



NetSuite Insurance Training Manual for
Members



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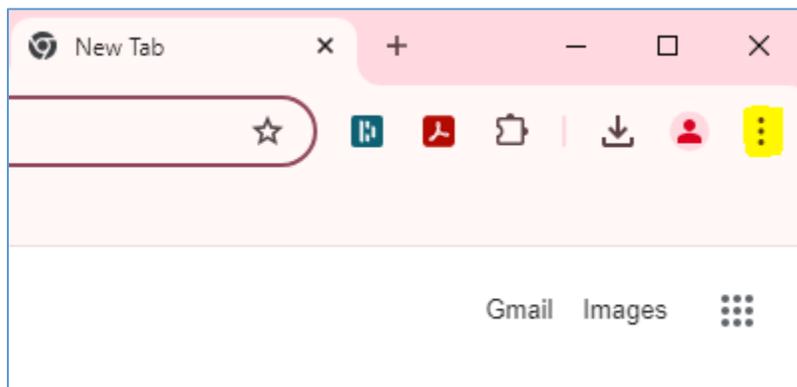
Setting Up Your Account

BROWSER SETUP

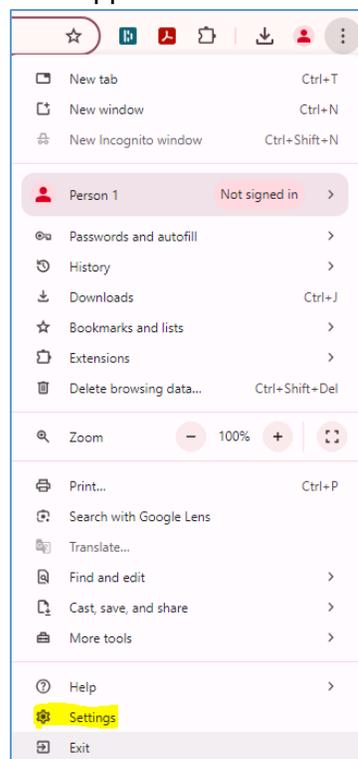
This step will enable your browser to “allow” pop-up windows from NetSuite. (Such as completed certificates)

Google Chrome

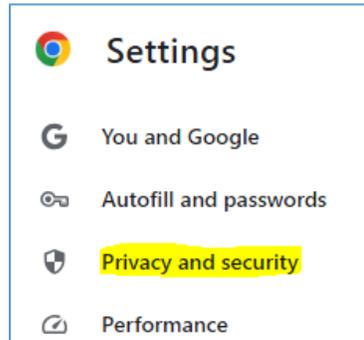
1. Select the three dots in the upper right corner of the browser
*This step will enable your browser to “allow” pop-up windows from NetSuite. (Such as completed certificates)



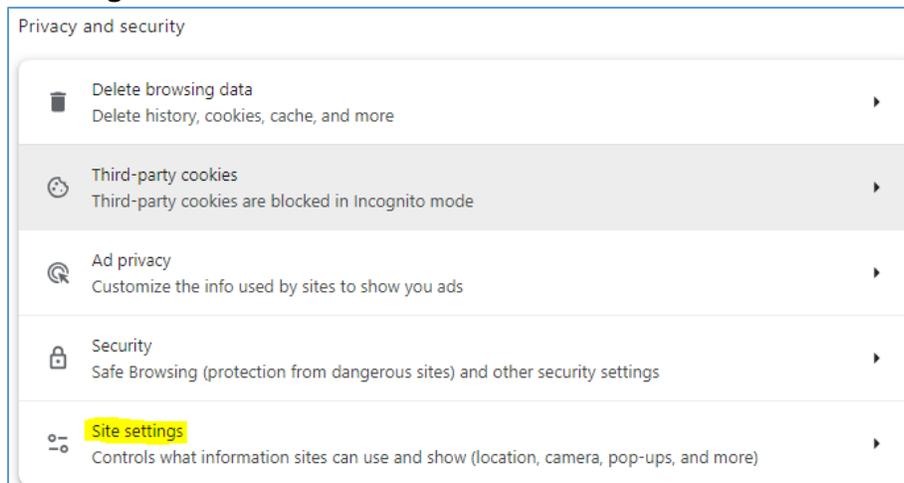
2. Select “**Settings**” from the menu that appears



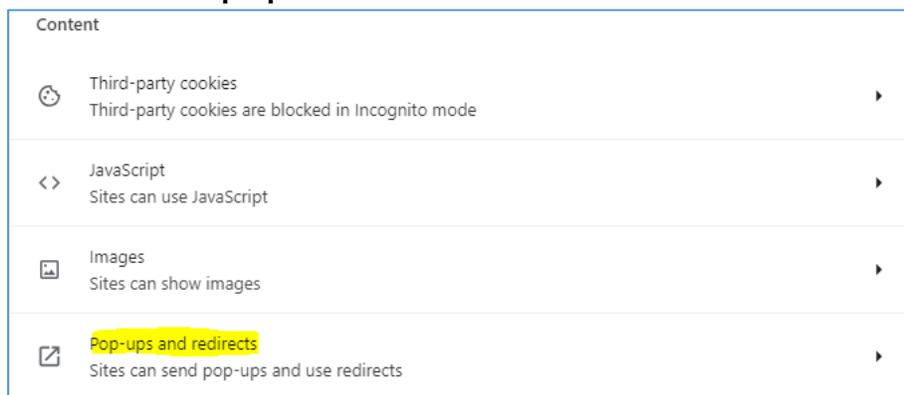
3. Select **“Privacy and Security”**



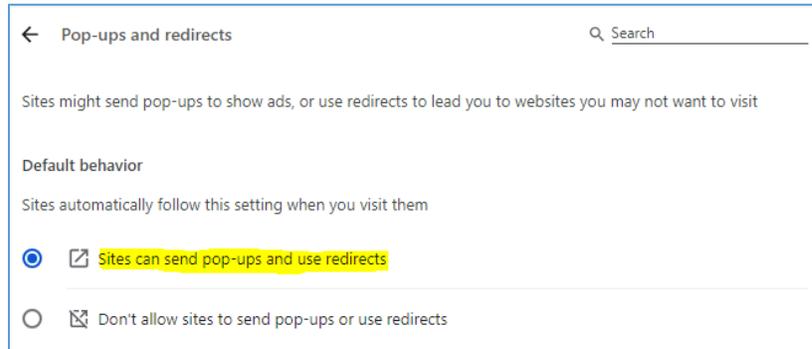
4. Select **“Site Settings”**



5. Under **Content** > Select **Pop-ups and redirects**



6. Select **“Sites can send pop-ups and use redirects”**



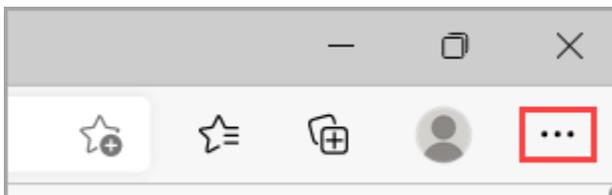
7. Close the Setting Tab

Firefox (Windows)

1. Select the three horizontal bars in the upper right corner.
2. Select Options.
3. Select the Privacy and Security tab.
4. To allow specific pop-ups, click Exceptions and enter the URL(s).
<https://6969186.app.netsuite.com/app/login/secure/enterpriselogin.nl?c=6969186&when ce=>
5. Close the window. Click OK.

Microsoft Edge

1. In Edge, go to Settings and more (three dots) at the top of your browser.



2. Select Settings > Cookies and site permissions.
3. Under All permissions, select Pop-ups and redirects.
4. Go the Allow section, and then select Add.
5. Type in the URL that you want to allow to create pop-ups into the dialog box (starting with the https:// portion at the beginning) and select Add. The URL should now appear in your Allow list.
<https://6969186.app.netsuite.com/app/login/secure/enterpriselogin.nl?c=6969186&when ce=>

You are now ready to set up your NetSuite Account

The account set up process is the first step in ensuring that you have access rights to transact business in NetSuite.

Once your NetSuite account has been activated, you will receive an automated email (sample below) to complete the account set up process.



Welcome to your GFD of Canada NetSuite account!

GFD of Canada has created a NetSuite user account for you.

[Please click here to set your password.](#) This link is valid for 72 hours.

Your login email user@gfd.org

For any questions about your account, please contact your Member Care Team at customerservice@gfd.org.

Click on the link **“Please click here to set up your password”**. Note: this password link is valid for 72 hours only.

Note your login email address as you will require this to login along with your password.

The link will take you to the NetSuite site.

You will need to choose a new password that is a minimum of 10 characters and contains at least 3 of the following:

- Uppercase letters
- Lowercase letters
- Numbers
- Non-alphanumeric ASCII characters (! @ # % & * ^ , ; ~ “ / \ + ? - [] { } < >)

Once your password has been set, you can log into NetSuite with your email and password



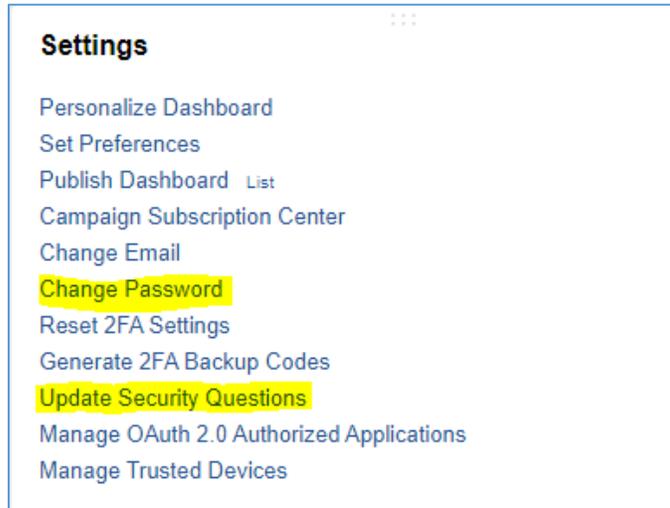
The image shows the Oracle NetSuite login page. At the top, it says "ORACLE NETSUITE". Below that is "Oracle NetSuite Login". There are two input fields: the first contains "user@example.ca" and the second contains a masked password ".....". To the right of each field is a small icon of a person. Below the fields is a checkbox labeled "Remember Me". A blue "Log In" button is centered below the checkbox. Underneath the button is the text "Forgot your password?". At the bottom, there is a line of text: "By clicking on the Log In button, you understand and agree to Oracle Terms of Use and Oracle Privacy Policy".

The first time you log in to NetSuite, you will be required to complete a set of three security questions.

These questions are used to verify your identity, should you forget your password or log in from a different computer.

The image shows the "Set Up Security Questions" form. At the top, it says "Set Up Security Questions". Below that is a paragraph: "Security answers are used to verify your identity if you forget your password, and when you log in from a new browser or computer. Answers are not case-sensitive." There are three numbered questions, each with a dropdown menu labeled "Please Select..." and an "Answer:" text box. Below the questions is a checkbox labeled "Hide Answers" which is checked. At the bottom, there are two buttons: "Save" and "Remind Me Later".

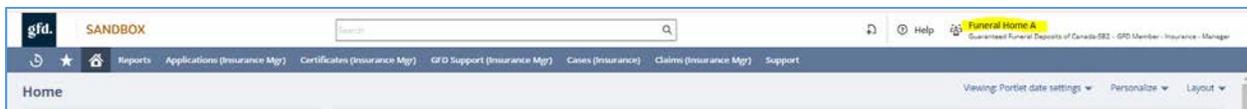
Your security questions can be updated at any time by clicking on the Update Security Questions in the Settings portlet on your Home dashboard.



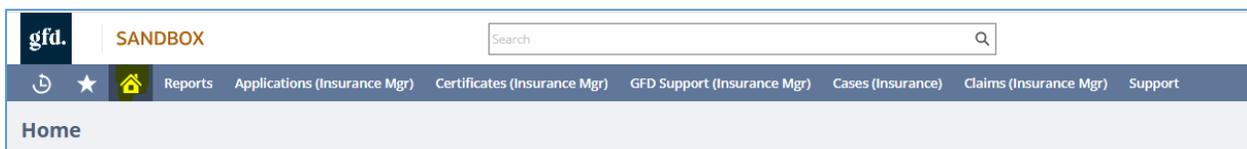
You are now ready to start using NetSuite

Dashboard

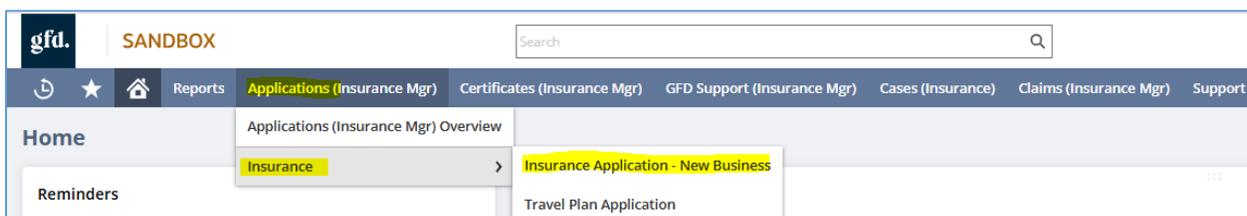
Top left hand side of your dash board is where you would log out, as well as view multiple locations if applicable.



