your responsibility to ensure that this Policy contract meets your financial needs and contains the terms and conditions that you have agreed to.
 - 2.3.3. You may request a copy of any documentation that has been given to us during this application.
- 2.4. You have 31 days to object to any Policy contract terms or to withdraw from the Policy (Cooling-off period). You have 31 days from the date that you receive your Welcome Pack to tell us if you have any objections. If we do not receive an objection in this time, we are entitled to treat the absence of objection as your acceptance of the terms and conditions as they stand. You do not have the right to object to any terms and conditions after the 31-day period is over. If you do object, we may change the terms of the contract, but we are not obliged to do so.
- 2.5. You have the option to withdraw from the Policy within 31 days of receipt of your Welcome Pack (the cooling-off option). Should you avail yourself of this option we will refund any Premiums within 5 days of the date that you have informed us of your wish to avail yourself of the cooling-off option. The repatriation of Premiums will be made to you at the prevailing exchange rate less any bank charges that we incur. We shall not be liable for any loss or harm that you may suffer as a result of the transfer at the particular exchange rate. In other words, you bear the exchange risk.
- 2.6. You confirm you have given relevant, complete and true information. By sending this Application Form via your email account as inserted under the Assured Life details on the Application Form, you give a formal promise (called a warranty) that:
 - 2.6.1. You have given us and will continue to give us all information relevant to your application until we have accepted risk under this Policy or until this Policy starts, whichever date occurs last; and
 - 2.6.2. The information is true and complete.
- 2.7. You understand that if you have not given us all relevant, true and complete information, we may do any one or more of the following:
- 2.8. Cancel the Policy from the date we find out about the false or missing information. We will not refund any Premiums in this case.
- 2.9. Treat your Policy as if it were never taken out (known as voiding from the start date). We will refund any Premiums you have paid at the prevailing exchange rate, less our expenses, for example the costs to issue the Policy, bank charges and Commission and any claims we may have paid.

3. Policy Servicing

- 3.1. You accept this is a digital insurance offering that does not require any assistance from an Advisor and that it is designed to be convenient and efficient. On this basis, you will submit all service requests to surrender, change your policy or process a claim notice via <http://www.zingsure.com/> site (see Service Page).
- 3.2. You can at all times chat to a Contact Centre agent via the Zing Chat exchange on <http://www.zingsure.com/>, where an available agent will assist you. In the event that there are no agents available, you can leave a message and we will get back to you within 2 working hours. Our Working Hours are:
 - 3.2.1. Central African Time: 08h00 – 17h00
 - 3.2.2. Monday to Fridays
 - 3.2.3. Excluding Public Holidays and weekends

