

1 January 2014

## Insurance application – life events and salary increase

You should complete this form if you wish to increase your insurance cover in your IOOF Employer Super account in the following circumstances outlined below:

**You will need to attach a certified photocopy of the relevant document(s) outlined in 'Step 5 Attachments', to confirm the life event or your salary increase**

### Life Events

You can increase your existing Death, Death and Total & Permanent Disablement (TPD) or Income Protection cover upon the occurrence of any of the following Life Events:

- Birth of your child or adoption of a child by you.
- Your dependent child starting secondary school.
- Your marriage or divorce.
- Entering into a mortgage to purchase a primary residence, or increasing your existing mortgage to renovate your primary residence in Australia.

### Salary increase

You can increase your existing Income Protection cover if you have had a recent salary increase.

**Please note that you are NOT eligible to increase your existing cover if:**

In relation to Life Events:

- your application form is not received by us within 90 days of the Life Event or within 30 days from issuing your first annual Member Statement following the occurrence of the Life Event
- you are 61 years of age or older at the time of the Life Event
- you are engaged in a hazardous occupation as defined in the relevant product disclosure statement (PDS), or
- you are not eligible according to Step 4 of this application form.

In relation to a salary increase:

- your application is not received by us within 60 days of the salary increase
- you are 61 years of age or older at the time of the increase in cover
- you are engaged in a hazardous occupation (as defined in the PDS), or
- you are not eligible according to Step 4 of this application form.

Any increase in cover does not commence until you receive confirmation in writing that your application to increase cover has been accepted by the insurer, TAL Life Limited ABN 70 050 109 450, AFSL 237848 (TAL).

Please complete these instructions in **BLACK INK** using **CAPITAL LETTERS** (except for your email address) and **✓** boxes where provided.

Member number

Please nominate the type of personal superannuation account you hold:

- IOOF Employer Super
- Bendigo and Adelaide Bank Staff Super
- Medical and Associated Professions Superannuation Fund
- JR Superannuation Fund
- AustChoice Super

### Step 1: Your personal details

Title (Dr/Mr/Mrs/Ms/Miss)  Surname

Given name(s)

Residential address

Suburb  State  Postcode

Date of birth  /  /  Gender Male  Female

Email

1 To speed up the processing of your application our insurer may contact you via email to clarify any outstanding information.

Preferred contact number (during business hours)

Telephone (business)    Mobile

Occupation

**You will not be accepted if your occupation is a hazardous occupation.**

### Occupation details

- Self-employed     Employee (full time)     Employee (part time)    (  Hours per week)
- Not working     Domestic duties     Casual    (  Hours per week)

What is the name of your employer?

What is your usual occupation?

What are the principal duties of your usual occupation and the percentage of time performing each (to a total of 100 per cent)

Principal duties	Percentage of time spent (%)
Clerical/administration/managerial	
Light manual (such as qualified tradespeople, coffee shop owner)	
Manual (such as carpenter, plumber, plasterer, mechanic or an occupation for which travel is an essential part of the job (eg field surveyor)	
Heavy manual (such as interstate bus driver, warehouse worker, labourer, bricklayer, house removalist)	
Other – please specify:	

Industry of your usual occupation?

## Step 2: Life event or salary increase

For which event are you applying for increased cover?

Life Event                       Salary increase

If you are applying to increase your insurance cover as a result of a Life Event, please complete part A below.

If you are applying to increase your insurance cover as a result of a salary increase, please complete part B below.

### Part A

#### Life Event

#### Date of life event (dd/mm/yyyy)

Birth of your child	<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Adoption of a child by you	<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Your child starts secondary school	<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Your marriage or divorce	<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
New mortgage	<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Increase of existing mortgage	<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of drawn down of the new mortgage

Date of drawn down of the additional mortgage

### Part B

Salary increase                       /  /  Date of salary increase

## Step 3: Increase cover amount

### Life Events and salary increase

The maximum increase of **Death** or **Death and TPD** cover due to a Life Event is the lesser of:

- \$200,000
- the total amount of your mortgage, or the amount of increase in your mortgage (if applicable), or
- 25 per cent of your existing cover.

The maximum increase of **Income Protection** cover due to Life Events or salary increase is the lesser of:

- 25 per cent of your existing cover, or
- \$2,500 per month

Type of cover	Existing cover in your account	Amount of increase	Total cover after increase*
Death	\$	\$	\$
TPD	\$	\$	\$
Income protection (inc super benefit)	\$                      pa	\$                      pa	\$                      pa

New/current salary      \$  pa                      Insured percentage of salary after increase  %

\* Maximum amount of total cover after increase.