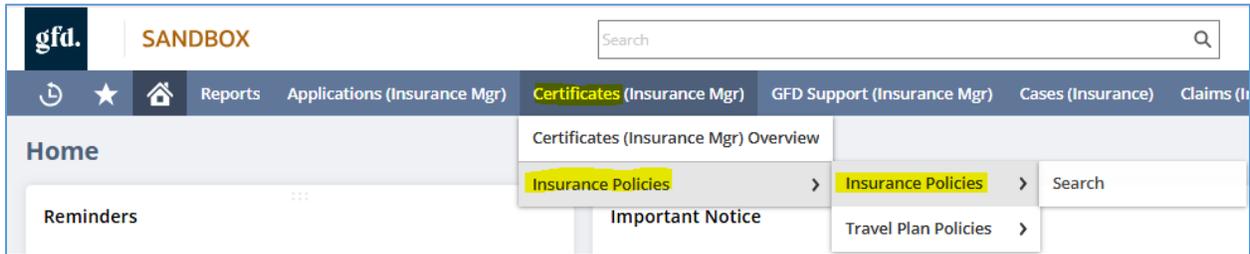
Click on the house icon at any stage within NetSuite to return to your Dashboard



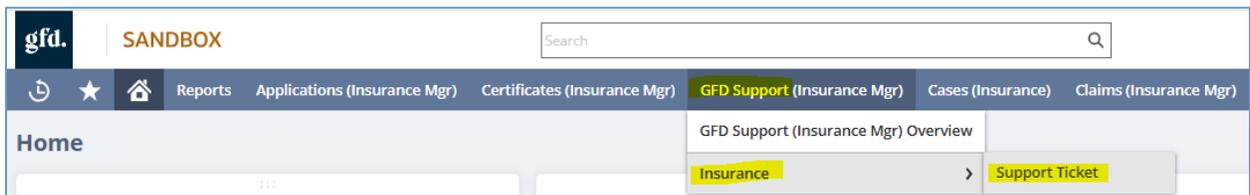
To start a new application, hover over Applications, then hover over Insurance then click on Insurance Application – New Business to start your application process. Or choose Travel Plan Application



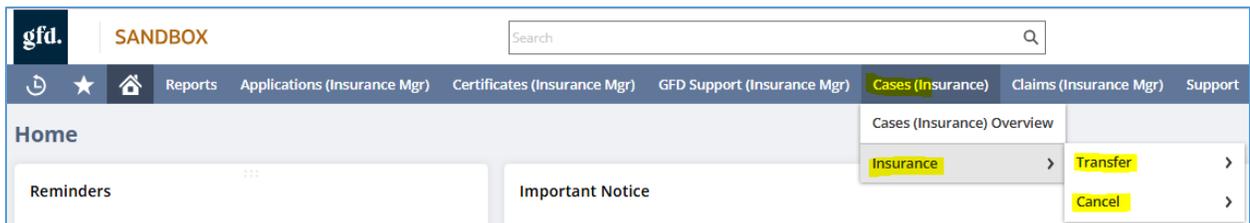
For a list of all policies, hover over Certificates > Insurance Policies > Click on Insurance Policies (Do not click on Search)



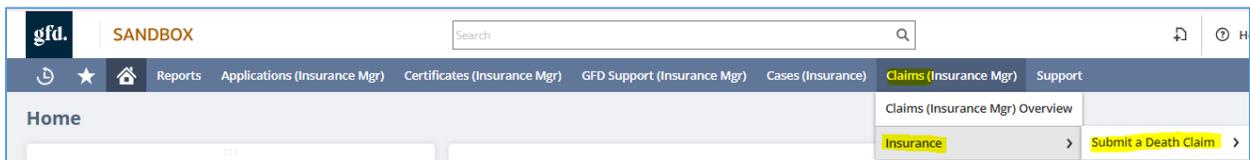
To submit a generic support ticket, not related to a policy, hover over GFD Support > Insurance > click on Support Ticket



Cases (Insurance) is a shortcut to process a Transfer and Cancel request. Hover over Cases (Insurance) > Insurance > Then click on Transfer or Cancel



Claims (Insurance Mgr) is a quick shortcut to Submitting a Death Claim. Hover over Claims (Insurance Mgr) > Insurance > Submit a Death Claim



Policy Management:

Insurance Policies – Link to all your policies

Draft Insurance Applications – List of applications started but not yet submitted

Open Cases – List of all cases



Payouts:

Claims Pending Payment – Claims submitted and pending payment

Paid Cancellation – List of paid cancelled policies

Paid Claims – List of all paid claims

Deposits:

New Business Deposits – List of all new business submitted

Inforce Certificates – List of all active policies

Policies Paid In Full – List of all paid in full policies with the ability to print Paid in Full letters

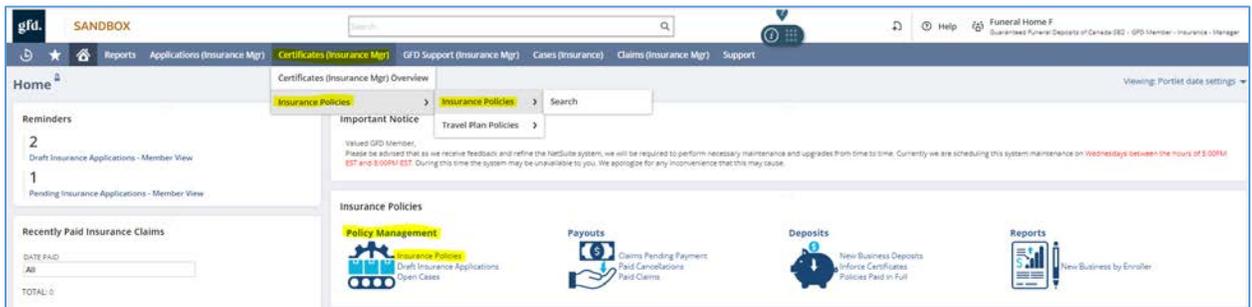
Reports:

New Business by Enroller – List of all new business submitted by Enroller

List of Policies

There are two way to navigate to your list policies

- Shortcut under Policy Management > Insurance Policies
- Certificates (Insurance Mgr) hover over along the top main tabs > click on Insurance Policies *Do Not click on Search



- Insurance Policies – Member View will open
- Click on the + symbol next to the word FILTERS

The screenshot shows the 'Insurance Policies - Member View: Results' table. It includes a search bar, a 'Filters' section, and a table with columns: POLICY #, STATUS, INSURANCE COMPANY, ISSUE DATE, LINKED POLICY #, BENEFICIARY, PURCHASER, FUNERAL HOME/ESTABLISHMENT, CONTRACT TYPE, FUNERAL COST, PROGRAM #, LINE OF BUSINESS, PAY PLAN, BILL MODE, DOWNS PAYMENT, BILL GROUP, and ATTACHED #. The table contains 4 rows of data and a total row.

POLICY #	STATUS	INSURANCE COMPANY	ISSUE DATE	LINKED POLICY #	BENEFICIARY	PURCHASER	FUNERAL HOME/ESTABLISHMENT	CONTRACT TYPE	FUNERAL COST	PROGRAM #	LINE OF BUSINESS	PAY PLAN	BILL MODE	DOWNS PAYMENT	BILL GROUP	ATTACHED #
1050121	Premium Paying	Equitable Life of Canada	10/17/2024		S28904 Olive Pasley	S28904 Olive Pasley	Funeral Home F	Standard	10,000.00	85	Active 1222 JN	15 Pay	Quarterly	0.00		72
1050125	Premium Paying	Equitable Life of Canada	10/17/2024		S28909 Quentin Rogers	S28909 Quentin Rogers	Funeral Home F	Standard	15,000.00	85	Active 1222 JN	15 Pay	Monthly	0.00		84
1050183	Premium Paying	Equitable Life of Canada	10/17/2024		S28914 Shirley Topps	S28914 Shirley Topps	Funeral Home F	Standard	6,000.00	85	Active 1222 JN	10 Pay	Quarterly	0.00		48
1050189	Paid Up	Equitable Life of Canada	10/13/2024		S28989 Mary Neeman	S28989 Mary Neeman	Funeral Home F	Standard	7,000.00	85	Active 1222 JN	Single Pay	Single Premium	0.00		43
Total									38,000.00					0.00		244

- Click on the blue hyperlink policy number to open the policy

Insurance Policies - Member View: Results

[Return To Criteria](#)

FILTERS

POLICY # ISSUE DATE FROM

DEATH DATE FROM TO

EDIT

	POLICY # ▲	STATUS	INSURANCE COMPANY	ISSUE DATE	LINKED POLICY #
NEW	1050121	Premium Paying	Equitable Life of Canada	10/7/2024	
NEW	1050125	Premium Paying	Equitable Life of Canada	10/7/2024	
NEW	1050130	Premium Paying	Equitable Life of Canada	10/7/2024	
NEW	1050189	Paid Up	Equitable Life of Canada	10/13/2024	
Total					

-
- Or you can use the filters to search for a specific policy

Insurance Policies - Member View: Results Learn about NetSuite Analytics V

[Return To Criteria](#)

FILTERS

POLICY # ISSUE DATE FROM TO LOCATION # FIRST NAME LAST NAME STATUS

DEATH DATE FROM TO CANCEL DATE FROM TO INSURANCE COMPANY STYLE

Online Application

Submit a New Insurance Application with eSignature

- To navigate to the Insurance Application: use the menu along the top of your homepage, hover over Applications > Insurance > Insurance Application – New Business
- Here are some notes to help you through the online application as there are some changes

Submit an Application

General Details

Recipient & Purchaser

Beneficiaries

Payment Terms

Payment

Review

Submit Enrollment

Product *Choose product from drop down*

Product

Funeral Home *Select the funeral home location from the drop down*

Funeral Home

Address

Coverage

Funeral Amount

Amount needs to be between \$500 and \$35,000 (this accounts for the total maximum of funeral and cemetery amounts)

Other Amount

This field is optional, however if an amount is entered it must be between \$500 and \$10,000.

Total Coverage **\$0.00**
Funeral Amount + Other Amount

Continue

General Details **Recipient & Purchaser** Beneficiaries Payment Terms Payment Review Submit Enrollment

Select if the purchaser and funeral recipient are not the same person. *If you check this off, another box will appear to enter purchaser details*

Funeral Recipient & Purchaser Information

Title	Mr.	
First Name	Bill	
Middle Name	Middle Name	
Last Name	Bounty	
Date of Birth	1/1/1967	Age: 57
Address Line 1	1010 Rue Sherbrooke O	<i>Helpful Tip: If you type in the street address and select it from the addresses that appear below (as you type), the remainder of the address will be auto filled</i>
Address Line 2	Address Line 2	
City	Montréal	
Province	Quebec	
Postal Code	H3A 2R7	
Phone #	(514) 800-1450	<i>Phone number is not required</i>
	Digits only (no hyphens or spaces)	
Email	bill@gmail.com	<i>Email address is required for the two different eSign processes available</i>
Social Insurance #	535240733	<i>SIN is required, you will be provided with test SIN numbers to use during your testing</i>

*Email Field – If client does not have an email address, do not use the enroller’s email address. Each signee’s email address must be unique. You can use a different email address associated to the funeral home (i.e. info@abcfuneralhome.ca)

Purchaser Information *This box appears if you check off "Select if purchaser and funeral recipient are not the same person" at the top of the page (see previous screenshot)*

Title: Mrs. (dropdown)

First Name: Brenda

Middle Name: Middle Name

Last Name: Bounty

Date of Birth: 1/1/1977 (Age: 47)

Relationship: Wife

Address Line 1: 1010 Rue Sherbrooke O

Address Line 2: Address Line 2

City: Montréal

Province: Quebec (dropdown)

Postal Code: H3A 2R7

Phone #: Phone #
Digits only (no hyphens or spaces)

Email: brenda@gmail.com *Email is required*

Social Insurance #: 747475838 *SIN is required*

[Copy recipient address](#)

Helpful Hint: If the purchaser resides at the same address, you can simply click 'Copy recipient address' - if its different, you can start typing the street address and select from the list that shows up to auto fill the remaining address fields

*Email Field – If client does not have an email address, do not use the enroller's email address. Each signee's email address must be unique. You can use a different email address associated to the funeral home (i.e. info@abcfuneralhome.ca)

General Details > Recipient & Purchaser > **Beneficiaries** > Payment Terms > Payment > Review > Submit Enrollment

Primary Beneficiary

Title: Mr. (dropdown) Select if the beneficiary is an estate

First Name: Brendan

Middle Name: Middle Name

Last Name: Bounty

Relationship: Son

Specify Contingent Beneficiary *This is an optional item*

Payment Terms

Total Coverage **\$25,501.00**
Funeral Amount + Other Amount

How will this be paid? Single Payment
 Multiple Payments Over Time

Select Single Pay or Multi Pay

Term 5 Years

If multi-pay, select the appropriate term from the dropdown menu

Frequency Quarterly

Select the payment frequency

Downpayment \$ 5,000.00

Enter down payment amount if applicable, otherwise leave blank

Outstanding Amount **\$20,501.00**
Total Amount - Downpayment

Payment Breakdown **20 payments (Quarterly) of \$1,319.03**

Total Deposits **\$31,380.60**

First Payment Required **\$6,319.03**
Downpayment + First Payment

Funeral Recipient Health Questions

Why am I being asked this?

Because the payment term is greater than one year. This will determine whether Bill Bounty qualifies for Standard or Non-Standard benefits.

Check the box by each question if you are answering "YES" to the health questions and that these health conditions apply to you.

Funeral Recipient Health Questions *These only need to be checked off if the answer is YES*

Why am I being asked this?

Because the payment term is greater than one year. This will determine whether Bill Bounty qualifies for Standard or Non-Standard benefits.

Check the box by each question if you are answering 'YES' to the health questions and that these health conditions apply to you.

- Is Bill Bounty terminally ill or bedridden; or has Bill Bounty been informed that they have an Immune Deficiency Disorder, Acquired Immune Deficiency Syndrome (AIDS) or AIDS Related Complex (ARC)?
- Is Bill Bounty currently:
 - a. Hospitalized or living in an extended care facility or nursing home;
 - b. Incapable of carrying out daily activities without assistance such as getting up, walking, washing, dressing, or feeding self, or
 - c. Not working due to illness for more than one year?
- Within the past three (3) years, has Bill Bounty been diagnosed or treated by a medical practitioner for:
 - 1. Congestive heart failure, heart attack, angina pectoris (chest pain), stroke, angioplasty or bypass surgery, cerebrovascular accident, or had or been advised to have surgery for any other heart condition or blood vessel disease or disorder;
 - 2. Kidney failure, cirrhosis of the liver, diabetes, diabetic coma or insulin shock, Alzheimer's Disease, mental illness, alcoholism, or drug dependence;
 - 3. Any cancer, or is Bill Bounty waiting for the results of any cancer tests, or have cancer tests been recommended but not yet completed; or
 - 4. An amputation caused by disease; or been treated for any respiratory disease by use of oxygen equipment to assist in breathing?

Payment Method *Select appropriate payment method*

- Payable By
- Cheque or Money Order
 - Pre-Authorized Debit
 -  

Please be advised that there will be a 2% processing fee.

Credit Card

Card Type	VISA
Card Number	4242424242424242
Card Expiration Date	0627
Data format must be MMY.	
Cardholder Name	Brenda Bounty
Card Street Address	1010 Rue Sherbrooke O
Card Postal Code	H3A 2R7

If you select credit card, you can use the credit card number provided to you for testing. The expiry date needs to be in the future, and the cardholder name should be the purchaser if one was indicated.

Withdrawal Day

Withdrawal Day	1st
----------------	-----

Select a withdrawal date from the dropdown (which will not apply to the first payment as that is taken right away to issue the policy)

Previous

Save & Continue

General Details Recipient & Purchaser Beneficiaries Payment Terms **Payment** Review Submit Enrollment

First Payment

Make the first payment of \$6,319.03 using Cheque or Money Order Pre-Authorized Debit Credit Card (4242***4242)

The first payment can be made using the payment method selected for the ongoing payments OR you can select a different payment method for the first payment only

Pre-Authorized Debit

Account Type: Chequing *Select Bank Account Type from list*

Name of Account Holder: Brenda Bounty *Enter Account Holder's Name*

Transit #: 5 digits *Please enter branch transit number*

Bank #: 3 digits

Account #: 7 to 12 digits

Financial Institution: Name of Financial Institution

Previous **Save & Continue**

CHEQUE NUMBER: 062
BRANCH NUMBER: 1232052
INSTITUTION NUMBER: 001
ACCOUNT NUMBER: 02530213883

At this point, you have finished entering all the information for the bulk of the application. On the review page you will find

- (1) A summary of the information you have input to this point,
- (2) Indicate a Power of Attorney and upload the supporting documents ONLY for POA, and
- (3) Terms and Conditions for Funeral Recipient and Purchaser to agree to.