4. Privacy Statement

- 4.1. When you engage with us, you trust us with personal information about yourself and your Beneficiary. You understand that we will process their personal information for the activation of the Policy Contract benefit and to pursue their legitimate interest. We will furthermore process their information for the purposes set out in this Privacy Statement and any other related purpose.
- 4.2. The Policy Holder agrees to the use of Location Based Services ("LBS") in order to assess the location of where a policy is issued or where a claim notice is being submitted from.
- 4.3. We are committed to protecting your right to privacy.
- 4.4. The purpose of this Privacy Statement is to set out how we collect, use, share and otherwise process Your Personal Information.
- 4.5. You have the right to object to the processing of Your Personal Information. It is voluntary to accept these terms and conditions. However, we require your acceptance to activate and service your Policy Contract. This means that if you do not accept the terms of this Privacy Statement, we cannot activate and service your Policy Contract. The acceptance of these terms and conditions and the permission given to process Your Personal Information will continue after your death.
- 4.6. We will keep Your Personal Information confidential. You may have given us this information yourself or we may have collected it from other sources. If you share Your Personal Information with any third parties, we will not be responsible for any loss or harm suffered by you, your spouse, your dependants or your beneficiaries.
- 4.7. You warrant that when you give us personal information about your Beneficiary you have received their permission to share their personal information with us.
- 4.8. By submitting the Application Form, you confirm you give us consent that we may: Process Your Personal Information by using automated means (without human intervention in the decision-making process) to make a decision about you or your application for any product or service. You may query the decision made about you.
- 4.9. You agree that we may process Your Personal Information for the following purposes:
 - 4.9.1. Underwriting and administering this Policy Contract and for the assessment of any claims under this Policy Contract;
 - 4.9.2. Enabling any entity within the Insurer and any third-party provider or any Financial Services provider or its Representative approved by the Insurer to advise you of, or offer to you, any enhanced benefits or new products that become available from time to time which you may become entitled to or qualify for; and
 - 4.9.3. Providing relevant information, including Your Personal Information, to a contracted third party who requires such information to render a service to you in relation to this Policy Contract, provided that such contracted third party agrees to keep the information confidential.
- 4.10. You agree that Your Personal Information may be shared with third parties such as academics and researchers, including those outside of the Seychelles. We ensure that the academics and researchers will keep Your Personal Information confidential and all data will be made anonymous to the extent possible and where appropriate. No personal information will be made available to a third party unless that third party has agreed to abide by the strict confidentiality protocols that we require. If we publish the results of this research, you will not be identified by name.
- 4.11. If we want to share Your Personal Information for any other reason, we will do so only with your permission.
- 4.12. By submitting the Application Form, you authorise us to obtain and share information about your creditworthiness with any credit bureau or credit provider's industry association or industry body. This includes information about credit history, financial history, judgments, default history and sharing of information for purposes of risk analysis, tracing and any related purposes.
- 4.13. We have the right to communicate with you electronically via the Assured Life's recorded email address on the Application Form about any changes on your Policy Contract, including your contributions or changes and improvements to the benefits you are entitled to on the Policy Contract you have chosen.
- 4.14. We have a duty to keep you updated about any offers and new products that we make available from time to time.
- 4.15. You have the right to know what personal information we hold about you. If you wish to receive a copy, please contact us on info@zingsure.com and specify the information you would like.
- 4.16. We will take all reasonable steps to confirm your identity before providing details of Your Personal Information.