After the increase of cover due to Life Events or salary increase, the amount of total cover cannot exceed:

- \$3,000,000 for Death or Death and TPD cover
- For Income Protection cover, the lesser of:
  - \$25,000 per month, or
  - 75% of salary (plus up to 10% of salary for a Superannuation Contribution Benefit, if elected).

**Where 'salary' means:**

- if you are employed: the annual wages or salary last agreed between you and your employer (as defined in the PDS) plus any commissions paid to you by your employer in the last 12 months immediately before commencement of Total Disability and all other regular (cash and non-cash) payments or benefits provided to you by your employer in the last 12 months immediately before commencement of Total Disability which, when combined, TAL reasonably considers to be your remuneration package.
- if you are self-employed: the annual income generated by you from your personal exertion, calculated by averaging your net income for the two years immediately preceding your application. Net income means gross income from personal exertion less all expenses incurred by you in connection with earning that income but does not include investment income, profit distributions or similar payments.

**Note:** For the avoidance of doubt, salary does not include employer superannuation contributions that are required to be made to meet your employer's superannuation guarantee obligations, award or industrial agreement obligations or additional voluntary contributions. Salary does include employer superannuation contributions made under an effective salary sacrifice arrangement.

**Step 4: Eligibility questions**

At the date of this application:

- 1 Have you successfully applied for an increase in cover in the previous 12 months?

Yes  No

- 2 Please complete either a, b or c, as applicable.

- a For an employed person

Are you currently off work, or restricted or unable to fully perform without any limitation all the duties of your usual occupation on a full-time basis (for at least 30 hours per week), due to illness, sickness, accident or injury, even if your actual employment may be full-time, part-time or casual?

Yes  No

- b For an unemployed person whose sole occupation is the performance of unpaid domestic duties

Are you

- i) unable to fully perform your unpaid domestic duties due to illness or injury;
- ii) in receipt of social security benefits in relation to an illness, injury, or disability which you may have; or
- iii) in receipt of unemployment benefits including but not limited to any benefits payable in respect of return to work programs, work start training programs, or similar work experience/training initiative

Yes  No

- c For an unemployed person whose sole occupation is NOT the performance of unpaid domestic duties:

Are you currently restricted or unable to actively seek employment and/or fully perform, without any limitation due to illness or injury, all the duties and work hours of a gainful occupation reasonably suited to you having regard to your education, training and experience?

Yes  No

- 3 Have you, in the last 12 months been absent from work or unable to fully perform

- i) the duties of your usual occupation (whether employed or unemployed); or
- ii) your unpaid domestic duties, if you are unemployed and your sole occupation is the performance of unpaid domestic duties; due to illness or injury (other than cold or flu) for more than six days?

Yes  No

- 4 Have you been diagnosed with, or do you suffer from, an illness or injury that may cause permanent inability to work or which reduces or is likely to reduce your life expectancy to less than 12 months from the date of this application?

Yes  No

- 5 Have you ever had an insurance application for death only, death and total and permanent disablement, terminal illness or income protection (including accident or sickness) cover refused?

Yes  No

- 6 Have you ever had an insurance application for death only, death and total and permanent disablement, terminal illness or income protection (including accident or sickness) cover modified or offered on non-standard terms in regards to medical or other conditions?
- Yes  No
- 7 Have you ever been paid or are you eligible to be paid, or are currently in the process of submitting a claim for any illness or injury through the Plan, another superannuation fund, insurance policy, workers' compensation, or Government benefits (such as sickness benefit, invalid pension) providing terminal illness, total and permanent disablement or income protection cover, including accident or sickness cover?
- Yes  No

**Note:** If you answered 'Yes' to any of the questions in Step 4, you are not eligible to receive increased cover using this form. You may still apply to increase cover by completing an insurance application from your financial planner or by calling our client services team.

## Step 5: Attachments (all copies MUST be certified)

The table below outlines the documents you need to attach to this application.

Type of Life Event	Evidence required
Birth of your child	Birth certificate
Adoption of a child by you	Order effecting an adoption or an entry in a public official record of the adoption of a child
Your child starts secondary school	Original statutory declaration completed by the applicant (please complete Step 6)
Your marriage	Australian marriage certificate or an equivalent overseas marriage certificate recognised in Australia
Your divorce	Divorce order
New mortgage for the purchase of your home (primary residence)	<p>Mortgage statement/official statement from the lender stating:</p> <ul style="list-style-type: none"> <li>• name of borrower</li> <li>• date and amount of drawdown</li> <li>• address of security</li> </ul> <p>Proof of settlement letter from your lawyer</p> <p>Original statutory declaration completed by the applicant declaring primary residence (please complete Step 6)</p>
Increase of existing mortgage on your home (primary residence)	<p>Mortgage statement/official statement from the lender stating:</p> <ul style="list-style-type: none"> <li>• name of borrower</li> <li>• date and amount of drawdown</li> <li>• address of security</li> </ul> <p>Original statutory declaration completed by the applicant declaring primary residence (please complete Step 6)</p> <p>Quotation for renovation/ improvement</p>
Salary increase	Copy of a letter from your employer confirming the increase of your salary

The copy must be a 'certified copy'. A 'certified copy' is a true copy of an original document that has been sighted and certified by an 'acceptable person' and noted as follows: 'I certify that I have sighted the original document and this is a true copy of it.' This certification must have the certifier's full name, title, registration number (where applicable) and be signed and dated.