General Details Recipient & Purchaser Beneficiaries Payment Terms Payment **Review** Submit Enrollment

For Review

<u>Coverage</u> Change Product 1 Total Coverage \$25,501.00	<u>Funeral Home</u> Change Name 2071 (#34839) Address Fake Funeral Home 123 Fake St. Oakville ON P0D7F2 Canada
<u>Funeral Recipient</u> Change Name 1 Bill Bounty Date of Birth 1967-01-01T08:00:00.000Z Address Bill Bounty 1010 Rue Sherbrooke O Montréal QC H3A 2R7 Canada	<u>Purchaser</u> Change Name 2 Brenda Bounty Date of Birth 1977-01-01T08:00:00.000Z Address Brenda Bounty 1010 Rue Sherbrooke O Montréal QC H3A 2R7 Canada
<u>Beneficiaries</u> Change Primary Estate of Bill Bounty Estate Contingent	
<u>Payment Terms</u> Change Payor 2 Brenda Bounty Payment Terms 20 payments (Quarterly) of \$1,319.03 Payment Method Credit Card (4242***4242)	<u>Payment</u> Change First Payment \$6,319.03 First Payment Method Pre-Authorized Debit (RBC *0501) ***2

Power of Attorney Documents *Only if applicable* ←

What is this?
This is your opportunity to attach up to 10 related files (such as Power of Attorney Papers) to this application. This is not mandatory and can be skipped if desired.
Allowed file extensions: .pdf, .png, .bmp, .gif, .jpg, .jpeg, .tif, .tiff, .txt, .doc, .docx
Note: Please keep your upload below 30MB or it will not complete successfully.

5.4 KB
Power of Att... ← *The power of attorney documents must be uploaded*

Power of Attorney ← *If there is a Power of Attorney, check the box*

Full Name ← *The name and email field will appear, which need to be filled out*

Email



Terms and Conditions

The Funeral Recipient and the Purchaser declare and agree that:

1. The statements and answers in all parts of this Electronic Application are true, complete and correctly recorded.
2. The Certificate shall not take effect unless: a) the Electronic Application Authorization Form is signed by the Funeral Recipient (Annuitant) and the Purchaser (if applicable); b) the first premium and premium down payment, if applicable, for the Certificate is received; and, c) the Electronic Application Authorization Form is signed by an authorized representative of The Equitable Life Insurance Company of Canada.
3. The death benefit payable shall be paid to the Funeral Provider assignee in effect on the date of death of the Funeral Recipient, if any, or otherwise to the beneficiary. The Funeral Provider assignee will pay the beneficiary any part of the death benefit that exceeds the amount payable to the Funeral Provider for funeral & cemetery goods and services under an eligible funeral arrangement. The Other Amount, if selected, shall be paid to the beneficiary. Any amounts owing under an annuitization option after the Funeral Recipient's death will be paid to the beneficiary.
4. The personal information willingly provided by me/us and collected in this Electronic Application, will be used by The Equitable Life Insurance Company of Canada and Funeral Plans-Canada (Canadian Funeral Programs Inc.) for the purposes of servicing, administration, determining Canadian or foreign tax payor status, claims processing and adjudication related to this Electronic Application, Certificate, any resulting insurance and any supplementary documents. I/We understand and authorize that for the above purposes the personal information on this file is accessible to, and be exchanged with, authorized employees of, and relevant third parties retained by The Equitable Life Insurance Company of Canada, its sales distribution network, participating reinsurer(s), other companies, Canadian or foreign tax authorities and any other person or party whom I/We authorize.
5. If there is a Purchaser who is different from the Funeral Recipient, the Funeral Recipient consents to the insurance being placed on his/her life.
6. They know of nothing not disclosed in this Electronic Application affecting the insurability of the Funeral Recipient.
7. The certificate is not replacing any insurance policy or annuity.
8. Any failure to disclose or misrepresentation given or contained in this Electronic Application, including the responses to the Health Questions, may reduce or eliminate the death benefit under the Certificate or render the Certificate voidable by The Equitable Life Insurance Company of Canada.

I accept the terms and conditions

Previous Save & Continue

Once you have hit save & continue, you will be taken to the following screen, which will allow you to update the email addresses if needed before selecting the eSign process that is applicable.

*Email Field – If client does not have an email address, do not use the enroller’s email address. Each signee’s email address must be unique. You can use a different email address associated to the funeral home (i.e. info@abcfuneralhome.ca)

GFD Insurance by Funeral Plans Canada My Draft Applications User 123456789

Submit an Application (#10190685)

General Details Recipient & Purchaser Beneficiaries Payment Terms Payment Review **Submit Enrollment**

Enrollment e-Signers

Power of Attorney	Boblyn Betts (boblynbetts@gmail.com)	- or -	Alternative Email for POA e-Signature
Funeral Recipient	Bill Bounty (bill@gmail.com)	- or -	Alternative Email for Recipient e-Signature
Purchaser	Brenda Bounty (brenda@gmail.com)	- or -	Alternative Email for Purchaser e-Signature

Sign Now Request Signature

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- **Sign Now** – best if ALL signees, including the enroller are present physically to sign the document right now in person.
- **Request Signature** – best if that is not the case, each party will receive an email when it is their turn to sign the document.

The signing order is determined by the inputs for the application, as follows:

If Funeral Recipient is also the Purchaser	1. Funeral Recipient 2. Enroller
If Funeral Recipient is NOT the Purchaser	1. Funeral Recipient 2. Purchaser



	3. Enroller
If POA Exists	Power of Attorney signs on behalf of Funeral Recipient

SIGN NOW STEPS

1. Select Yes, then click Sign Now

Enrollment e-Signers

Funeral Recipient/Purchaser Billy Jones (user@gfd.org) - or - Alternative Email for Recipient e-Signature

Are all signees physically present to sign this application now? (This includes the funeral recipient, purchaser (if named), power of attorney (if named), and the enroller. By indicating yes, the application will proceed to prompt the sign in person option. Otherwise you can request a signature and each signee will receive an email notification when the application is ready for them to sign)

Yes No

Sign Now

2. Confirm terms and conditions and click Ready to Sign

The signing order will be:

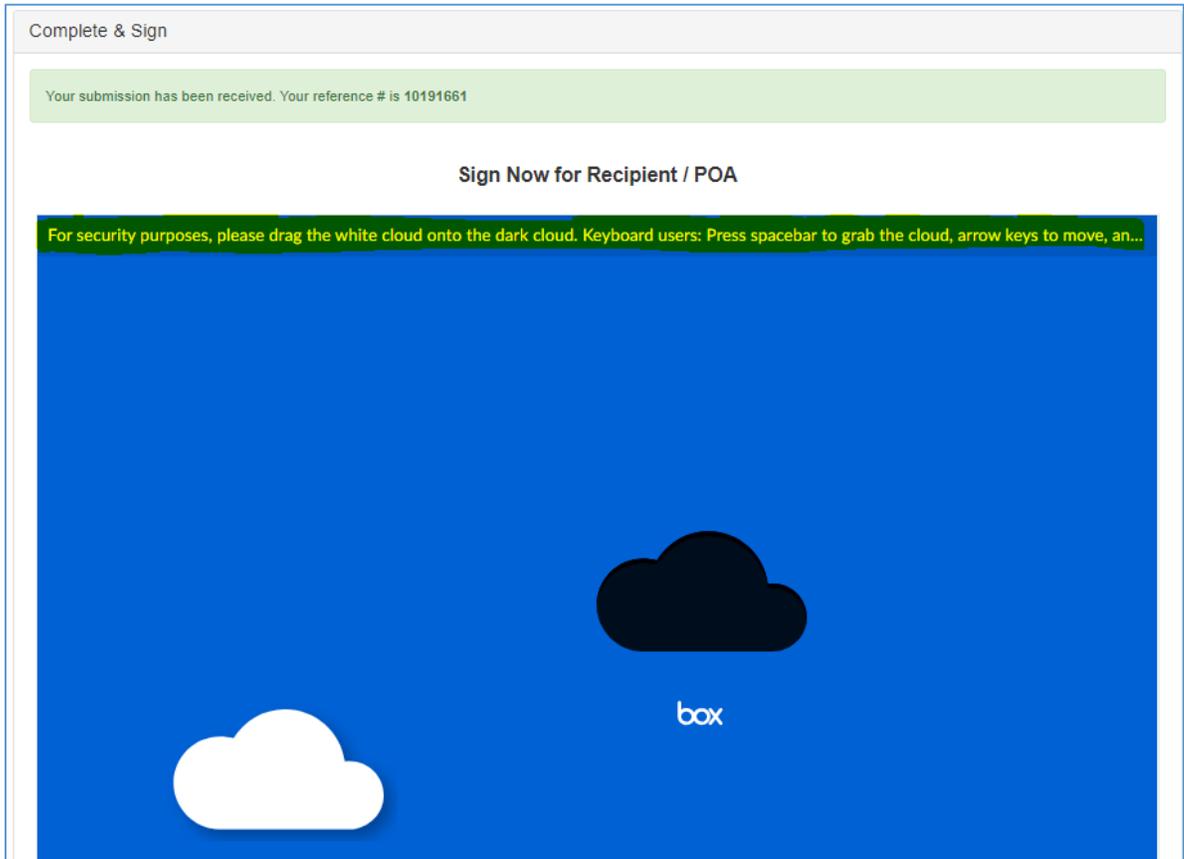
1. Funeral Recipient or their Power of Attorney if noted
2. Purchaser (if different from # 1)
3. Enroller

Please prepare to pass the device to the first signee so that they can complete their signatures.

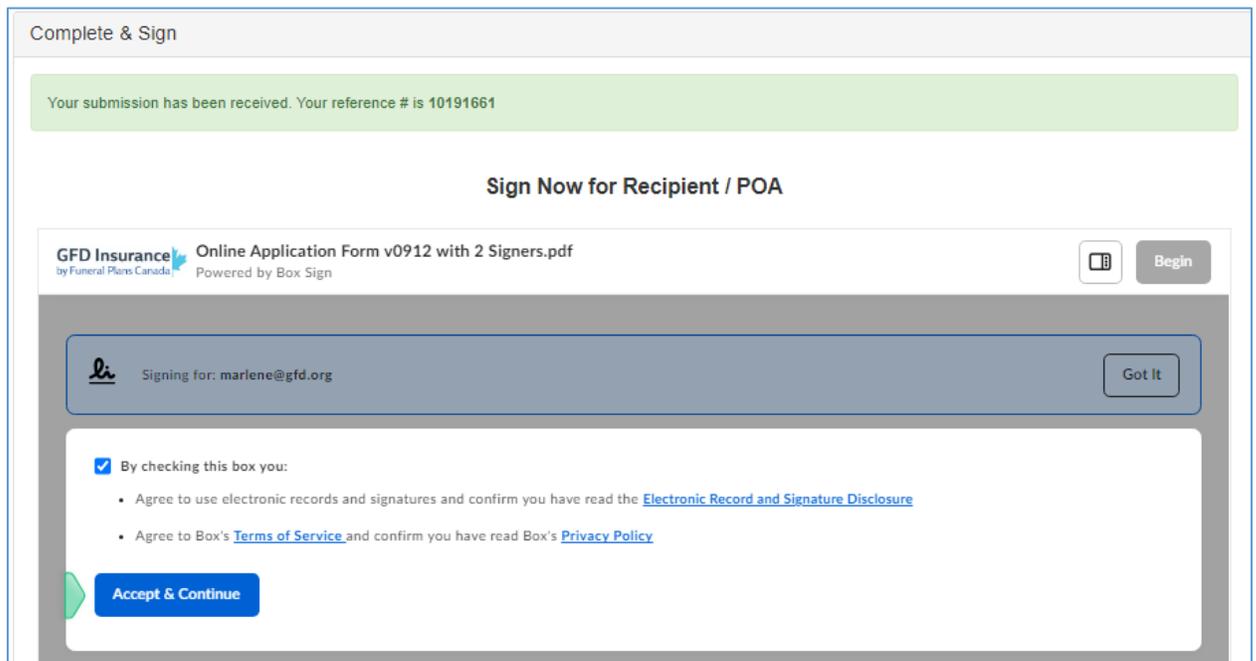
I/We agree that an electronic signature is the legal equivalent of a manual/handwritten signature on this document. By selecting "I/We agree" using any device, means, or action, I/We consent to the legally binding terms and conditions of this document.

Ready to Sign

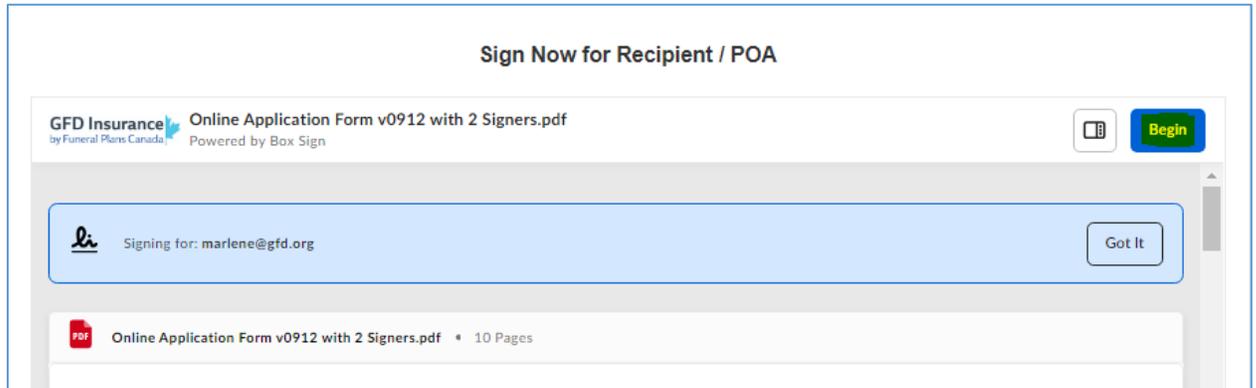
3. For security purposes, drag the white cloud over the black cloud to begin the signing process



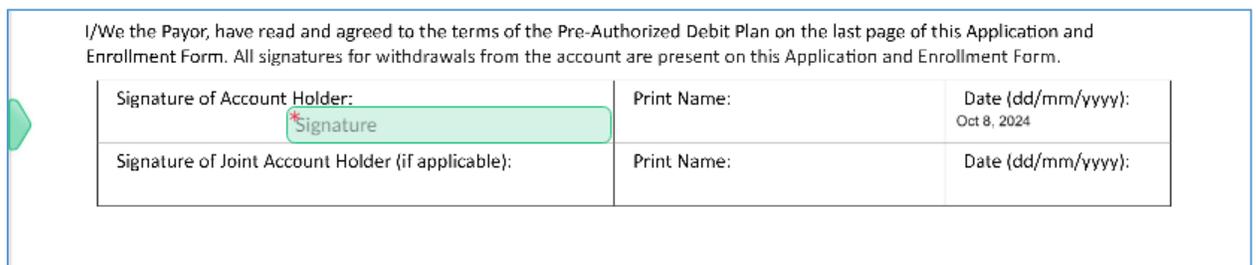
4. Check the box and Accept & Continue



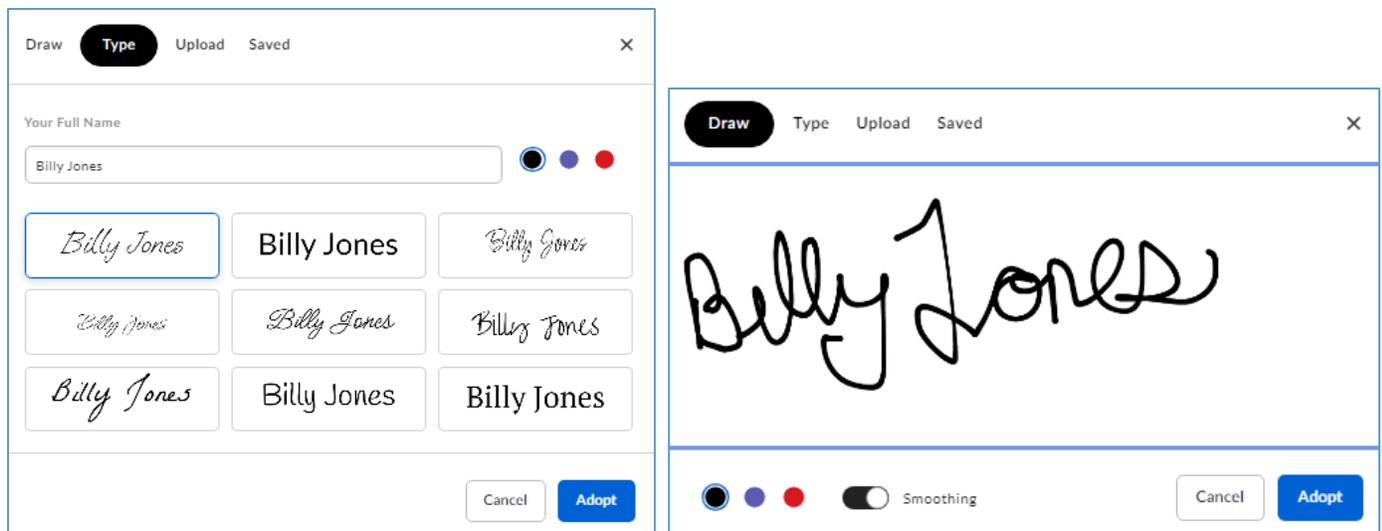
5. To begin signing the document, click the blue Begin button



6. This will take you to the first location in the document, where you need to sign



7. When you click on the signature, the following will pop-up – allowing you to choose if you want to type in your name to select a signature or draw your signature using a mouse or even on an iPad



8. Once you adopt a Signature, this will be used on all the required signature areas.
9. You will click next on the top of the screen, as there may be multiple signatures for the funeral recipient and / or purchaser.