- 4.17. You have the right to ask us to update, correct or delete Your Personal Information. Where we cannot delete Your Personal Information, we will take all steps to make it anonymous. You agree that we may keep Your Personal Information until you ask us to delete or destroy it. This is unless the law requires us to keep it.
- 4.18. You agree that we may transfer Your Personal Information outside Seychelles:
- 4.18.1. To administer certain services, for example, cloud services; or
 - 4.18.2. Where required to administer any off-shore product, for instance your Dollar Wealth Plan.
 - 4.18.3. We will ensure that any country, company or person that we pass Your Personal Information to agrees to treat your information with the same level of protection as we are obliged to.
- 4.19. If we become involved in a proposed or actual merger, acquisition or any form of sale of any assets, we have the right to share Your Personal Information with third parties in connection with Your Personal Information. The terms of this Privacy Statement will continue to apply.
- 4.20. If you believe that we have used Your Personal Information contrary to this Privacy Statement, you must first attempt to resolve any concerns with us. If you are not satisfied after this process, you have the right to lodge a complaint directly with the Seychelles Regulator:
- The Seychelles Financial Service Authority**
PO Box 991
Bois de Rose Avenue
Roche Caiman Victoria Mahe Republic of Seychelles
Telephone: (+248) 438 08 00
Fax: (+248) 438 08 88
- 4.21. You give us permission to obtain your health and other information in order to assess the risk of insuring you for cover, as well as to administer your Policy and consider any claims you make, we need certain information. The information we need includes information about your identity (including personal and contact details), health (including HIV status), lifestyle, finances, tax status and creditworthiness.
- 4.22. By submitting the Application Form, you authorise us to do all of the following:
- 4.22.1. Obtain this information about you from any one, including from the Insurer. You also authorise and instruct the person with the information to give the information to the Insurer.
 - 4.22.2. You also confirm that your personal and health information may be provided to any other entity within the Insurer's Group where you or your dependant/s already have a relationship with or where you or your dependant/s have applied for a product or benefit. This information will be provided for the administration of your or your dependant/s products or benefits.
 - 4.22.3. You authorise The Insurer to share information, including personal information, in this application or in any related document with other assurers and re-insurers. This authority extends to sharing such information directly with an assurer and/or through any database for assurers at any time (even after your death) and in any form, including detailed, abbreviated or coded form.
 - 4.22.4. Give Policy information to the relevant authorities requesting this.
 - 4.22.5. Give your Financial Adviser the Policy information, including Your Personal Information, necessary to ensure the efficient administration of your Policy and to ensure that we comply with all Relevant Legislation;
 - 4.22.6. Share your health information during any underwriting process.
- 4.23. By submitting the Application Form, you authorise us to obtain and necessary information in order to KYC yourself.
- 4.24. You must tell inform us in the Notes section of the Application Form of such factors include but are not limited to:
- 4.24.1. Changes in your health: have you had any symptoms, consulted or been treated for any disease or disorder of the cardiovascular system, the heart, the blood vessels, the endocrine system, the respiratory system, the lungs, the musculoskeletal system, the neurological system, or have you ever had symptoms, consulted or been treated for cancer, a tumour, diabetes, anaemia, any other blood disorder, depression, anxiety or any other nervous disorder?
 - 4.24.2. Using tobacco: You must tell us immediately if you have started using tobacco again (for example, smoking, chewing, snuffing) if you are paying Premiums as if you were a non-smoker.
 - 4.24.3. Using drugs: You must tell us immediately if you are using any narcotics or recreational drugs, for example, cannabis, cocaine, heroin, cat, tik (crystal meth), etc.

- 4.24.4. Hazardous activities: You must tell us immediately if you intend to take part in any hazardous activities if you are paying Premiums as if you were not taking part in those hazardous activities. Examples of hazardous activities include scuba diving, parachuting, paragliding, motocross, etc.
- 4.24.5. Occupation: You must tell us immediately if your occupation changes and your occupation is considered to fall into another risk category for example if such occupation entails more than a 50% manual component.
- 4.24.6. Changes in your circumstances: You must tell us immediately if any circumstances arise that affects your risk, for example, travelling to countries that have risks due to unrest, war and health.

5. Premiums

- 5.1. You may cancel the payment of Premiums, but this will lead to the cancellation of your Policy or if you stop paying Premiums when they become due. However, you cannot claim any refund of any funds that we have collected from your account while you legally owed the Premiums to us in terms of the Policy contract.
- 5.2. All Premium payments must be received from yourself. You may not in any circumstances ask us to lend or advance any monies to you for the purposes of payment of Premiums.
- 5.3. You know and understand that you must be the Life Assured in the case of an individual or the Policy Owner in the case of a company and the Policy Payer of this Policy at all times and that you can only pay Premiums/contributions from a bank account in your name.
- 5.4. Your Policy will remain in force provided that your Premiums continue to be received from you on the due date.
- 5.5. A payment will only be considered to be a Premium once we have received and reconciled the amount from you.
- 5.6. If we are unable for any reason whatsoever to receive the Premium from you, then your Policy will be in arrears and you will be in breach of your obligation to pay Premiums under the Policy.
- 5.7. In cases where we have been unable to receive a Premium from you, we will be required to send two Premiums in the following month when your next Premium becomes due.
- 5.8. If your Policy is in arrears by one Premium payment, we will notify you of the arrears and that you are in breach of your obligations. We will request that you remedy this breach. While your Policy is in arrears by one payment, your Policy will be in what we call a period of grace. Should you experience a life changing event during this time (period of grace) we will consider a claim that you may make. If your claim is successful, we will deduct the (single) arrear Premium from the proceeds of the claim.
- 5.9. If you have been unable to remedy your breach to pay the arrear Premium and you fail to pay a second Premium, we will request that you remedy your ongoing breach. While your Policy is in arrears by two Premium payments, your Policy will be in what we call a lapse status. If you do not pay the two arrear Premiums before the end of the month when the second Premium became due your Policy will be cancelled. If you experience a life changing event during the two months where your Premiums were due, we will not consider any claim, even if you pay the arrear Premiums at a later date.

