



**Group Life CONVERSION**  
*(Optional)*  
**APPLICATION FOR A CONVERSION OPTION  
CERTIFICATE**

**OLD MUTUAL EMPLOYEE GROUP IN SUPERFUND**  
OR  
**OLD MUTUAL STAFF PENSION FUND**

## **APPLICATION FOR A CONVERSION OPTION CERTIFICATE**

### **IMPORTANT INFORMATION**

Conversion Option allows members of the Old Mutual Employee Group in SuperFund (OMEGS) or the Old Mutual Staff Pension Fund to **convert their Life Assurance Benefit to an Individual policy with Old Mutual**, without having to provide medical evidence of good health (except for a cotinine test if non-smoker rates are requested). The option to convert the Life Assurance Benefit only applies **when you terminate your service with Old Mutual and exit the Fund or retire**.

Your Disability Income Benefit may not be converted.

If you currently enjoy **Life Cover** (GLA) under one of these arrangements, you will be eligible to convert this benefit. In addition, you may convert your **Voluntary Spouse's cover** (conversion also allowed on the death of the member) and **Voluntary Top-up Group Life cover** (if applicable).

### **DEADLINE**

You have 60 days after your last day actively at work to exercise this option. You need the certificate in order to apply for the conversion. Please complete the Group Life Conversion Option Application form in order for HR to request the certificate from the insurer. Refer to your last member statement as at 30 June for an indication of the cover available in respect of your Group Life Cover.

You have to allow enough time for the Insurer to provide you with a certificate to enable you to contact your personal Financial Advisor or broker to effect an individual policy within this 60-day period. The onus is on you to ensure that you receive the certificate and effect the conversion to an individual life policy within this 60-day period. You and your spouse will not be covered beyond the first 60 days after exit from the Fund.

### **PROCESS**

Once HR receives your conversion option request, the insurer [i.e. Group Assurance Products (GAP)], will supply the certificate. Once you have received the certificate(s), which will indicate the total cover amount you are able to convert to an individual life policy, GAP is no longer involved. You will now need to contact your broker or personal Financial Advisor for quotes based on the cover amounts reflected on the certificate(s). You may choose to convert the full amount or a percentage of this amount to an individual life policy. Your broker or personal Financial Advisor will supply you with the quotations, which you may choose to accept.

Should your conversion option request not reach the insurer within the 60-day period, you will have to follow the standard process of obtaining individual cover, which will include medical underwriting.

### **IMPORTANT NOTE:**

Only members who are eligible for the Life Assurance Benefit may effect the Conversion Option. Members who are not eligible are those who are over the Normal Retirement Age of their respective arrangements.



## Group Life CONVERSION

*(Optional)*

### APPLICATION FOR A CONVERSION OPTION CERTIFICATE

Reason for termination of services with Old Mutual:

	Resignation / Withdrawal
	Retrenchment
	Death (in respect of Voluntary Spouses cover only)
	Retirement

**Please complete the attached form to apply for the certificate and submit to your HR Service Centre Team**

**Employee details:**

**Details to whom the quote should be sent to:**

(Please provide your contact details for when you are no longer in Old Mutual's employ or alternatively provide the contact details of your personal Financial Advisor or Broker)

Staff code: _____	Name & Surname: _____
Title & Initials: _____	Tel number: _____
Name: _____	Fax number: _____
Surname: _____	Email address: _____
Identity No: _____	Cell number: _____
Address: _____	
_____	

Please tick the appropriate boxes: I wish to apply for a certificate for conversion of the following: (Please note that you may convert your full cover or a lesser amount).

- My Life Assurance Benefit
- My Voluntary Top-up Group Life Cover
- My Voluntary Group Life cover on my **Spouse's** life

I accept the terms and conditions regarding the Group Life Conversion Option.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**FOR OFFICE USE ONLY**

**MULTIPLE OF COVER**

Life Assurance Benefit	<input type="checkbox"/>
My Voluntary Top-up Group Life Cover	<input type="checkbox"/>
My Voluntary Group Life cover on my <b>Spouse's</b> life	<input type="checkbox"/>
Date of Exit	_____
Last day actively at work	_____
<b>Status</b> (e.g. Office/Commission Field/Broker Manager/Broker Consultant/ Area Manager etc.)	_____
For <b>Group Schemes &amp; Broker Managers only</b> – Pensionable bonuses over the past 2 years.	_____
Annual Pensionable earnings to use for Conversion option calc:	_____
Age at 1 January	_____
Category	_____
Date received	_____
Date sent to GAP	_____