GFD Insurance by Funeral Plans Canada Online Application Form v0912 with 2 Signers.pdf Powered by Box Sign

Payable By: Pre-authorized Debit (PAD) Credit Card (Visa or MasterCard) Cheque

Withdrawal Date Requested (PAD/MC/VISA only, must be within 30 days of due date): 1st 8th 15th 22nd

One time PAD/CC payment First premium paid by PAD/CC

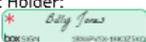
PRE-AUTHORIZED DEBIT ("PAD")

PAD Bank Account: VOID Cheque Uploaded to Application Banking Information Below

Type of Account: Chequing Savings

Payable By: _____
Name of Financial Institution: _____
Transit Number: _____
Bank Number: _____
Account Number: _____

I/We the Payor, have read and agreed to the terms of the Pre-Authorized Debit Plan on the last page of this Application and Enrollment Form. All signatures for withdrawals from the account are present on this Application and Enrollment Form.

Signature of Account Holder: 	Print Name:	Date (dd/mm/yyyy): Oct 8, 2024
Signature of Joint Account Holder (if applicable):	Print Name:	Date (dd/mm/yyyy):

10. Once you are taken to the bottom of the document where it says "Continue" you can click that button, and this will take you back to the cloud authentication.

GFD Insurance by Funeral Plans Canada Online Application Form v0912 with 2 Signers.pdf Powered by Box Sign

This Certificate is not a participating policy of us, is not entitled to any dividends and does not participate in the distribution of surplus or profits that may be declared by us.

This is the end of this Certificate.

PRE-AUTHORIZED DEBIT PLAN ("PAD")

The Equitable Life Insurance Company of Canada ("Equitable Life") and the financial institution of the payor set out in the Application and Enrollment Form are directed and authorized to process withdrawals from the payor's account on a monthly basis, subject to the conditions below, for the purpose of collecting premiums.

Withdrawal Information: In the event of non-payment due to insufficient funds (NSF), an attempt to re-draw your payment will automatically occur within 2 - 10 business days from the withdrawal date. The payor is responsible for any NSF charges incurred by their financial institution.

Type of Service: For the purposes of this agreement, PAD withdrawals from the

Limitation Period
Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act or other applicable legislation.

Entire Contract
The Application and Enrollment Form and this Certificate and any amendments shall constitute the entire contract between you and us. Only our President or one of our Executive Vice-Presidents may change, amend or waive the provisions of this Certificate in writing. No promise or representation made by a Funeral Provider or its representative or any other person that is contrary to this Certificate is binding on us or is of any effect.

No responsibility for funeral or cemetery goods and services

11. Next the Enroller will have to sign. For security purposes, drag the white cloud over the black cloud to begin the signing process

Sign Now for Enroller

For security purposes, please drag the white cloud onto the dark cloud. Keyboard users: Press spacebar to grab the cloud, arrow keys to move, an...



box



12. Check the box and Accept & Continue

Sign Now for Enroller

GFD Insurance Online Application Form v0912 with 2 Signers.pdf
by Funeral Plans Canada Powered by Box Sign



Begin



Signing for: netsuite@gfd.org

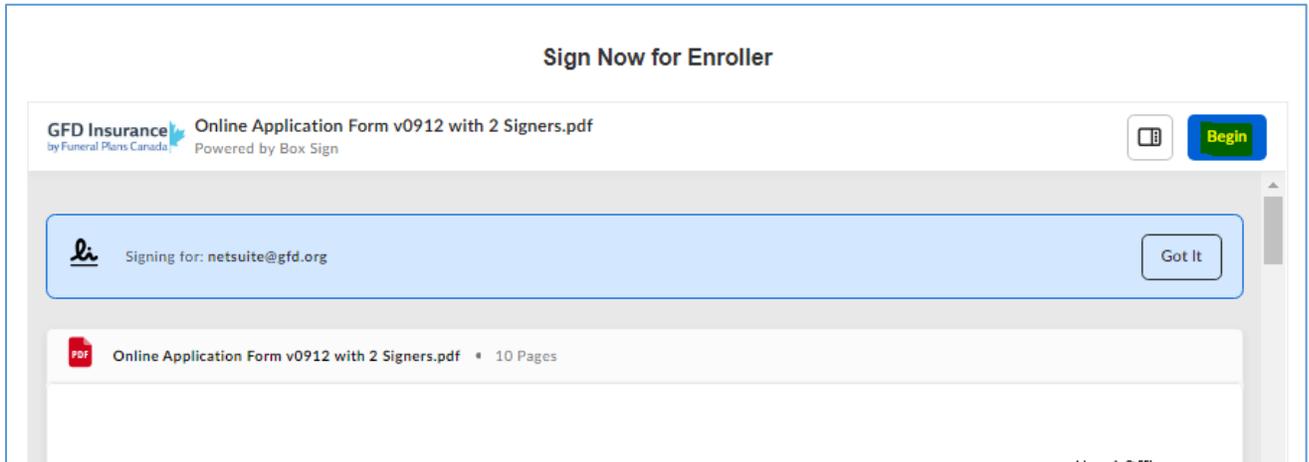
Got It

By checking this box you:

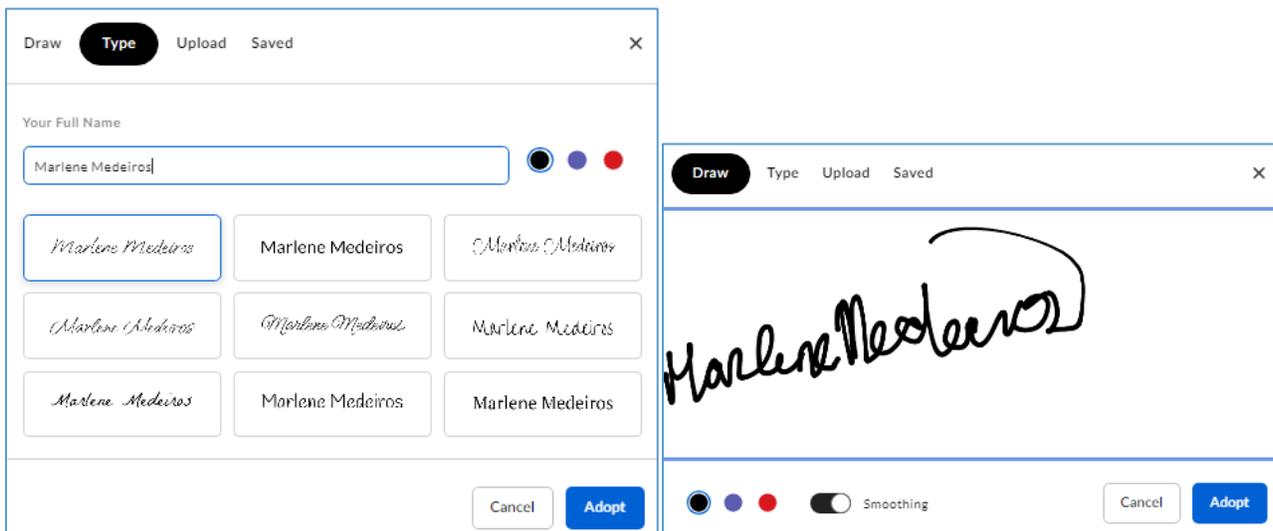
- Agree to use electronic records and signatures and confirm you have read the [Electronic Record and Signature Disclosure](#)
- Agree to Box's [Terms of Service](#) and confirm you have read Box's [Privacy Policy](#)

Accept & Continue

13. To begin signing the document, click the blue Begin button



14. When you click on the signature, the following will pop-up – allowing you to choose if you want to type in your name to select a signature or draw your signature using a mouse or tablet



15. Once you adopt a Signature, this will be used to sign the required field

16. Click on the signature line to sign > Click Sign & Finish



Sign Now for Enroller

GFD Insurance by Funeral Plans Canada Online Application Form v0912 with 2 Signers.pdf
Powered by Box Sign

Back Next **Sign & Finish**

DISCLOSURE STATEMENT AND CERTIFICATE

The insurance and Certificate being applied for is underwritten by Equitable, licensed to conduct business in all provinces and territories of Canada. The person soliciting this Application and Enrollment Form is either: a) an independent licensed life insurance broker representing Equitable through an independent agency; or, b) associated with a licensed funeral provider; and may receive compensation from Equitable if this Certificate is issued and comes into effect. The Funeral Recipient and the Purchaser (if named in Section C) are not obligated to transact any other insurance business with Equitable, the broker, the Funeral Provider or any other person or entity as a condition of this Application and Enrollment Form.

The Equitable Life Insurance Company of Canada has issued the Certificate pursuant to this Application and Enrollment Form. The Certificate consists of the pages attached to this Application and Enrollment Form, up to and including the page that states "This is the end of this Certificate". The Certificate is signed by the Funeral Provider's authorized representative and Enrollment Form, at the time it is provided to you, is not signed by the Funeral Provider's authorized representative.

Funeral Provider Representative:  Marlene Medeiros
Signature Print Name

This concludes the Sign Now Application Process

Complete & Sign

Your submission has been received. Your reference # is 10191661

What's next?

Once all parties have completed their electronic signature, you will receive a copy of the signed agreement.

If you have any questions or concerns please contact your member care team at the following number: [1.888.428.4444](tel:18884284444)

Click on the GFD Insurance by Funeral Plans Canada logo to return to the Home Page.

GFD Insurance by Funeral Plans Canada My Draft Applications User #123456789

Submit an Application (#10191661)

General Details Recipient & Purchaser Beneficiaries Payment Terms Payment Review **Submit Enrollment**

Complete & Sign

Your submission has been received. Your reference # is 10191661

What's next?

Once all parties have completed their electronic signature, you will receive a copy of the signed agreement.

If you have any questions or concerns please contact your member care team at the following number: [1.888.428.4444](tel:18884284444)

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REQUEST SIGNATURE STEPS (This process will be used when not all parties are available to sign)

1. Select No > Request Signature



General Details > Recipient & Purchaser > Beneficiaries > Payment Terms > Payment > Review > **Submit Enrollment**

Enrollment e-Signers

Funeral Recipient/Purchaser Bob Marley (marlene@gfd.org) - or -

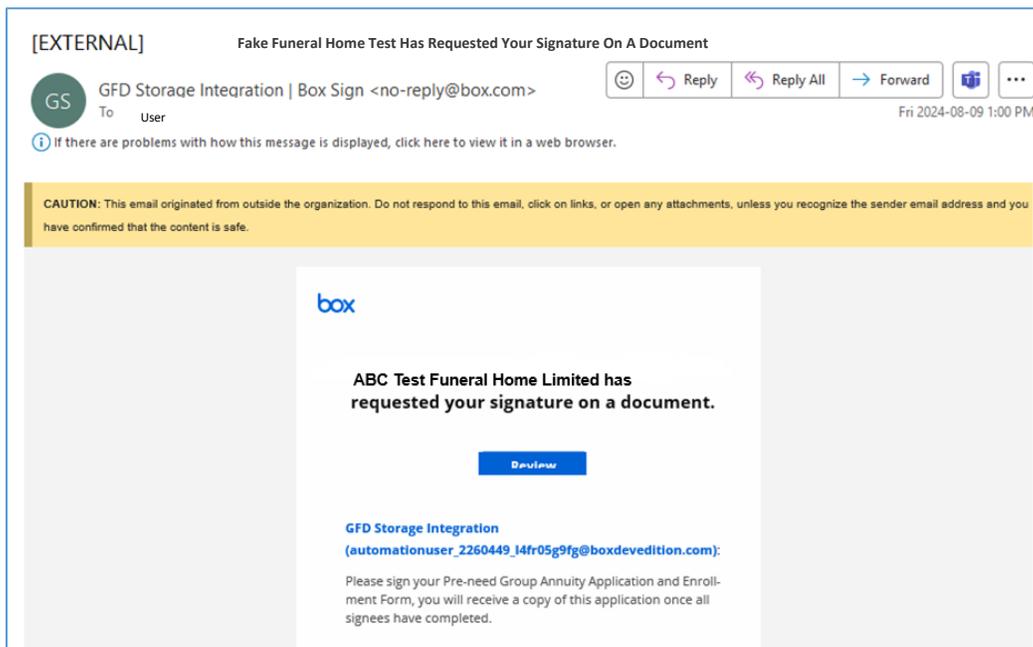
Are all signees physically present to sign this application now? (This includes the funeral recipient, purchaser (if named), power of attorney (if named), and the enroller. By indicating yes, the application will proceed to prompt the sign in person option. Otherwise you can request a signature and each signee will receive an email notification when the application is ready for them to sign)

Yes No

Request Signature

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- Each party will get an email once it is their turn to sign, the email will look something like this