6. Our Fees

- 6.1. Policy Fee equals 9% (nine percent) of the premium received up to a maximum fee of \$15 (fifteen US Dollars).

7. Cancellation and Reinstatement

- 7.1. If your Policy has been cancelled, you may apply for re-instatement thereof within 90 days of the date of cancellation. To do this you must: pay all arrear Premiums (including those Premiums that would be due after cancellation); and
- 7.2. If you have not applied for the re-instatement within the 90-day period, then you must re-apply for your Policy and the re-instatement option will no longer be available to you.
- 7.3. Any arrear Premium will be allocated to the current reporting year.
- 7.4. The cover on this Policy ceases, when:
- 7.4.1. You give us a written email instruction, delivered using the valid email account registered against your policy to cancel your Policy; or
 - 7.4.2. If we are obliged to terminate the Policy in compliance with Relevant Legislation; or
 - 7.4.3. a directive from a relevant regulatory authority or an order of a Competent Court; or
 - 7.4.4. From the date when your Policy has lapsed due to the non-payment of Premiums; or
 - 7.4.5. If you withdraw your consent for us to process your information.

8. Beneficiary Nominations and law of Probate Policy

- 8.1. On your death we will pay any proceeds under this Policy to the Beneficiary (ies) you have nominated.
- 8.2. You may revoke the Beneficiary nomination that you have made herein at any time and nominate new beneficiaries.
- 8.3. If you have not made a Beneficiary nomination, then the proceeds will be paid to your Estate. You understand that in such circumstances the law of Probate in the country in which the proceeds are to be paid may apply and that you have obtained or will obtain the appropriate legal advice regarding such Probate law and the possible effects thereof on your Estate. We cannot be held liable for any loss, harm or adverse consequences that your Estate may suffer as a result of your failure to nominate a Beneficiary or as a result of the application of the law of Probate.
- 8.4. It is your responsibility to keep your contact information up to date. If a benefit is unpaid because The Insurer cannot contact you, your beneficiaries or dependants, using your contact details provided, we are required to contact a tracing company to trace you, your beneficiaries or dependants, after a prescribed period.
- 8.5. In the event that we are unable to locate you, your beneficiaries or dependants and pay the claim, market-related interest will be added to the benefit from the date the benefit became payable to date of payment.

