# **Insurance Special Offer**



## TelstraSuper Corporate Plus

Complete this form within 120 days to apply for Voluntary Death only or Death & TPD cover or to change your Income Protection benefit and waiting periods.

**BLUE SECTIONS FOR YOUR INFORMATION** 

**GREY SECTIONS TO FILL OUT** 

Save time! Complete in SuperOnline



## What you need to know

Complete this form within 120 days of commencing permanent employment with your new Corporate Plus to take advantage of our offer to:

- Increase your Death only or Death & Total and Permanent Disablement (TPD) cover.
- Change your benefit and waiting periods on your Income Protection cover without the need for health evidence, if you've received automatic Income Protection cover or you have opted in for Default Income Protection cover.

After the 120 days, if you wish to apply for voluntary cover you'll be required to provide detailed health and other personal information as part of your application, which will then be assessed by our Insurer.

Insurance premiums are deducted from your account quarterly in arrears. However, default Death and TPD premiums may be covered by additional superannuation contributions made by your Corporate Plus employer, but this can change in the future.

To estimate the cost of cover, use our Premium calculator available at telstrasuper.com.au/calculators

You can also change or apply for cover using our insurance portal available via your online account (if eligible) at telstrasuper.com.au/login

If you wish to transfer any Death only, Death & TPD and/or Income Protection cover you currently have with another fund or life insurer, you will need to complete a **Transfer External Insurance Application** form available at **telstrasuper.com.au/forms** 

If you identify as non-binary, eligibility will depend on you nominating a binary gender via the **Gender affirmation and insurance opt-in** form. This is because the relevant premiums are based on binary gender (male/female) pricing. Contact us on **1300 033 166** for more information or to request a **Gender affirmation and insurance opt-in** form.

If you're signing this form on behalf of another person, you will need to complete and attach an **Authorised Third Party Representative Identification** form available at **telstrasuper.com.au/forms** and include any certified documents as required.

#### **Important information**

For more information you should read the **TelstraSuper Corporate Plus Product Disclosure Statement** (PDS) and **TelstraSuper Corporate Plus Insurance Guide** available at **telstrasuper.com.au/pds**, email **underwriting@telstrasuper.com.au** or call us on **1300 033 166**.

### Election to keep your insurance cover

By completing this form, you have taken the active step of applying for insurance cover and therefore you're **deemed to be electing to keep all of your insurance cover** now, and in the future. This includes if you transfer to a different TelstraSuper product.

This will ensure that you won't lose your insurance cover as a result of legislation covering low account balance (less than \$6,000), inactivity (your account does not receive a contribution for 16 months) or if you're under 25 years of age.

To make an election to maintain insurance only in particular circumstances and not all of the circumstances specified above or if you want to make any changes to your insurance arrangements contact us on **1300 033 166**.

1. Your details					
Title Mr Mrs Miss Ms (	Other				
Surname	ame Member number				
Given name(s)					
ate of birth					
ostal address					
uburb	State		Postcode		
obile/contact no. Email address					
. Voluntary cover					
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would like to apply for the following voluntary cover and		Total existing cover amount	Maximum voluntary cover		
		Total existing cover amount \$0 - \$100,000	Maximum voluntary cover \$25,000		
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If you wish to cancel your Income Protection cover you can do so via your online account, by downloading a **Cancel or Reduce Insurance** form at **telstrasuper.com.au/forms** 

I would like to change my waiting period to: 30 days 60 days 120

## 4. Eligibility questions

At the date of this application:

- 1. Have you been told by a doctor, or medical specialist, that you have less than 24 months to live?

  Yes

  No
- 2. Regardless of the hours that you are working, do you have an illness or injury that stops you from performing all of your usual work activities at least 30 hours a week?
- Yes No

3. Due to an illness or injury have you been unable to work for more than 4 weeks in the last 12 months?

- Yes No
- 4. Has a life insurance company ever refused you cover or offered you cover subject to special terms such as an exclusion (for example not covering you for a back related condition) or an additional premium amount?

No

Yes

- 5. Have you ever made a claim, or do you plan to make a claim, for an illness or injury from:
  - Government benefits (such as sickness benefit or invalid pension)
  - Motor accident scheme
  - TelstraSuper or another Superannuation fund
  - Workers' Compensation or a Life insurance policy?

Yes No

If you answered "Yes" to any of the questions above, you are not eligible to receive voluntary cover or amend your Income Protection arrangement using this form. However, you may still apply for cover online or over the phone with our Insurer MLC Limited (MLC Life Insurance). Simply log in to your online account or complete an **Insurance Telephone Application Request** form available at **telstrasuper.com.au/forms** 



#### 5. Your duty to take reasonable care not to make a misrepresentation

#### About this application and your duty

When you apply for life insurance, we conduct a process called underwriting. It's how we decide whether we can cover you, and if so, on what terms and at what cost.

We will ask questions we need to know the answers to. These will be about your personal circumstances, such as your health and medical history, occupation, income, lifestyle, pastimes, and current and past insurance. The information you give us in response to our questions is vital to our decision.

#### The duty to take reasonable care

When applying for insurance, there is a legal duty to take reasonable care not to make a misrepresentation to the insurer before the contract of insurance is entered into.

A misrepresentation is a false answer, an answer that is only partially true, or an answer which does not fairly reflect the truth.

This duty also applies when extending or making changes to existing insurance, and reinstating insurance.

#### If you do not meet your duty

If you do not meet your legal duty, this can have serious impacts on your insurance. Your cover could be avoided (treated as if it never existed), or its terms may be changed. This may also result in a claim being declined or a benefit being reduced.