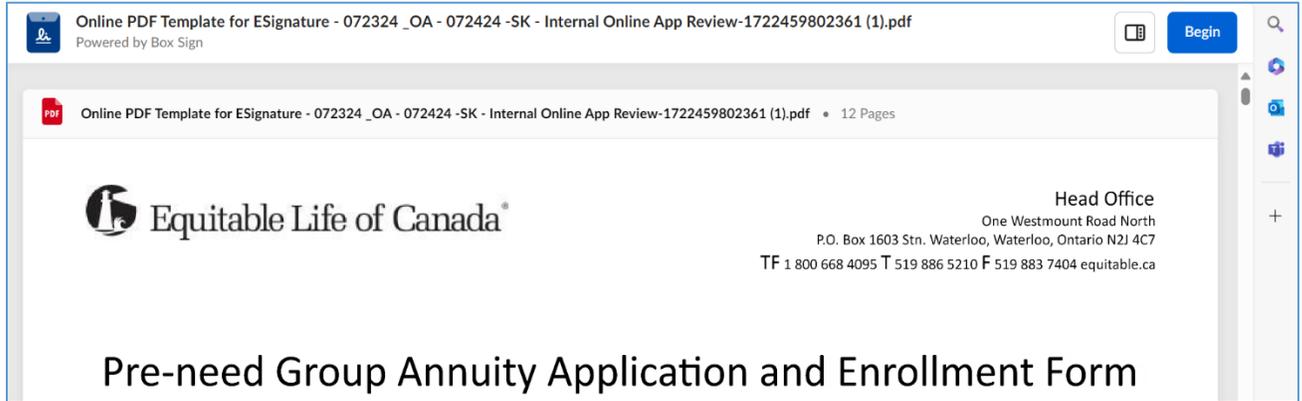
- Once the blue Review button in the email is clicked, the internet browser will open up to the document that needs to be signed.
- Prior to being able to sign the document, the terms must be checked and agreed to

By checking this box you:

- Agree to use electronic records and signatures and confirm you have read the [Electronic Record and Signature Disclosure](#)
- Agree to Box's [Terms of Service](#) and confirm you have read Box's [Privacy Policy](#)

Accept & Continue

- To begin signing the document, click the blue Begin button



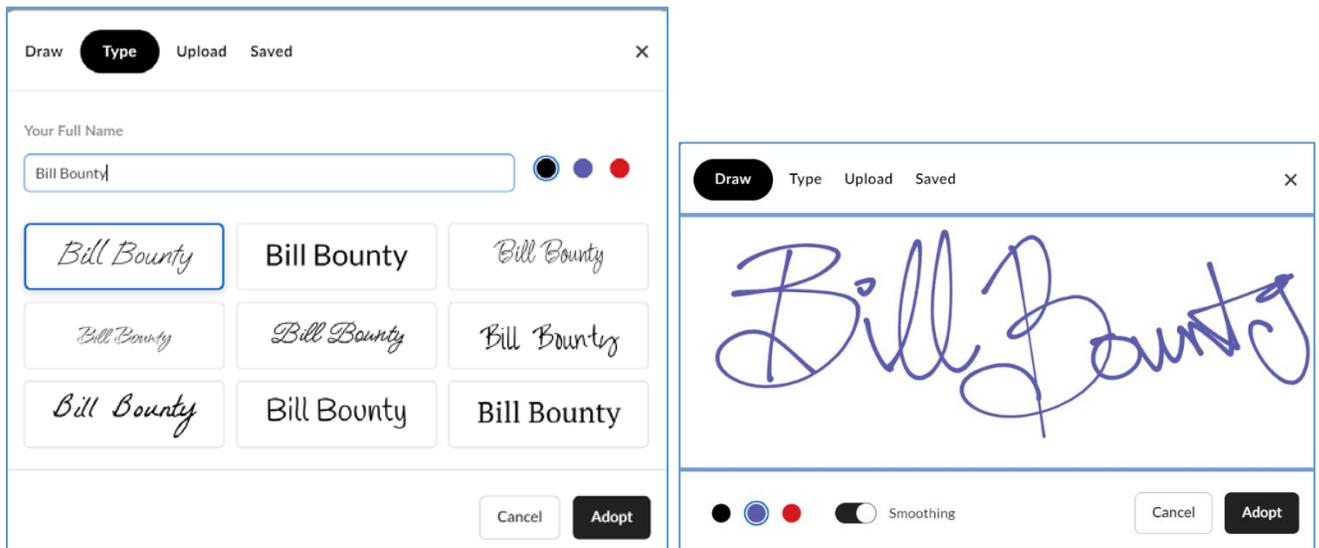
6. This will take you to the first location in the document, where you need to sign

AGREEMENT & SIGNATURES

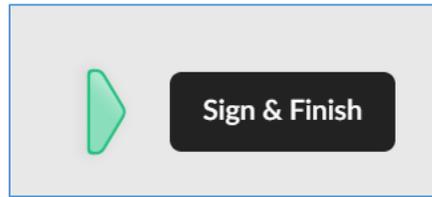
Signed at:		this	day	20
	<input type="text" value="*City"/>	<input type="text" value="*Province"/>	of	Aug 9, 2024
	(City)	(Province)	(Day)	(Month) (Year)
Funeral Recipient: (Must Sign)	<input type="text" value="*Signature"/>		Bill Bounty	Print Name
Purchaser: (if named above)	<input type="text" value="Signature"/>		Brenda Bounty	Print Name

9 / 12 198%

7. When you click on the signature, the following will pop-up – allowing you to choose if you want to type in your name to select a signature or draw your signature using a mouse or even on an iPad



8. You will click next on the top of the screen, as there may be multiple signatures for the funeral recipient and purchaser. Once you are taken to the bottom of the document where it says “Sign & Finish” you can click that button, and you have completed your part



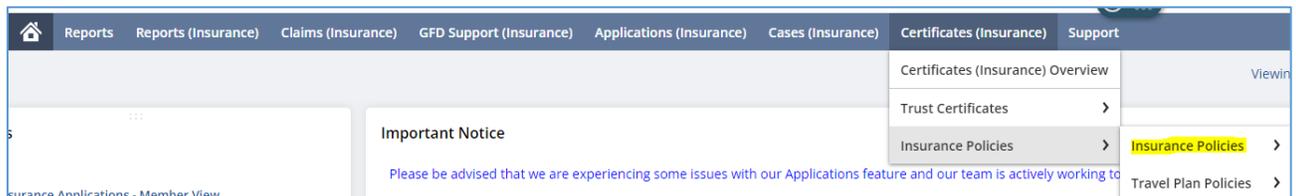
9. The next signee will now receive an email based on the signing order above, to sign.
This concludes the Request Signature Process once all signatures are received.

NOTES

- Recipient SIN, along with Purchaser SIN is a mandatory field, we will be working to remove the Recipient SIN as mandatory into phase 2.
- *Do not use the back button on browser, use the "Previous" button or tabs along the top of the application only, to toggle back and forth if required.

Member Case Request

- Navigate to the Insurance Policy List: Use the Certificates tab along the top of your home page, hover over Certificates > Insurance Policies - Insurance Policies ***Do Not click on search**



- Navigate to a policy – Click on the blue policy number (hyperlink)

POLICY #	STATUS	INSURANCE COMPANY	ISSUE DATE	LINKED POLICY #	BENEFICIARY	PURCHASER	FUNERAL HOME/ESTABLISHMENT	CONTRACT TYPE	FUNERAL COST (FACE)	PROGRAM #	LINE OF BUSINESS	PRY PLAN	BILL MODE	DOWN PAYMENT	BILL GROUP	ATTACH
1048185	Paid Up	Equitable Life of Canada	9/4/2024		522207 JESSICA JONES	522207 JESSICA JONES	Fake Funeral Home	Standard	5,000.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		
1048188	Paid Up	Equitable Life of Canada	9/4/2024	1048185	522207 JESSICA JONES	522207 JESSICA JONES	Fake Funeral Home	Standard	5,000.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		
1048189	Paid Up	Equitable Life of Canada	9/5/2024	1048179	522211 JOHN GROBAN	522211 JOHN GROBAN	Fake Funeral Home	Standard	10,500.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		

- Or you can use the filters to search for a specific policy

- When the policy opens, select the "Member Case Request" button along the top of the page

Insurance Policy

0279796

Paid in Full Letter Death Claim Cancellation Transfer Downgrade **Member Case Request** French 

Main

POLICY NUMBER 10279796 POLICY TYPE (DVO/OTHER AMOUNT) ACTIVATION DATE 9/9/2003

DATE CREATED 9/17/2024 11:56 am

STATUS Paid Up

- Select a Case Type > Certificate Changes

 **Case** 

Save 

Primary Information

NUMBER To Be Generated

SUBJECT *
0279796 - 521896 Mabel Proulx - Member Cas

INSURANCE POLICY 0279796

CASE CATEGORY Member Case Request

CASE TYPE *

- Certificate Changes
- Establishment Changes
- Payment Changes
- Reports & Requests
- Technical Requests

Case Message

ADDITIONAL INFORMATION

- Additional Information (mandatory field) please input instruction regarding request > Save

Case

Save

Primary Information

NUMBER To Be Generated	PRIORITY Intermittent/Medium
SUBJECT * 6971235 - 4978315 User - Member	FUNERAL HOME/ESTABLISHMENT Fake Funeral Home
INSURANCE POLICY 0279796	ASSIGNED TO

CASE CATEGORY: Member Case Request CASE TYPE: Certificate Changes

Case Message

ADDITIONAL INFORMATION

Please correct last name to PROULX

Any relevant files can be uploaded after the case is saved. 

Save

- Case Successfully Saved > Case number provided

 **Confirmation**
Case successfully Saved

Case

14142 | 6971235 - 4978315 User - Member Case Request A Basic Service 2012

Primary Information

NUMBER 14142	PRIORITY Intermittent/Medium
SUBJECT 0279796 - 521896 Mabel Proulx - Member Case Request <small>6971235 - 4978315 User - Member Case Request</small>	FUNERAL HOME/ESTABLISHMENT Fake Funeral Home
INSURANCE POLICY 0279796	ASSIGNED TO

CASE CATEGORY: Member Case Request CASE TYPE: Certificate Changes

- Files can be uploaded once your case has been saved
- Choose File > PDF, Word, JPEG > Click to Upload

Case Message

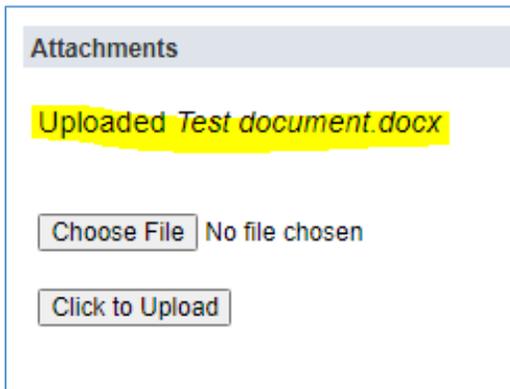
Please upload any relevant files if necessary. 

Attachments

No file chosen

-

- After uploading, the file name will be displayed

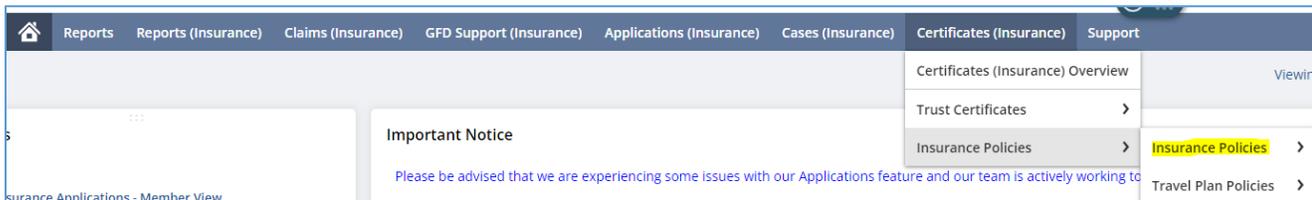


This concludes “Submitting a Member Case Request”

Death Claim

***Proof of death required on all Foresters policies and all Equitable policies over 10K.**

- Navigate to the Insurance Policy List: Use the Certificates tab along the top of your home page, hover over Certificates > Insurance Policies - Insurance Policies ***Do Not click on search**



- Navigate to policy – Click on the blue policy number (hyperlink)

POLICY #	STATUS	INSURANCE COMPANY	ISSUE DATE	LINKED POLICY #	BENEFICIARY	PURCHASER	FUNERAL HOME/ESTABLISHMENT	CONTRACT TYPE	FUNERAL COST (FACE)	PROGRAM #	LINE OF BUSINESS	PAY PLAN	BILL MODE	DOWN PAYMENT	BILL GROUP	ATTACH
1048165	Paid Up	Equitable Life of Canada	9/4/2024		522207 Jessica Jones	522207 Jessica Jones	Fake Funeral Home	Standard	5,000.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		
1048168	Paid Up	Equitable Life of Canada	9/4/2024	1048165	522207 Jessica Jones	522207 Jessica Jones	Fake Funeral Home	Standard	5,000.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		
1048169	Paid Up	Equitable Life of Canada	9/9/2024	1048179	522211 Josh Groban	522211 Josh Groban	Fake Funeral Home	Standard	10,500.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		

- Or you can use the filters to search for a specific policy

- When the policy opens, select “Death Claim” at the top of the page



Insurance Policy
1048163

Paid in Full Letter **Death Claim** Cancellation Transfer EPO Downgrade Upgrade Member Case Request French

Main

POLICY NUMBER 11048163	<input type="checkbox"/> POLICY TYPE (DVO/OTHER AMOUNT)	Linked	CLAIM PROCESSED
DATE CREATED 9/3/2024 8:48 pm		ACTIVATION DATE 9/3/2024	DATE OF DEATH (IF APPLICABLE)
STATUS Premium Paying			DATE OF CANCELLATION (IF APPLICABLE)
			LINKED POLICY # 1048164

- A new page will open, displaying your Death Claim Case
- Within the death claim case you can also obtain a Death Benefit Quote

Quote Details

Date of Death:

- Next you will enter a Death Date in the Death Claim section (this is a mandatory field)

Case

Primary Information

NUMBER To Be Generated	PRIORITY Intermittent/Medium	STATUS Open
SUBJECT * 1048163 - 522204 Brad Pitts - Death Claim	FUNERAL HOME/ESTABLISHMENT Fake Funeral Home	START DATE 9/24/2024
INSURANCE POLICY 1048163	LINKED POLICY 1048164	START TIME 3:50 pm
<input type="checkbox"/> DVO POLICY	ASSIGNED TO	
CASE CATEGORY Death Claim	CASE TYPE Claim Request	EMAIL(S) fake@gmail.com

Quote Form

Date of Death:

Death Claim

DEATH DATE *

CONTESTABLE CLAIM

BENEFICIARY
522204 Brad Pitts

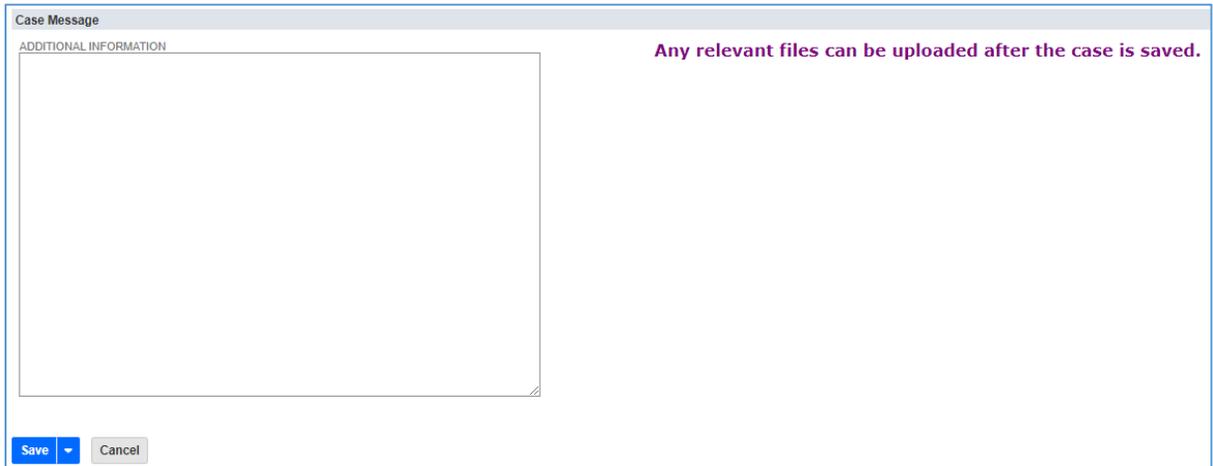
- Enter Additional Information (optional)
- Click Save

Case Message

ADDITIONAL INFORMATION

Any relevant files can be uploaded after the case is saved.

