



TERMS AND CONDITIONS

WHAT IS THE ROAD ACCIDENT FUND (RAF)?

The Road Accident Fund (RAF) is a statutory body that, in terms of the provisions of the Road Accident Fund Act, 1996 (Act No. 56 of 1996) ("the Act") as amended, exists to provide cover to all persons (referred to in the Act as a "third party") for loss or damage resulting from the death or bodily injury caused by the negligent driving of motor vehicles within the borders of the country.

WHERE DOES THE FUND GET ITS MONEY?

The Road Accident Fund is mainly funded by a levy on Fuel (petrol and Diesel sold)

WHO IS ENTITLED TO CLAIM?

- A person who was personally injured (except a driver who was the sole cause of the accident)
- The dependent of a deceased victim
- A close relative of the deceased in respect of funeral expenses
- A claimant under the age of 18 who must be assisted by a parent or legal guardian

WHAT YOU CAN CLAIM FOR

- Medical expenses (past and future)
- Funeral expenses
- Loss of earnings or income due to injuries (past and future)
- Loss of support for a dependent of a deceased victim (breadwinner, past and future)
- General damages of pain, suffering and disfigurement in the case of bodily injury as determined after examining the extent and severity of the injury.

ACA BACKGROUND

The Road Accident Fund was set up by the government to provide victims of road accidents with compensation for injuries suffered. Unfortunately the process of preparing, lodging and finalizing any such claim is challenging, as it requires compliance with many regulations and procedures that are foreign to regular, non-legal people. This meant that any claimant who wishes to be compensated fully for his/her injuries and resulting damages, can decide to appoint an attorney or Legal practitioner to administer their claim. This results in a cost implication to the claimant, who would not receive his full compensation. With ACA, members enjoy the benefits of appointing an expert Legal practitioner to finalize his/her claim, without any cost to the members.

ACA BENEFITS TO MEMBERS

- Members will enjoy the services of a specialized legal practitioner in order to assess, formulate and administer their claim for compensation from the RAF, at no cost to the member.
- Members receive 100% of their RAF payout, without the usual contingency deduction non-members would need to pay their legal team.
- ACA will assist members to manage the instructions and administration of the claim with the legal practitioner.
- Members will in effect receive the following service:
 - Legal representation,

- Claim management,
- Payment of all costs associated with the lodging of a fully prepared claim to the RAF,
- Professional medico legal reports, as may be required,
- Actuarial reports on loss of earnings or maintenance.
- Members will receive legal representation for the full administration of the claim, including appearances as may be needed in the Magistrate's Court, the Regional Court or the High Court.

PAYMENT OF PREMIUMS

Your contribution of R35.00 (monthly premium) OR R350 (yearly premium) will be deducted directly from your bank account. You pay contributions monthly in advance, or once a year in advance. This means that the deduction in the month is your contribution for the next month. "No premium = no cover with ACA", should premium not be paid ACA cover shall cease. Should the member wish to rejoin, or begin paying again the applicable waiting period will apply. Please note that 1 outstanding premium means a new waiting period will start when next successful premium is received.

WAITING PERIOD

A waiting period of three (3) months is applicable to members paying a monthly premium, wherein no claim may be lodged with ACA for accidents occurring within the waiting period. Members paying a yearly premium will have immediate cover with ACA as soon as the first premium is received.

CANCELLATION OF MEMBERSHIP

Should a member decide to cancel his membership with ACA, 30 days written notice must be given to ACA. No refunds of already contributed premiums will be applicable. ACA shall be entitled to cancel this service by means of a 30 days written notice.

WHO IS COVERED UNDER ACA

You and your immediate family (as nominated on the ACA application form)

DEFINITION OF IMMEDIATE FAMILY

The family membership includes the main member, spouse (any person to whom you may be married in terms of South African law, including a party to a customary union according to ethnic law and custom or to a union recognized as a marriage under the tenets of any Asiatic religion, or a person with whom you share a common home with pooled resources, with the intent that this arrangement is permanent), and any dependent child under the age of 18 years, (including legally adopted, foster and step children, as well as children who are totally physically and/or mentally handicapped and reliant permanently on the support of the main member) who reside in the same residence as the main member. Proof of relationship will be required.