Please note that there may be circumstances where we later investigate whether the information given to us was true. For example, we may do this when a claim is made.

#### Guidance for answering our questions

You are responsible for the information provided to us. When answering our questions, please:

- Think carefully about each question before you answer. If you
  are unsure of the meaning of any question, please ask us before you
  respond.
- Answer every question.
- Answer truthfully, accurately and completely. If you are unsure about whether you should include information, please include it.
- Review your application carefully before it is submitted.
   If someone else helped prepare your application (for example, your adviser), please check every answer (and if necessary, make any corrections) before the application is submitted.
- You must not assume that we will contact your doctor for any medical information. If you are unsure about whether you should include information or not, please include it.

#### Changes before your cover starts

Your duty to take reasonable care not to make a misrepresentation continues until the time your insurance cover starts.

Before your cover starts, we may ask about any changes that mean you would now answer our questions differently. As any changes might require further assessment or investigation, it could save time if you let us know about any changes when they happen.

#### Where the Policy Owner and Life Insured are different persons

If the policy owner and life insured under the policy are different persons, a misrepresentation by the life insured has the effect as though it is a misrepresentation by the policy owner.

If you request life insurance inside super, the Trustee obtains this insurance from us in relation to you. In this circumstance, we rely on the representations made to us by you or the Trustee.

#### If you need help

It's important that you understand this information and the questions we ask. Ask us or your adviser for help if you have difficulty understanding the process of buying insurance or answering our questions.

If you're having difficulty due to a disability, understanding English or for any other reason, we're here to help and can provide additional support for anyone who might need it. If you want, you can have a support person you trust with you.

#### What can we do if the duty is not met?

If the person who answers our questions does not take reasonable care not to make a misrepresentation, there are different remedies that may be available to us. These are set out in the Insurance Contracts Act 1984 (Cth). These are intended to put us in the position we would have been in if the duty had been met

For example we may:

- avoid the cover (treat it as if it never existed),
- · vary the amount of the cover, or
- vary the terms of the cover.

Whether we can exercise one of these remedies depends on a number of factors, including:

- whether the person who answered our questions took reasonable care not to make a misrepresentation. This depends on all of the relevant circumstances,
- what we would have done if the duty had been met for example, whether we would have offered cover, and if so, on what terms,
- · whether the misrepresentation was fraudulent, and
- in some cases, how long it has been since the cover started.

Before we exercise any of these remedies, we will explain our reasons, how to respond and provide further information, including what you can do if you disagree.

## 6. Privacy statement

Telstra Super Pty Ltd and MLC Life Insurance take responsibility to protect your privacy very seriously by applying strict security and privacy controls to the way we handle your personal information. Both organisations are bound by obligations imposed by privacy laws including the Australian Privacy Principles.

The way in which Telstra Super Pty Ltd and MLC Life Insurance collect, use, secure, handle and disclose your personal information is set out in the Telstra Super Pty Ltd's Privacy Policy and Privacy Collection Statement which you can read at **telstrasuper.com.au/legal/privacy** and in the MLC Life Insurance Privacy Policy which you can read at www.mlcinsurance.com.au/privacy-policy. These documents are also available free of charge upon request using the contact details below.

#### Telstra Super Pty Ltd

Privacy Officer PO Box 14309 Melbourne VIC 8001 Phone: **1300 033 166** 

Email: privacy@telstrasuper.com.au

## MLC Life Insurance

Attention: Privacy Officer MLC Life Insurance PO Box 23455 Docklands VIC 3008

#### 7. Your declaration and signature

## Read this section carefully before signing

I understand and agree:

I have read and understood the insurance information in the relevant **TelstraSuper Product Disclosure Statement**.

My decision to apply for or vary insurance cover is based on the insurance information in the relevant **TelstraSuper Product Disclosure Statement** that I have read and my understanding of that information.

#### I understand and agree that:

- (a) I have read and understand the duty to take reasonable care not to make a misrepresentation (Section 5),  $\,$
- (b) the answers to the questions in this application and any other relevant personal statement(s) and questionnaires are true and complete, no information material to the assessment of this application has been withheld and the answers given form the basis of the contract for which I am applying or varying,
- (c) I consent to notices relating to my application to be sent to the email address or the mobile number provided by me and I acknowledge that my personal and sensitive information may be sent to that email address,
- (d) no additional insurance is effective until the Insurer accepts this application,

Each person who signs this form on behalf of the applicant named in this form:

- · represents and warrants that they are lawfully appointed as guardian, administrator or attorney (as applicable), and
- declares that they are acting in accordance with the terms of the relevant power of attorney, guardianship order or administration order, including that if more
  than one person must act under the appointing document, all nominated persons must include their name, signature and date on this form below, and
- declares that their appointment remains valid and current as at the date of this form.

State your capacity (if applicab	ole): Guardian	Administrator	Attorney				
Name							
Signature				Date			
TelstraSuper only accepts 'wet ink', DocuSign, an uploaded image or a scanned copy of your signature for our forms.							
Office use only							
Cessation Date	New Division		Planner's n	ame			



## Please return completed form to TelstraSuper:

Telstra Super Pty Ltd, PO Box 14309, Melbourne, VIC 8001 or email to underwriting@telstrasuper.com.au

Telstra Super Pty Ltd, ABN 86 007 422 522, AFSL 236709, is the trustee of the Telstra Superannuation Scheme ABN 85 502 108 833 (TelstraSuper). Telephone 1300 033 166 Website telstrasuper.com.au

Telstra Super Pty Ltd complies with the Privacy Act 1988 (Cth). For further information on privacy visit our website at telstrasuper.com.au to download a copy of our Privacy Policy and Privacy Collection Statement.

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