Save Cancel

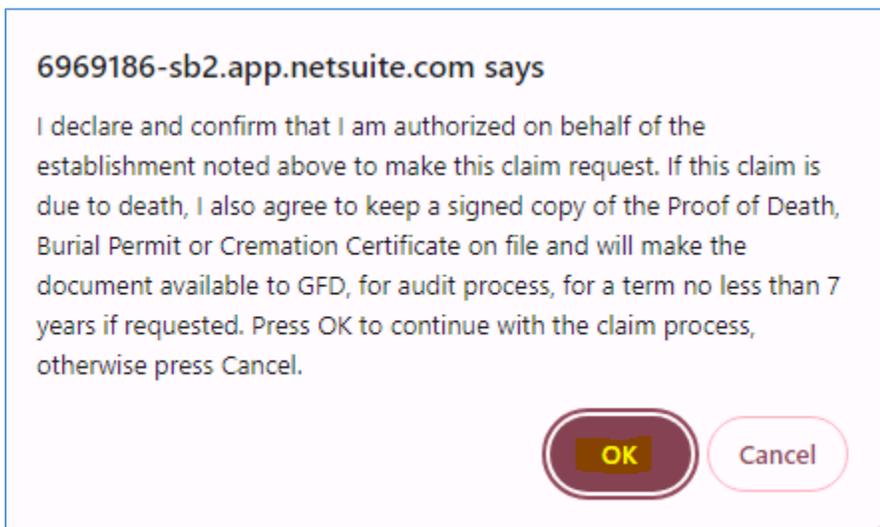


- A declaration will appear, which must be confirmed before proceeding. Click “OK” to continue

6969186-sb2.app.netsuite.com says

I declare and confirm that I am authorized on behalf of the establishment noted above to make this claim request. If this claim is due to death, I also agree to keep a signed copy of the Proof of Death, Burial Permit or Cremation Certificate on file and will make the document available to GFD, for audit process, for a term no less than 7 years if requested. Press OK to continue with the claim process, otherwise press Cancel.

OK Cancel

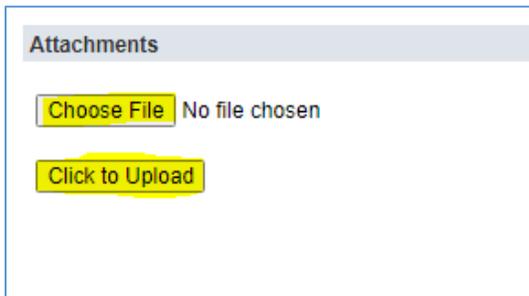


- Attach proof of death ***Proof of death required on all Foresters policies and all Equitable policies over 10K.**
- Files can be uploaded once your case has been saved
- Choose File > PDF, Word, JPEG > Click to Upload

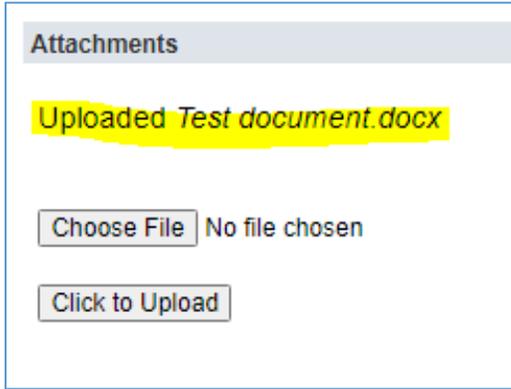
Attachments

Choose File No file chosen

Click to Upload



- After uploading, the file name will be displayed

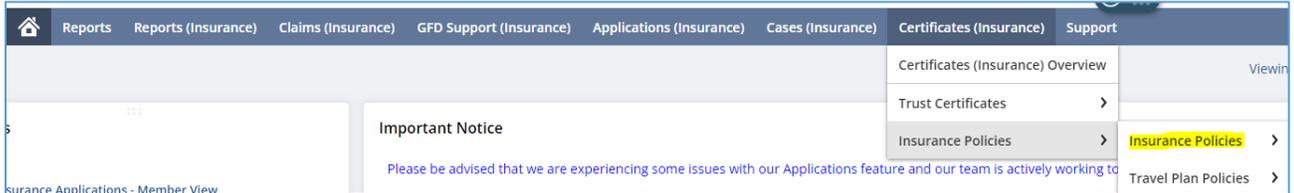


This concludes "Submitting a Death Claim"

Cancellation

PLEASE NOTE: Cancellation letter will be required to be uploaded on all Foresters policies and all Equitable policies over 10K

- Navigate to the Insurance Policy List: Use the Certificates tab along the top of your home page, hover over Certificates > Insurance Policies - Insurance Policies ***Do Not click search**



- Navigate to policy – Click on the blue policy number (hyperlink)

POLICY #	STATUS	INSURANCE COMPANY	ISSUE DATE	LINKED POLICY #	BENEFICIARY	PURCHASER	FUNERAL HOME/ESTABLISHMENT	CONTRACT TYPE	FUNERAL COST (FACE)	PROGRAM #	LINE OF BUSINESS	PAY PLAN	BILL MODE	DOWN PAYMENT	BILL GROUP	ATTN
1048185	Paid Up	Equitable Life of Canada	9/4/2024		522207 Jessica Jones	522207 Jessica Jones	Fake Funeral Home	Standard	5,000.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		
1048188	Paid Up	Equitable Life of Canada	9/4/2024	1048185	522207 Jessica Jones	522207 Jessica Jones	Fake Funeral Home	Standard	5,000.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		
1048189	Paid Up	Equitable Life of Canada	9/5/2024	1048179	522211 Josh Orban	522211 Josh Orban	Fake Funeral Home	Standard	10,500.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		

- Or you can use the filters to search for a specific policy

Insurance Policy List

[Edit View](#)

FILTERS

POLICY # ISSUE DATE FROM TO LOCATION # FIRST NAME LAST NAME

STATUS DEATH DATE FROM TO CANCEL DATE FROM TO

INSURANCE COMPANY STYLE

- When the policy opens, select "Cancellation" button at the top of the page



Insurance Policy
0258797

Death Quote RPU Quote Death Claim **Cancellation** Transfer RPU Member Case Request English

-
- Next you will indicate the method of payment, Pre-Authorized Debit or Personal Cheque

6971235 - 4978315 User - Member

Save ▾

Primary Information

NUMBER To Be Generated	PRIORITY Intermittent/Medium	EMAIL(S) test@gfd.com
SUBJECT 6971235 - 4978315 User - Member	FUNERAL HOME/ESTABLISHMENT Fake Funeral Home	STATUS Open
19*042*	ASSIGNED TO	START DATE START TIME 10/24/2024 5:01 pm
CASE CATEGORY Cancellation	CASE TYPE Cancellation Request	

Cancellation

CANCEL DATE CASH SURRENDER VALUE
10/24/2024 6,850.00 USE DIFFERENT ADDRESS

CURRENT PURCHASER
522153 Donnie Wahlberg

Payment Method ▾
Pre-Authorized Debit
Personal Cheque

Case Message

ADDITIONAL INFORMATION

Any relevant files can be uploaded after the case is saved.

Save ▾ **Cancel**

-
- For Pre-Authorized Debit, you will be required to enter the banking details

PAYMENT METHOD *
Pre-Authorized Debit ▾

INSTITUTION NUMBER (3 DIGITS) *

TRANSIT NUMBER (5 DIGITS) *

ACCOUNT NUMBER *

-
- Personal Cheque – A cheque will be mailed to the address on file

Cancellation

CANCEL DATE CASH SURRENDER VALUE
10/24/2024 6,850.00 USE DIFFERENT ADDRESS

CURRENT PURCHASER
522153 Donnie Wahlberg

Payment Method ▾
Personal Cheque

-
- To enter a different address, please select “Use Different Address” and provide the necessary details.



USE DIFFERENT ADDRESS

PAYEE ADDRESS *

-
- Enter any additional information (optional)
- Files can be uploaded once your case has been saved
- Click Save when done

Case Message

ADDITIONAL INFORMATION

Any relevant files can be uploaded after the case is saved.

Save Cancel

-
- A declaration will appear, which must be confirmed before proceeding. Click "OK" to continue

6969186-sb2.app.netsuite.com says

I declare and confirm that I am authorized on behalf of the establishment noted above to make this cancellation request. I also agree to keep a signed copy of the cancellation letter and any other supporting documents on file and will make the document available to GFD, for audit process, for a term no less than 7 years if requested. Press OK to continue with the cancellation process, otherwise press Cancel.

OK Cancel

-
- Once you confirm the declaration, you will receive confirmation of case number
- **Cancellation letter will be required to be uploaded on all Foresters policies and all Equitable policies over 10K**

Cancellation over 10K and Foresters policies

14408 1048243 - 527632 Peter Parker - Cancellation Felicia Funeral Home Parent : Felicia Funeral Home Child (ON)

Primary Information

NUMBER: 14408	PROPERTY: Intermediate/Medium
SUBJECT: 1048243 - 527632 Peter Parker - Cancellation	POLICY ADDRESS/ESTABLISHMENT: Felicia Funeral Home Parent : Felicia Funeral Home Child (ON)
INSURANCE POLICY: 1048243	ADDRESS TO: Digi
CASE CATEGORY: Cancellation	CASE TYPE: Cancellation-Request

Cancellation

CANCEL DATE: 04/04/2024 15:00:00	USE CURRENT ADDRESS: <input type="checkbox"/>
CURRENT PURCHASER: 527632 Peter Parker	NAME FOR CLAIM (OPTIONAL): 527632 Peter Parker

Case Message

Please upload cancellation letter.

Attachments

Choose File No file chosen

Click to Upload

- Equitable policies under 10K

Case Message

Please upload any relevant files if necessary.

Attachments

Choose File No file chosen

Click to Upload

- Files can be uploaded once your case has been saved
- Choose File > PDF, Word, JPEG > Click to Upload

Attachments

Choose File No file chosen

Click to Upload

- After uploading, the file name will be displayed

Attachments

Uploaded Test document.docx

Choose File No file chosen

Click to Upload

This concludes the Cancellation process



Transfer

- Navigate to the Insurance Policy List: Use the Certificates tab along the top of your home page, hover over Certificates > Insurance Policies - Insurance Policies ***Do not click on search**

Reports Reports (Insurance) Claims (Insurance) GFD Support (Insurance) Applications (Insurance) Cases (Insurance) Certificates (Insurance) Support

Certificates (Insurance) Overview Viewin

Trust Certificates >

Insurance Policies > **Insurance Policies** >

Travel Plan Policies >

Important Notice

Please be advised that we are experiencing some issues with our Applications feature and our team is actively working to

Insurance Applications - Member View

- Navigate to policy – Click on the blue policy number (hyperlink)

POLICY #	STATUS	INSURANCE COMPANY	ISSUE DATE	LINKED POLICY #	BENEFICIARY	PURCHASER	FUNERAL HOME/ESTABLISHMENT	CONTRACT TYPE	FUNERAL COST (FACE)	PROGRAM #	LINE OF BUSINESS	PAY PLAN	BILL MODE	DOWN PAYMENT	BILL GROUP	ATTN
1048186	Paid Up	Equitable Life of Canada	9/4/2024		522207 Jessica Jones	522207 Jessica Jones	Fake Funeral Home	Standard	5,000.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		
1048188	Paid Up	Equitable Life of Canada	9/4/2024	1048186	522207 Jessica Jones	522207 Jessica Jones	Fake Funeral Home	Standard	5,000.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		
1048189	Paid Up	Equitable Life of Canada	9/5/2024	1048179	522211 Josh Gordon	522211 Josh Gordon	Fake Funeral Home	Standard	10,500.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		

- Or you can use the filters to search for a specific policy

Insurance Policy List

Edit View

FILTERS

POLICY # ISSUE DATE FROM TO LOCATION # FIRST NAME LAST NAME

STATUS DEATH DATE FROM TO CANCEL DATE FROM TO

INSURANCE COMPANY STYLE

- When the policy opens, select “Transfer” button at the top of the page

Insurance Policy

1025027A

Paid in Full Letter Death Claim Cancellation **Transfer** Downgrade Upgrade Member Case Request French

Main

POLICY NUMBER 11025027A POLICY TYPE (DVO/OTHER AMOUNT) ACTIVATION DATE 7/6/2020

DATE CREATED 9/21/2024 10:34 am

STATUS Paid Up

- Enter the Funeral Home name and address, to be transferred to (mandatory fields)

Case

Save

Primary Information

NUMBER To Be Generated PRIORITY Intermittent/Medium

SUBJECT * 6971235 - 4978315 User - Member Case Request FUNERAL HOME/ESTABLISHMENT Fake Funeral Home

INSURANCE POLICY 1025027A ASSIGNED TO

CASE CATEGORY CASE TYPE Transfer Transfer Request

Transfer

FUNERAL HOME NAME *

FUNERAL HOME ADDRESS *



- Enter Additional Information (optional)
- Click Save

Case Message

ADDITIONAL INFORMATION

Any relevant files can be uploaded after the case is saved.

Save Cancel

- Case confirmation is created

Case

14134 1 6971235 – 4978315 User – Transfer Fake Funeral Home 2012

Primary Information

NUMBER 14134	PRIORITY Intermittent/Medium
SUBJECT 6971235 – 4978315 User – Member Case Transfer	FUNERAL HOME/ESTABLISHMENT Fake Funeral Home
1025027A	ASSIGNED TO
CASE CATEGORY Transfer	CASE TYPE Transfer Request

Transfer

FUNERAL HOME NAME Mackey Funeral HOM	FUNERAL HOME ADDRESS 123 fake street
---	---

- Files can be uploaded once your case has been saved (optional)
- Choose File > PDF, Word, JPEG > Click to Upload

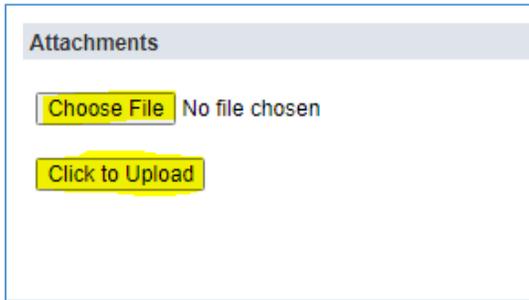
Case Message

Please upload any relevant files if necessary.