9. Claims

- 9.1. Claims under the Policy will be assessed in Seychelles in compliance with our internal requirements and the terms and conditions of the Policy.
- 9.2. The Claimant is required to provide the following documents when processing a Claim Notice against a life:
 - 9.2.1. Certified copy of the Deceased's Death Certificate
 - 9.2.2. Certified copy of the Deceased's medical report from the Doctor who treated the Deceased's before and up to their death
 - 9.2.3. Certified copy of the ID/Passport of the Deceased
 - 9.2.4. Certified copy of the ID/Passport of each Beneficiary
 - 9.2.5. Certified copy of the ID/Passport of the Claimant
 - 9.2.6. Certified copy of Utility Bill – not older than 3 months (for each Beneficiary)
 - 9.2.7. Certified copy of the Police Report (this is only required if the Cause of Death is accidental death) Upon the payment of a claim the Policy will be cancelled.
- 9.3. Payment of a claim will be made in US Dollars. Nominated Beneficiaries may request that we repatriate the proceeds of any claim made to them. In such a case we will repatriate the funds within 5 days from date of receipt of such request and will transfer such funds at the prevailing exchange rate after the deduction of any bank charges. We shall not be liable for any loss or harm that you may suffer as a result of the transfer at the particular exchange rate. In other words, you bear the exchange risk and the costs associated with any bank charges your bank may charge to convert your benefits from one currency to another.
- 9.4. We may refuse to pay a claim under the following circumstances:
 - 9.4.1. The Waiting Period on the Policy Contract applies in the case of natural cause death.
 - 9.4.2. We are unable to obtain sufficient information from the Claimant or anyone else in order to consider a claim under the Policy; or
 - 9.4.3. If the death is due to suicide; or
 - 9.4.4. If the death was the result of any wilful or deliberate breaking of the law or wilful involvement in any riot, insurrection, usurpation of power, martial law or war; or
 - 9.4.5. Regular participation by the deceased in any hazardous activity or pursuit; or
 - 9.4.6. Intentional and negligent consumption of poisons, drugs and narcotics unless prescribed by a registered medical practitioner (neither you or any member of your immediate family may perform the role of registered medical practitioner in such a case); or
 - 9.4.7. Excessive consumption of alcohol; or
 - 9.4.8. If your Policy is in arrears; or
 - 9.4.9. If you fail to disclose any known or should have known pre-existing medical condition(s); or
 - 9.4.10. If you fail to disclose any material circumstances or health conditions.

10. Cessions

- 10.1. You may not absolutely cede or assign your rights and obligations under this Policy. You may however cede your rights and obligations under the Policy as security for any indebtedness (Collateral Cession), only to a foreign bank. A cession will only be valid if the Insurer is notified

in writing of the assignment and upon The Insurer confirming its acceptance of the assignment in writing.

11. Jurisdiction

11.1. This Policy contract will be governed by the laws of the Republic of Seychelles.

12. Complaints

12.1. If you have a complaint about advice you have received or if you believe you did not receive enough information about the Policy, please email us on info@zingsure.com.

13. Declaration

13.1. By sending this Application Form via your email account as inserted under the Assured Life details on the Application Form you declare that:

- 13.1.1. You have read and understood the contents of the Application Forms for the Policy.
- 13.1.2. You agree to be bound by the terms and conditions of the Policy.
- 13.1.3. You confirm that the monies paid into the products are not from proceeds of crime.
- 13.1.4. The Insurer will not be responsible for any failure, malfunction or delay of any networks or electronic or mechanical device or any other form of communication used in the submission, acceptance and processing of applications and/or transactions. The Insurer will not be liable to make good or compensate me or any third party for any damages (whether direct or consequential), losses, claims or expenses.
- 13.1.5. It is your responsibility to ensure that these Application Forms, any instructions that are part of the Application Forms and subsequent instructions submitted electronically by email to the Insurer, have been received by the Insurer.
- 13.1.6. Your spouse confirms that he/she has read and understood the terms and conditions of the Application Forms and agrees to be bound by them, where applicable.
- 13.1.7. You have acquired the permission of your spouse to nominate herself as the Beneficiary and my spouse understands the legal consequences of such nomination where applicable.
- 13.1.8. The Insurer shall be entitled to implement all instructions and applications of whatsoever nature received by The Insurer on their internet site, by telephone, email or any other form of electronic medium and which appear to emanate from me. The Insurer is indemnified against any such losses, claims or damages which arise from acting on instructions received via these forms or any other forms of electronic mediums processed on my behalf or which purports to be processed on behalf of myself, notwithstanding that it may later be proved that any such instruction was not given by me.
- 13.1.9. You acknowledge that all the personal information that I will provide to the Insurer in my Application Forms may be processed by The Insurer to provide and administer my Policy and will be retained and accessible from Seychelles.
- 13.1.10. You confirm that I am fully aware of the implications of the Act on the Policy as the case may be.
- 13.1.11. You warrant that I have disclosed all material information to The Insurer and that such information is true and correct, and I know and understand the implications of the breach of this warranty.
- 13.1.12. You warrant that any documentation that I have submitted for purposes of making these applications is in all respects authentic.