PROCEDURE FOR SERVICE

1. Phone ACA during office hours (8:30-16:00) and register a claim by providing the details of your case.

2. The member will be provided with a claim number. ACA will then assess the merits of the claim in terms of the requirements of the Road Accident Fund Act.
3. The member will be notified within 7 days of the outcome of the assessment. Should ACA find that the member's claim does not comply with the requirements of The Act, the member will be notified of the reasons therefore and will have the right to request a review of the assessment by an ACA Legal practitioner.
4. Should a claim be deemed valid, ACA shall assist the member to obtain the necessary documents and information required for the member's first consultation with the Legal practitioner. ACA will also arrange the appointment with the Legal practitioner.
5. ACA will assist with any further reasonable queries the member might have.

DOCUMENTS AND INFORMATION TO BE SUBMITTED

When you are involved in a motor vehicle accident in which there was bodily injury you will need the following information for the RAF:

- Date and time of the accident
- An affidavit by claimant
- The accident report – SAPS and/or traffic department reports and case numbers
- Medical report from the first doctor who saw you after the accident
- The names and addresses and telephone numbers of witnesses
- Photographs of the accident and injuries if possible;
- Comprehensive insurance details if applicable
- Medical and Hospital accounts and records
- Proof of earnings of all parties involved
- Certified copies of ID documents

If victim is deceased the following additional documents are required:

- Identity document of deceased
- Death certificate and post mortem report
- Proof of marriage (if claim by spouse)
- Birth certificate of minor children reflecting names of parents
- Proof of funeral expenses

* PLEASE NOTE: These are some of the documents that may be required but it is not limited to these documents

TIME PERIOD TO LODGE A CLAIM WITH THE RAF

If the identity of the offending driver or owner is known, the claim must be lodged within 3 years from the date on which the claim arose. If the identity of the offending driver or owner is unknown, the claim must be lodged within 2 years from the date on which the claim arose.

TIME PERIOD TO LODGE A CLAIM WITH ACA

ACA must be notified of a potential claim within 90 days after the accident.

SERVICE LIMITATIONS

- ACA will not provide any services, should the member's claim not be deemed valid and viable.
- Members may refer any claim that was found not to be valid and viable to its own Legal practitioner, cost of which will not be borne by ACA.
- Should a member decide to use the services of an outside Legal practitioner or person for the

administration of his/her claim, it will be for the member's own account. In this regard members are not obliged to use the services of ACA.

- ACA services are only applicable to accidents that occur within South Africa and claims that comply with the requirements of The Act or any amendments thereto or any new legislation that might replace the Act.
- ACA service is conditional upon the member's premium being paid up to date in full at the time of the incident.
- ACA does not guarantee acceptance of the claim by the RAF nor fulfillment by the RAF of its obligations.
- A waiting period of three (3) months is applicable to members paying a monthly premium, wherein no claim may be lodged for accident occurring within the waiting period. Members paying a yearly premium will have immediate coverage.

IMPORTANT CONSIDERATIONS

- Property damage cannot be claimed from the RAF.
- An accident must be reported to the police and the RAF by the driver/owner.
- Compensation will be reduced in relation to claimant's own negligence.
- Compensation received from the Compensation Commissioner in a case where a person is injured on duty, is deductible.
- The RAF may require a person to submit to investigations and medical examinations.
- A claim may be excluded in a case where a claimant unreasonably refuses or fails to cooperate with the RAF in the course of its investigation.
- Any incorrect information provided to ACA or the RAF might result in a claim being repudiated. ACA reserves the right to cancel the service and to declare all premiums paid by the member in terms of the service forfeited if there is any evidence of, or attempted submission of, a fictional claim, fraud or misrepresentation.
- ACA will only provide the administration / legal service and cannot be held liable for any loss or damages suffered by the member.

CONTACT DETAILS

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