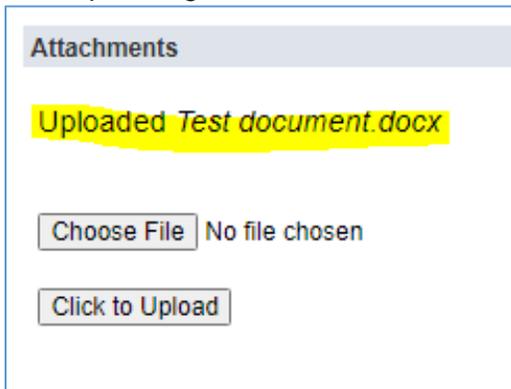
Attachments

Choose File No file chosen

Click to Upload



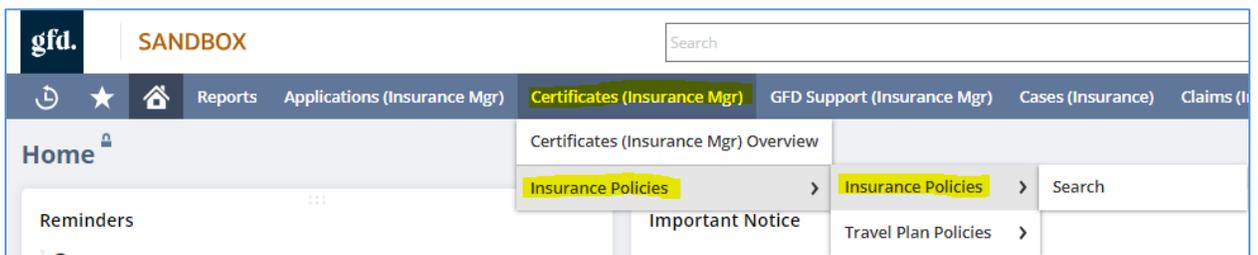
- After uploading, the file name will be displayed



This concludes "Submitting a Transfer Request"

Early Pay Out

- Navigate to the Insurance Policy List: Use the Certificates tab along the top of your home page, hover over Certificates > Insurance Policies - Insurance Policies ***Do Not click on search**



- Navigate to policy – Click on the blue policy number (hyperlink)
- Or you can use the filters to search for a specific policy
- Click on the + symbol next to the word FILTERS if fields are not displayed

Insurance Policy List

Edit View

FILTERS

SHOW INACTIVES EDIT

	POLICY # ▲	STATUS	INSURANCE COMPANY	ISSUE DATE	LINKED POLICY #
NEW	1050121	Premium Paying	Equitable Life of Canada	10/7/2024	
NEW	1050125	Premium Paying	Equitable Life of Canada	10/7/2024	
NEW	1050130	Premium Paying	Equitable Life of Canada	10/7/2024	
NEW	1050189	Paid Up	Equitable Life of Canada	10/13/2024	
Total					

Insurance Policy List

Edit View List Search Audit Trail

FILTERS

POLICY # ISSUE DATE FROM TO LOCATION # FIRST NAME LAST NAME STATUS

DEATH DATE FROM TO CANCEL DATE FROM TO INSURANCE COMPANY STYLE

SHOW INACTIVES EDIT

POLICY #	STATUS	INSURANCE COMPANY	ISSUE DATE	LINKED POLICY #	BENEFICIARY	PURCHASER	FUNERAL HOME/ESTABLISHMENT	CONTRACT TYPE	FUNERAL COST	PROGRAM #	DATE OF BIRTH	PAY PLAN	BILL MODE	DOWN PAYMENT	BILL GROUP	ATTACHED ASB
NEW 1050121	Premium Paying	Equitable Life of Canada	10/7/2024		528904 Olivia Paisley	528904 Olivia Paisley	Funeral Home F	Standard	10,000.00	65	Active 1222 JA	15 Pay	Monthly	0.00		72
NEW 1050125	Premium Paying	Equitable Life of Canada	10/7/2024		528909 Quentin Rogers	528909 Quentin Rogers	Funeral Home F	Standard	15,000.00	65	Active 1222 JA	15 Pay	Monthly	0.00		64
NEW 1050130	Premium Paying	Equitable Life of Canada	10/7/2024		528914 Shirley Topps	528914 Shirley Topps	Funeral Home F	Standard	6,000.00	65	Active 1222 JA	10 Pay	Quarterly	0.00		45
NEW 1050189	Paid Up	Equitable Life of Canada	10/13/2024		528899 Mary Neilman	528899 Mary Neilman	Funeral Home F	Standard	7,500.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		63
Total									38,500.00				0.00		244	

- When the policy opens, select the "EPO" button along the top of your page

Insurance Policy

1050130

Death Quote RPU Quote Death Claim Cancellation Transfer **EPO** RPU Member Case Request French

- A new page will open, displaying your EPO case.
- EPO amount and admin fee will be displayed (Admin fee applies after 90 days)

Case

Save

Primary Information

NUMBER: To Be Generated PRIORITY: Intermittent/Medium EMAIL(S): email@gfd.org

SUBJECT: 1050130 - 528914 Shirley Topps - Early Pay Out FUNERAL HOME/ESTABLISHMENT: Funeral Home F STATUS: Open

INSURANCE POLICY: 1050130 DVO POLICY LINKED POLICY: ASSIGNED TO START DATE: 10/25/2024 START TIME: 7:26 am

CASE CATEGORY: Early Pay Out CASE TYPE: EPO Request

Early Pay Out

CURRENT PURCHASER (INSURANCE): 528914 Shirley Topps EPO AMOUNT: 5,766.84 PAYMENT METHOD:

CURRENT PURCHASER ADDRESS (INSURANCE): Shirley Topps, 2844 Bristol Cir, Oakville ON L6H 6G4, Canada EPO ADMIN FEE: 0.00

Case Message

ADDITIONAL INFORMATION:

Any relevant files can be uploaded after the case is saved.

- Select the method of payment

PAYMENT METHOD *

- Pre-Authorized Debit
- Personal Cheque
- Credit Card

-
- Enter Additional Information (optional)
- Click Save

Case Message

ADDITIONAL INFORMATION

Any relevant files can be uploaded after the case is saved.

Save

-
- Case confirmation is created

 **Confirmation**
Case successfully Saved

 **Case**

14419 1050121 - 528904 Olivia Paisley - Early Pay Out Funeral Home F

Primary Information

NUMBER 14419	PRIORITY Intermittent/Medium
SUBJECT 1050121 - 528904 Olivia Paisley - Early Pay Out	FUNERAL HOME/ESTABLISHMENT Funeral Home F
INSURANCE POLICY 1050121 <input type="checkbox"/> DVO POLICY <input type="checkbox"/> LINKED POLICY	ASSIGNED TO
CASE CATEGORY Early Pay Out	CASE TYPE EPO Request

-
- Files can be uploaded once your case has been saved (optional)
- Choose File > PDF, Word, JPEG > Click to Upload

Case Message

Please upload any relevant files if necessary.

Attachments

Choose File No file chosen

Click to Upload

-

Attachments

Choose File No file chosen

Click to Upload

- After uploading, the file name will be displayed

Attachments

Uploaded *Test document.docx*

Choose File No file chosen

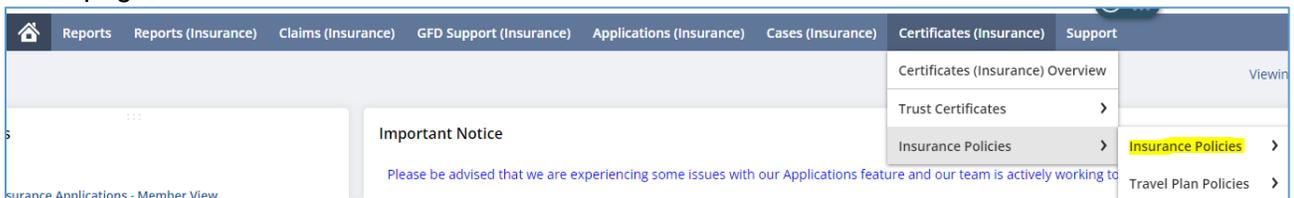
Click to Upload

-

This concludes processing an Early Payout

Reduced Paid Up

- Navigate to the Insurance Policy List: Use the Certificates tab along the top of your home page, hover over Certificates > Insurance Policies - Insurance Policies



- Use the filters to search for a specific policy



Insurance Policy List

Edit View

FRTERS

POLICY # _____ ISSUE DATE _____ FROM _____ TO _____ LOCATION # _____ FIRST NAME _____ LAST NAME _____

STATUS: - All - DEATH DATE: _____ FROM _____ TO _____ CANCEL DATE: _____ FROM _____ TO _____

INSURANCE COMPANY: - All - STYLE: Normal

-
- Navigate to policy – Click on the blue policy number (hyperlink)

POLICY #	STATUS	INSURANCE COMPANY	ISSUE DATE	LINKED POLICY #	BENEFICIARY	PURCHASER	FUNERAL HOME/ESTABLISHMENT	CONTRACT TYPE	FUNERAL COST (FACE)	PROGRAM #	LINE OF BUSINESS	PAY PLAN	BILL MODE	DOWN PAYMENT	BILL GROUP	ATTN
1048186	Paid Up	Equitable Life of Canada	9/4/2024		522207 JESSICA JONES	522207 JESSICA JONES	Fake Funeral Home	Standard	5,000.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		
1048188	Paid Up	Equitable Life of Canada	9/4/2024	1048185	522207 JESSICA JONES	522207 JESSICA JONES	Fake Funeral Home	Standard	5,000.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		
1048189	Paid Up	Equitable Life of Canada	9/5/2024	1048179	522211 JOHN GROBAN	522211 JOHN GROBAN	Fake Funeral Home	Standard	10,500.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		

-
- When the policy opens, select the “RPU” button along the top of your page

Insurance Policy

1050125

Death Quote RPU Quote Death Claim Cancellation Transfer EPO **RPU** Member Case Request French

-
- A new page will open, displaying your RPU case.

Case

Save

Primary Information

NUMBER: To Be Generated PRIORITY: Intermittent/Medium EMAIL(S): test@gfd.org

SUBJECT: 1050125 - 528909 Quentin Rogers - Reduced Paid Up FUNERAL HOME/ESTABLISHMENT: Funeral Home F STATUS: Open

INSURANCE POLICY: 1050125 ASSIGNED TO: START DATE: 10/28/2024 START TIME: 8:06 am

CASE CATEGORY: Reduced Paid Up CASE TYPE: RPU Request

Reduced Paid Up

Date of RPU: mm/dd/yyyy

RPU

Case Message

ADDITIONAL INFORMATION

-
- Enter current date for RPU value

Reduced Paid Up

Date of RPU: 10/28/2024

RPU

Date of RPU: 10/28/2024

Account Value: \$83.42

RPU Original Amount: \$15,000.00

RPU Adj.: -\$14,916.58

-
- The account value displayed reflects the remaining balance on this policy
- Enter Additional Information (optional)
- Click Save

Case Message

ADDITIONAL INFORMATION

Any relevant files can be uploaded after the case is saved.

Save Cancel

- Case confirmation is created

 **Confirmation**
Case successfully Saved

 **Case**

14420 1050125 - 528909 Quentin Rogers - Reduced Paid Up Funeral Home F

Primary Information

NUMBER	14420	PRIORITY	Intermittent/Medium
SUBJECT	1050125 - 528909 Quentin Rogers - Reduced Paid Up	FUNERAL HOME/ESTABLISHMENT	Funeral Home F
INSURANCE POLICY	1050125	ASSIGNED TO	
CASE CATEGORY	Reduced Paid Up	CASE TYPE	RPU Request

- Files can be uploaded once your case has been saved (optional)
- Choose File > PDF, Word, JPEG > Click to Upload

Case Message

Please upload any relevant files if necessary.

Attachments

Choose File No file chosen

Click to Upload

-

Attachments

Choose File No file chosen

Click to Upload

- After uploading, the file name will be displayed

Attachments

Uploaded Test document.docx

Choose File No file chosen

Click to Upload

This concludes the process of a Reduced Paid Up

Downgrade

- Navigate to the Insurance Policy List: Use the Certificates tab along the top of your home page, hover over Certificates > Insurance Policies - Insurance Policies

Navigation menu: Reports, Reports (Insurance), Claims (Insurance), GFD Support (Insurance), Applications (Insurance), Cases (Insurance), Certificates (Insurance), Support

Sub-menu: Certificates (Insurance) Overview, Trust Certificates, Insurance Policies (highlighted), Travel Plan Policies

Important Notice: Please be advised that we are experiencing some issues with our Applications feature and our team is actively working to resolve them.

- Use the filters to search for a specific policy

Insurance Policy List

EDIT VIEW

FILTERS

POLICY # [] ISSUE DATE [] FROM [] TO [] LOCATION # [] FIRST NAME [] LAST NAME []

STATUS [-All -] DEATH DATE [] FROM [] TO [] CANCEL DATE [] FROM [] TO []

INSURANCE COMPANY [-All -] STYLE [Normal]

- Navigate to policy – Click on the blue policy number (hyperlink)

POLICY #	STATUS	INSURANCE COMPANY	ISSUE DATE	LINKED POLICY #	BENEFICIARY	PURCHASER	FUNERAL HOME/ESTABLISHMENT	CONTRACT TYPE	FUNERAL COST (FACE)	PROGRAM #	LINE OF BUSINESS	PAID PLAN	BILL MODE	DOWN PAYMENT	BILL GROUP	ATTACH
1048186	Paid Up	Equitable Life of Canada	9/4/2024		522207 Jessica Jones	522207 Jessica Jones	Fake Funeral Home	Standard	5,000.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		
1048188	Paid Up	Equitable Life of Canada	9/4/2024	1048185	522207 Jessica Jones	522207 Jessica Jones	Fake Funeral Home	Standard	5,000.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		
1048189	Paid Up	Equitable Life of Canada	9/5/2024	1048179	522211 Joann Graham	522211 Joann Graham	Fake Funeral Home	Standard	10,500.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		

- When the policy opens, select the “Downgrade” button along the top of your page

Insurance Policy

1050189

Death Quote | Paid in Full Letter | Death Claim | Cancellation | Transfer | **Downgrade** | Upgrade | Member Case Request | French |



- A new page will open, displaying your Downgrade case.

The screenshot shows a web interface for a 'Case'. At the top, there is a 'Save' button and a search icon. Below this is the 'Primary Information' section, which includes fields for NUMBER (To Be Generated), SUBJECT (1050189 - 528899 Mary Neiman - Downgrade), INSURANCE POLICY (1050189), CASE CATEGORY (Downgrade), CASE TYPE (Certificate Changes), PRIORITY (Intermittent/Medium), FUNERAL HOME/ESTABLISHMENT (Funeral Home F), ASSIGNED TO, EMAIL(S) (test@gfd.org), STATUS (Open), and START DATE / START TIME (10/28/2024 8:20 am). The 'Downgrade' section contains a 'NEW FUNERAL COST (DOWNGRADE) *' field with a value of 6,500.00, a 'MODAL PAID' field with a value of 7,500.00, a 'CURRENT PURCHASER (INSURANCE)' dropdown menu with '528899 Mary Neiman' selected, and a 'CURRENT PURCHASER ADDRESS (INSURANCE)' field with the address: 'Mary Neiman, 2844 Bristol Cir, Oakville ON L6H 6G4, Canada'. There is also a 'CASE BILL METHOD *' dropdown menu. A message at the bottom states: 'Any relevant files can be uploaded after the case is saved.'

-
- Enter the "New" Funeral cost

This close-up shows the 'Downgrade' section. The 'NEW FUNERAL COST (DOWNGRADE) *' field is highlighted in yellow and contains the value '6,500.00'. The 'MODAL PAID' field shows '7,500.00'. Below these are the 'CURRENT PURCHASER (INSURANCE)' dropdown menu with '528899 Mary Neiman' selected, and the 'CURRENT PURCHASER ADDRESS (INSURANCE)' field with the address: 'Mary Neiman, 2844 Bristol Cir, Oakville ON L6H 6G4, Canada'.