An 'acceptable person' that can certify copies of the originals as **true and correct copies** are as follows:

#### Chiropractor

- Dentist
- A legal practitioner, who is on the roll of the Supreme Court of a State or Territory, or the High Court of Australia
- Medical practitioner
- Nurse
- Optometrist
- Patent attorney
- Pharmacist
- Physiotherapist
- Psychologist
- Trade marks attorney

#### Other persons:

- Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public
- Australian Consular Officer or Australia Diplomatic Officer (within the meaning of the Consular Fee Act 1955)
- Bailiff
- Bank officer with 2 or more continuous years of service
- Building society officer with 2 or more years of continuous service
- Chief executive officer of a Commonwealth court
- Commissioner for Affidavits
- Commissioner for Declarations

- Credit union officer with 2 or more years of continuous service
- Employee of the Australian Trade Commission who is:
  - in a country or place outside Australia; and
  - authorised under paragraph 3(c) of the Consular Fees Act 1955; and
  - exercising his or her function in that place
- Employee of the Commonwealth who is:
  - in a country or place outside Australia; and
  - authorised under paragraph 3(c) of the Consular Fees Act 1955; and
  - exercising his or her function in that place
- Fellow of the National Tax Accountants' Association
- Finance company officer with 2 or more years of continuous service
- Holder of a statutory office not specified in another item in this list
- Judge of a court
- Justice of the Peace
- Magistrate
- Marriage celebrant registered under Subdivision C of Division 1 of Part IV of the Marriage Act 1961
- Master of a court
- Member of Chartered Secretaries Australia
- Member of Engineers Australia, other than at the grade of student
- Member of the Association of Taxation and Management Accountants
- Member of the Australian Defence Force who is:
  - an officer; or
  - a non-commissioned officer within the meaning of the Defence Force Discipline Act 1982 with 2 or more years of continuous service; or
  - a warrant officer within the meaning of that Act
- Member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising Accountants or the National Institute of Accountants
- Member of:
  - the Parliament of the Commonwealth; or
  - the Parliament of a State; or
  - a Territory legislature; or
  - a local government authority of a State or Territory
- Minister of religion registered under Subdivision A of Division 1 of Part IV of the Marriage Act 1961
- Notary public
- An officer with, or authorised representative of, a holder of an Australian financial services licence, having 2 or more years of continuous service with one or more licences
- Permanent employee of the Australian Postal Corporation with 2 or more years of continuous service who is employed in an office supplying postal services to the public
- Permanent employee of:
  - the Commonwealth or a Commonwealth authority; or
  - a State or Territory or a State or Territory authority; or
  - a local government authority; with 2 or more years of continuous service who is not specified in another item in this list
- Person before whom a statutory declaration may be made under the law of the State or Territory in which the declaration is made
- Police officer
- Registrar, or Deputy Registrar, of a court
- Senior Executive Service employee of:
  - the Commonwealth or a Commonwealth authority; or
  - a State or Territory or a State or Territory authority
- Sheriff
- Sheriff's officer
- Teacher employed on a full-time basis at a school or tertiary education institution
- Member of the Australasian Institute of Mining and Metallurgy

## Step 6: Statutory declaration

Please complete this declaration if you are applying for increased cover due to the following life events:

- your child starting secondary school
- a new mortgage for the purchase of your home (primary residence)
- increasing your existing mortgage for renovating your home (primary residence).

I,  (name)  
of   
 (address)

do solemnly and sincerely declare that (tick appropriate box):

my child has started secondary school on  /  /

the address above and the property described is/will be my primary residence.

I make this solemn declaration by virtue of the *Statutory Declarations Act 1959* (Act) or equivalent legislation and subject to the penalties provided by the Act for making false statements in statutory declarations, conscientiously believing the statements contained in this declaration to be true in every particular.