-
- Select the payment method to which funds will be returned

This close-up shows the 'CASE BILL METHOD *' dropdown menu. The menu is open, showing two options: 'Pre-Authorized Debit' and 'Personal Cheque'. The 'Pre-Authorized Debit' option is currently selected. To the left of the dropdown is a checkbox labeled 'USE DIFFERENT ADDRESS' which is unchecked.

-
- Pre-Authorized Debit – Enter banking details

This close-up shows the banking details form. The 'CASE BILL METHOD *' dropdown menu is set to 'Pre-Authorized Debit'. Below it are three input fields: 'INSTITUTION NUMBER *', 'TRANSIT NUMBER *', and 'ACCOUNT NUMBER *', all of which are currently empty.

-
- Personal Cheque – Will be mailed to the address on file



USE DIFFERENT ADDRESS

CASE BILL METHOD *
Personal Cheque

-
- To use a different address, select “Use Different Address” and enter preferred address

USE DIFFERENT ADDRESS

PAYEE ADDRESS *

123 Fake Street
Ottawa, ON
L9H 2J4

-
- Enter Additional Information (optional)
- Click Save

Case Message

ADDITIONAL INFORMATION

Any relevant files can be uploaded after the case is saved.

Save Cancel

-
- Case confirmation is created

Confirmation
Case successfully Saved

Case 🔍

14421 1050189 - 528899 Mary Neiman - Downgrade Funeral Home F

▼ **Primary Information**

NUMBER 14421	PRIORITY Intermittent/Medium
SUBJECT 1050189 - 528899 Mary Neiman - Downgrade	FUNERAL HOME/ESTABLISHMENT Funeral Home F
INSURANCE POLICY 1050189	ASSIGNED TO
CASE CATEGORY Downgrade	CASE TYPE Certificate Changes

-
- Files can be uploaded once your case has been saved (optional)
- Choose File > PDF, Word, JPEG > Click to Upload

▼ Case Message

Please upload any relevant files if necessary.

▼ Attachments

Choose File No file chosen

Click to Upload

-

Attachments

Choose File No file chosen

Click to Upload

- After uploading, the file name will be displayed

Attachments

Uploaded *Test document.docx*

Choose File No file chosen

Click to Upload

-

This concludes the process of a Downgrade

Upgrade

- Navigate to the Insurance Policy List: Use the Certificates tab along the top of your home page, hover over Certificates > Insurance Policies - Insurance Policies

The screenshot shows a navigation menu with the following items: Reports, Reports (Insurance), Claims (Insurance), GFD Support (Insurance), Applications (Insurance), Cases (Insurance), Certificates (Insurance), and Support. The Certificates (Insurance) dropdown menu is open, showing: Certificates (Insurance) Overview, Trust Certificates, Insurance Policies (highlighted), and Travel Plan Policies. The Insurance Policies item is highlighted in yellow.

- Use the filters to search for a specific policy



Insurance Policy List

Edit View

FRTERS

POLICY # [] ISSUE DATE [] FROM [] TO [] LOCATION # [] FIRST NAME [] LAST NAME []

STATUS [] DEATH DATE [] FROM [] TO [] CANCEL DATE [] FROM [] TO []

INSURANCE COMPANY [] STYLE []

-
- Navigate to policy – Click on the blue policy number (hyperlink)

POLICY #	STATUS	INSURANCE COMPANY	ISSUE DATE	LINKED POLICY #	BENEFICIARY	PURCHASER	FUNERAL HOME/ESTABLISHMENT	CONTRACT TYPE	FUNERAL COST (FACE)	PROGRAM #	LINE OF BUSINESS	PAY PLAN	BILL MODE	DOWN PAYMENT	BILL GROUP	ATTN
1048184	Paid Up	Equitable Life of Canada	9/4/2024		522207 JESSICA JONES	522207 JESSICA JONES	Fake Funeral Home	Standard	5,000.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		
1048188	Paid Up	Equitable Life of Canada	9/4/2024	1048185	522207 JESSICA JONES	522207 JESSICA JONES	Fake Funeral Home	Standard	5,000.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		
1048189	Paid Up	Equitable Life of Canada	9/5/2024	1048179	522211 JOHN GROGAN	522211 JOHN GROGAN	Fake Funeral Home	Standard	10,500.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		

-
- When the policy opens, select the “Upgrade” button along the top of your page

Insurance Policy

1002738

Death Quote | Paid in Full Letter | Chargeback | Death Claim | Cancellation | Transfer | Downgrade | **Upgrade** | Member Case Request | French |

-
- A new page will open, displaying your Upgrade case

Case

Save

Primary Information

NUMBER: To Be Generated | PRIORITY: Intermittent/Medium | EMAIL(S): test@gfd.com

SUBJECT: 6971235 – 6978315 User – Member Case Request | INSURANCE POLICY: 1002738 | SUBJECT: Fake Funeral Home | STATUS: Open

CASE CATEGORY: Upgrade | CASE TYPE: Certificate Changes | ASSIGNED TO: | START DATE: 10/28/2024 | START TIME: 8:44 am

Upgrade

NEW FUNERAL COST (UPGRADE) * [] USE DIFFERENT ADDRESS | PAYMENT METHOD * []

CURRENT PURCHASER (INSURANCE): 437781 Sherry R Moynes

CURRENT PURCHASER ADDRESS (INSURANCE): Mrs. Sherry R Moynes, 15 Thurston Rd, Dunsford ON K0M 1L0, Canada

Case Message

ADDITIONAL INFORMATION [] **Any relevant files can be uploaded after the case is saved.**

-
- Enter the “New” Funeral cost
- *upgrade amount is a minimum of \$500. Upgrade amount entered into Upgrade fields needs to be the Funeral Contract Amount + “Upgrade” amount. Example \$5,000 funeral contract, upgrade \$1,000 New Funeral Cost = \$6,000

Upgrade

NEW FUNERAL COST (UPGRADE) * []

CURRENT PURCHASER (INSURANCE): 437781 Sherry R Moynes

CURRENT PURCHASER ADDRESS (INSURANCE): Mrs. Sherry R Moynes, 15 Thurston Rd, Dunsford ON K0M 1L0, Canada

-
- Select the method of payment

PAYMENT METHOD *

Pre-Authorized Debit

Personal Cheque

-
- Pre-Authorized Debit – Enter banking details

CASE BILL METHOD *

Pre-Authorized Debit

INSTITUTION NUMBER *

TRANSIT NUMBER *

ACCOUNT NUMBER *

-
- Personal Cheque – Will be applied once received

PAYMENT METHOD *

Personal Cheque

-
- Enter Additional Information (optional)
- Click Save

Case Message

ADDITIONAL INFORMATION

Any relevant files can be uploaded after the case is saved.

Save Cancel

-
- Case confirmation is created

Confirmation
Case successfully Saved

Case

14422 1002738 - 437781 Sherry R Moynes - Upgrade Mackey Funeral Home Inc.

Primary Information

NUMBER 14422	PRIORITY Intermittent/Medium
SUBJECT 6971235 - 4978315 User - Member Case Request	FUNERAL HOME/ESTABLISHMENT Fake Funeral Home
INSURANCE POLICY 1002738	ASSIGNED TO
CASE CATEGORY Upgrade	CASE TYPE Certificate Changes

-
- Files can be uploaded once your case has been saved (optional)
- Choose File > PDF, Word, JPEG > Click to Upload

Case Message

Please upload any relevant files if necessary.

Attachments

No file chosen

-

Attachments

No file chosen

- After uploading, the file name will be displayed

Attachments

Uploaded Test document.docx

No file chosen

-

This concludes the Upgrade process

French Certificate

- Navigate to the Insurance Policy List: Use the Certificates tab along the top of your home page, hover over Certificates > Insurance Policies - Insurance Policies

Navigation menu showing 'Certificates (Insurance)' selected, with 'Insurance Policies' highlighted in yellow.

- Navigate to policy – Click on the blue policy number (hyperlink)

POLICY #	STATUS	INSURANCE COMPANY	ISSUE DATE	LINKED POLICY #	BENEFICIARY	PURCHASER	FUNERAL HOME/ESTABLISHMENT	CONTRACT TYPE	FUNERAL COST (FACE)	PROGRAM #	LINE OF BUSINESS	PRV PLAN	BILL MODE	DOWN PAYMENT	BILL GROUP	ATTN
1048185	Paid Up	Equitable Life of Canada	9/4/2024		522207 JESSICA JONES	522207 JESSICA JONES	Fake Funeral Home	Standard	5,000.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		
1048186	Paid Up	Equitable Life of Canada	9/4/2024	1048185	522207 JESSICA JONES	522207 JESSICA JONES	Fake Funeral Home	Standard	5,000.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		
1048189	Paid Up	Equitable Life of Canada	9/5/2024	1048179	522211 JOHN GROBAN	522211 JOHN GROBAN	Fake Funeral Home	Standard	10,500.00	65	Active 1222 JA	Single Pay	Single Premium	0.00		

- Use the filters to search for a specific policy

Insurance Policy List filter form with 'POLICY #' field highlighted in yellow.

- Once policy selected you will click on the French button

Insurance Policy 0258797 details page with 'French' button highlighted in yellow.

- Once the word French changes to English you can now print your French copy of the policy

- Click the Printer Icon to open your policy in a new tab, where you can print a copy

Insurance Policy 0258797 details page with 'English' button and printer icon highlighted in yellow.



Frequently Asked Questions:

Question: How many staff members at our location will be able to access the new insurance system?

Answer: There is currently a limit to two users per establishment, however if additional access is required, you can submit a support ticket or email to request access for additional users. Sharing logins is not best practice, for example, if you have someone leave the organization, you want to ensure they no longer have access to the confidential client information within your portfolio. Also when sharing access, only one person can be logged in at once, meaning that the online application and e-signature features can only be utilized by one individual during that time.

All agents and enrollers will have their own login credentials.

Question: Do claims need to be submitted by this system only or can they continue to be faxed in for processing?

Answer: Claims should be submitted through NetSuite. This will also ensure that you will be paid out with greater efficiency. Fax copies will not be accepted. Please use the NetSuite platform to submit all requests associated with a policy.

Question: Is this system also used for FPC now that they are combined?

Answer: NetSuite is a new platform for FPC. We have rebranded our name to GFD Insurance by Funeral Plans Canada, under which both your Foresters (if applicable) and Equitable policies.

Question: Will new business application and commission continue to be paid to the agent as they were previously?

Answer: Business application will continue to be paid out to members and agents as they have been previously. The only changes, will now be, utilizing e-signatures for more efficient processing and the discontinuation of the 20% reserve on travel plan commission accounts, applicable only to insurance commission amounts.

Question: What if the customer/client does not have an email?

Answer: If the client is with you in person, you can use your own email address as they will be signing the application in person. If required, you can utilize the new version of the paper application to complete the application and email, fax or postal mail it to us for processing. Please note that this will take much longer to process. Using the new online application will allow your applications to be processed within a matter of hours and this will also ensure that you are able to meet commission deadlines.



Question: In regard to month-end reporting, will/can the reports be broken down between company, now that they are all combined on one system?

Answer: Month-end reports will continue to be separated by the insurer Foresters and Equitable. The only difference is, currently you may receive two reports for Foresters and one report for Equitable, moving forward you will have a single report for Foresters and a single report for Equitable.

Question: As an existing NetSuite Trust Module user, when signing into NetSuite for the GFD Insurance by FPC Module, will it automatically sign-in the Trust and will we have to select either Trust or Insurance?

Answer: As an existing NetSuite user, you will be able to view both Insurance and Trust using the same login. You will be able to toggle between locations if this is applicable to you, using the menu on the top right-hand side where you see your name.

Question: Will both email address have access to all features such as reports? Currently one of our email addresses cannot access reports under GFD. Before NetSuite we used to get them emailed but not now, for quarterly commission.

Answer: Only users with manager access will be able to view commission reporting. If you have a manager role (full access) for your Trust Module, you will be able to see all reports including commission reporting for Insurance. If you have an employee role (no report access) for your Trust Module, you will be able to see all reports for insurance except commission reporting.

For quarterly Trust commissions, GFD will provide a confirmation letter upon request once the deposit is made.

Question: Are people doing this data entry in NetSuite with the family present? From this last part, it sounds like the family can sign right then and there....do we no longer have to do any physical signatures if meeting the family in person? Can the application be completed in NetSuite with the family present?

Answer: The online application in NetSuite allows you to choose from two e-signature options, the first is sign now and the second is request signature. You can fill out the application while your family is present and have them sign right there and then and you will not require any physical signatures. If you prefer to complete the application afterwards, you can choose the request signature option and the signees will receive an email when it is their turn to sign. Once all parties have signed, all signees will receive a completely executed agreement in their inbox.



Question: Does the funeral director or enroller need to know about the emails for eSignatures in advance for sign now (sign in person) and request signature?

Answer: If all parties will be at the appointment, the signatures can be done in person while submitting. However, if necessary, if a person is not there physically, then an email will be sent to them so they can action accordingly. If you are requesting signatures and completing the data entry without the clients, you will need to have the email addresses prior to requesting signatures.

*If all parties are present and will be signing, the email is still required as this is a mandatory field. If the client does not have an email address, you can input your own as an option since the application will be signed on the spot, no emails will go out.

Question: Will the EAAF no longer be required for New Business?

Answer: The online application completed with e-signature eliminates the need for both the EAAF and PAD forms. A PAD form would still be required if you are completing an Early Payout (EPO) or need to update the bank withdrawal information on file, i.e. changing the withdrawal date from the 1st to the 8th.

Question: When do credit card fees apply?

Answer: We are pleased to offer you the option to allow your clients to pay with credit card for any pay plan. The online application will indicate when a credit card fee applies. There are no credit card fees applicable to the monthly payment plan from 3 to 15 years, all other options will indicate that a 2% processing fee applies.

Question: Is it still possible to pay by Cheque or Deposit to RBC?

Answer: Cheques are still accepted; however, they must be mailed with the completed, current version of the application and will require additional processing time due to manual processing. Please continue to make cheques payable to Equitable Life of Canada. Please note that deposit books are no longer accepted. Question: Member Case Requests – where does email communication go to?

Answer: Email communication will go to the email address linked to the user, the email address will appear on your support ticket when created. This will apply to all case requests within NetSuite.

Question: How do we handle families paying in cash?

Answer: This would depend on the province as some province regulations do not allow a Funeral Home to make a payment to ELOC directly.



Question: Can a funeral home still claim the Other Amount (DVO) Certificate?

Answer: An AOB (Assignment of Benefits) form is still required to be provided as an attachment to the support ticket / case if funds on the "other amount" (DVO) are to be paid to the Funeral Home directly.

Question: How do transfers to a Non-Member work?

Answer: The current/original Funeral Home will submit the transfer request by submitting a transfer support ticket from the policy, and GFD Insurance by FPC will handle it as needed.

Question: Credit Card fees and commissions. Are fees deducted from Commissions?

Answer: Credit Card fees will be deducted from the commission amount. If commission funds are insufficient to cover the credit card fees, the remaining balance will be deducted from the next commission cycle. If commissions are unavailable for an extended period, an invoice will be generated.