Declared at  (address)  
this  day of  20

Member signature  Date  /  /

Solicitor or Justice of the Peace (JP) in the presence of:

Signature  Date  /  /

Print name

Contact address

## Step 7: Duty of disclosure

**Your duty of disclosure to the Trustee, IOOF Investment Management Limited ABN 53 006 695 021 (IIML), and TAL is set out below.**

You have a duty under the Insurance Contracts Act 1984 to disclose to TAL and IIML every matter that you know, or could reasonably be expected to know, that is relevant to TAL's decision whether to accept the risk of increasing your existing insurance cover and, if so, on what terms.

You have the same duty to disclose those matters to TAL and IIML before you apply:

- to vary your existing insurance cover
- for new cover, or
- for any lapsed cover to be reinstated.

Your duty, however, does not require disclosure of a matter:

- that diminishes the risk to be undertaken by TAL
- that is of common knowledge

- that TAL knows or, in the ordinary course of his business, ought to know, or
- disclosure of which TAL has waived.

Your duty of disclosure continues until the increase of your existing insurance cover has been accepted by TAL and confirmation is issued to IIML.

If you do not disclose to TAL every matter that you know, or could reasonably be expected to know, that would be relevant to its decision to accept the risk, TAL may avoid the cover in respect of any insurance provided for you within three years of entering into it.

If TAL is entitled to avoid insurance cover, it may elect not to avoid it but to reduce the sum that you have been insured for in accordance with a formula that takes into account the premium that would have been payable if you had disclosed all relevant matters to TAL.

If your non-disclosure is fraudulent, TAL may avoid the contract at any time.

All questions on this application are relevant as to whether or not TAL accepts the risk and, if so, on what terms.

## 8. Privacy

Privacy laws protect your privacy. The way in which IOOF Investment Management Limited ABN 53 006 695 021 (IIML) and TAL collect, use, disclose and handle your information is described in IIML and TAL's Privacy Policies.

Please be aware that the duty of disclosure explained in the PDS and your application for insurance applies to the information you give in this form. If you fail to comply with this duty you may be in breach of it. The consequences of this are explained in your application.

IIML and TAL may collect, use or disclose your personal information (including health and sensitive information) to assess, verify and process your application and any claim made.

IIML and TAL may collect or disclose information relating to you or your application or any claims you may make to or from each other and a range of services including: financial advisers, re-insurers, superannuation trustees, past or present medical practitioners, health professionals, hospitals, government department(s) which retain health records or as part of our regulatory requirements, personal accountants, current or former employers, lawyers, claim investigators and other third party service providers. If this information is not provided, your application for increase in your cover or any insurance claim may not be processed. You have a right to access any personal information held about you unless IIML or TAL is legally entitled to deny access. If you want to know more about IIML's or TAL's approach to privacy, please contact IIML on 1800 062 963 or TAL on 1300 209 088.

## 9. Applicant declaration and signature

- I acknowledge that I have read the notice explaining my duty of disclosure in Step 7 and understand that this duty also applies until formal notification of acceptance.
- I have read and checked any answers not completed in my handwriting and to the best of my knowledge and belief all the answers to the questions in this application and any supplementary application or personal statement which relate to me are true and correct and no information material to the assessment of this insurance has been withheld.
- I authorise TAL to contact any relevant authority to obtain confirmation of any information I have provided on this form, and to obtain copies from that authority of relevant documents. A photocopy of this authority is as effective and valid as the original.
- I authorise and direct any authorities, or medical or other practitioner, to divulge at any time to IIML and TAL or to any lawfully constituted tribunal any and all information concerning the increase in cover due to the life event or salary increase. A photocopy of this authority is as effective and valid as the original. To this extent, all professional confidence and privilege is waived.
- I acknowledge that I have received, read and understood the PDS in relation to the increase in cover due to the life events or salary increase. I acknowledge that the increase in cover will not commence until this application has been accepted by TAL.
- I have read the privacy declaration in the PDS and I consent to my personal information (including health and sensitive information) being collected, used and disclosed by IIML and TAL or their external service providers/contractors as contemplated in this form, including collecting it from, or disclosing it to, any medical practitioner or third party as required to assess, verify or process my application or any claim I may make. This consent applies to any health and sensitive information IIML and TAL collect on this form or future forms in relation to this insurance.
- I have read and understood the most current PDS and understand that if this application is accepted, my increased cover will be subject to the terms and conditions of the relevant insurance policy.

If you have provided us with information about another person, you undertake to advise them that:

- we collect, hold and use the personal information for the purpose set out in IIML's privacy statement
- their personal information may be disclosed to a third party, and
- they may access or correct any personal information held about them.

Member signature

Date   /   /

Please sign and return this form by post

### Please forward all correspondence and enquiries to

**Post** IOOF Employer Super, GPO Box 529, Hobart TAS 7001  
**Email** employersuper@ioof.com.au  
**Telephone** 1800 333 500  
**Fax** 03 6215 5933  
**Web** www.ioof.com.au