

Life Events Cover Application

Instructions

- All sections must be completed in black or blue ink and in BLOCK CAPITAL letters.
- · All questions must be completed by you, the insured member. Please attach a separate page if you require more space for an answer.
- Please return the completed form and supporting evidence to: Zurich Australia Limited, GPO Box 4129, Sydney NSW 2001.

When to use this form

Zurich is the insurer in respect of a group insurance plan with either your employer or superannuation fund (whichever you are an insured member of). Please complete this form if you are an insured member who wants to apply for increased Death Cover only or Death and Total and Permanent Disablement (TPD) Cover as a result of a specific life event. The amount of increase is one unit of cover (for unit based cover), or 25% of your cover (for fixed dollar cover or formula based cover).

A specific life event is any of the following:

- · marriage (or upon the subsistence of an interdependent relationship for two years or more)
- a dependent child starting secondary school
- the birth or adoption of a child
- taking out a new mortgage, or increasing an existing mortgage on the principal place of residence.

You cannot apply to increase your cover under the Life Events Cover Option if:

- you have made or are entitled to make a claim in relation to any life insurance policy
- you are aged 55 years or older at the date of the specific life event
- · we have previously declined an application for any increased cover
- you have increased cover under the Life Events Cover Option in the previous 12 months
- your application is made after 90 days of the specific life event occurring
- you have been provided with increased cover under the Life Events Cover Option on three previous occasions
- you are applying to increase your cover because of marriage, and have previously increased your cover under the Life Events Cover Option because of your marriage.

Duty to take reasonable care not to make a misrepresentation

When applying for insurance, there is a legal duty to take reasonable care not to make a misrepresentation to the insurer. To meet this duty, you must also take reasonable care not to make such a misrepresentation.

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

Not meeting your legal duty 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.

About this application

When you apply for life insurance, we conduct a process called underwriting. It's how we decide whether we can provide cover, 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 personal circumstances, such as your health and medical history, occupation, income, lifestyle, pastimes, and current and past insurance. The information given to us in response to our questions is vital to our decision.

When you apply for insurance benefits through a superannuation fund or ask to extend or make changes to existing insurance benefits, the fund trustee may pass on to us personal information you provide to them. You also therefore need to take reasonable care not to make a misrepresentation when providing this information to the fund trustee.

Guidance for answering our questions

You are responsible for the information you provide to us. When answering our questions, you should:

- think carefully about each question before answering. 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. Please don't assume we will ask others such as your doctor;
- review your application carefully. If someone else helped prepare your application (for example, your adviser), please check every answer (and if necessary, make any corrections).

Changes before your cover starts

Before your cover starts, please tell us about any changes that mean you would now answer our questions differently. It could save time if you let us know about any changes as and when they happen. This is because any changes might require further assessment or investigation.

Notifying the insurer

If, after the cover starts, you think you may not have met your duty, please tell us immediately and we'll let you know whether it has any impact on the cover.

Telephone contact

After you submit your application, we may contact you by phone to collect any information missing from your application. The information you provide will be recorded and used in the assessment of your application for insurance cover. The need for you to take reasonable care not to make a misrepresentation to the insurer before the contract of insurance is entered into also applies during any phone contact with us.

If you need help

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

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. You can have a support person you trust with you.

What can we do if the duty is not met?

If you do 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). They are intended to put us in the position we would have been in if the duty had been met.

For example, we may do one of the following:

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

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

- whether you took reasonable care not to make a misrepresentation. This depends on all of the relevant circumstances. This includes how clear and specific our questions were and how clear the information we provided on the duty was;
- 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;
- 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, and what you can do if you disagree.

1. Details of insurance

Member no. or Plan no.

Plan name

2. De	etails of i	nsured n	nember							
Title	O Mr	O Mrs	O Ms	O Miss	O Doctor	O Other				
Surnar	ne									
Given	names(s)									
Date o	f birth (dd/	mm/yyyy)	/	/		O Male	Female			
Reside	ential addre	ess (this can	not be a PC	Э Вох)						
Street										
Suburk)						State		Postcode	
Home phone Business phone				Mobile phone						
Email										
O Mc	onday (d during the Tuesday am	_	ednesday	O Thursday	O Friday	O Any business	day		
Please	select you	ır preferred o	contact me	thod:						
O hor	me phone	O busin	ness phon	e O mob	oile phone					
3. Eli	gibility									
l confir	m that:									
• in the event of marriage, I have not previously obtained more cover under the Life Events Cover Option because of marriage							O True	O False		
as at the date of the specific life event, I was aged below 55 years									O True	O False
 as at the date of the specific life event, I was aged below 55 years I have never had an application for increased cover declined by Zurich 								O False		
	• I have not made, nor am I entitled to make a claim in relation to any life insurance policy, whether it is issued by Zurich or any other insurer O True								O False	
				statements in us on 1800 6		cannot procee	ed with this application	n to obtain mo	ore cover. To fir	nd out how

4. Specific life events

Please select one by selecting the appropriate box

Specific life event	Date of event (dd/mm/yyyy)	Supporting evidence to attach to the completed application form			
O Marriage; or	/ /	Marriage certificate in respect of your marriage under the Marriage Act 1961; or			
O Upon the subsistence of an interdependent relationship for two years or more	/ /	Evidence that establishes the subsistence of your relationship for at least two years.			
O A dependent child starts secondary school	/ /	Letter of admission from the secondary school your dependent child will be attending.			
O Birth of a child; or	/ /	Birth certificate of your child; or			
O Adoption of a child	1 1	Adoption documentation confirming that you have adopted a child.			
O Taking out a new mortgage on the principal place of residence; or	/ /	Written confirmation from your accredited mortgage provider(s) of the amount and effective date of the mortgage; or			
O Increasing an existing mortgage on the principle place of residence	/ /	Written confirmation from your accredited mortgage provider(s) of the amount of the mortgage immediately preceding the increase, the effective date of the increase and the current level of the increased mortgage.			

5. Declaration by the insured member

- I have read and understood the questions in this Life Events Cover Application.
- I have read and understood my duty to take reasonable care not to make a misrepresentation and declare that the statements and answers provided in this application are true, accurate and complete (including those not in my own handwriting).
- I understand that all the information I have provided in connection with this application will be used by Zurich to determine whether to increase
 my insurance cover.
- I understand that the increased cover I have applied for will not become effective until I am notified in writing that my application has been accepted.
- I understand and accept that all terms and conditions that currently apply to my existing cover provided by Zurich will also apply to any
 increased cover.
- I have read and understood my duty to take reasonable care not to make a misrepresentation and the consequences of not meeting the legal duty and answering all questions truthfully and completely.
- I acknowledge that if I do not complete this form correctly or I do not sign and date this Declaration, my application will not be considered by Zurich
- I authorise any person referred to in this application form to verify any aspect of it, and disclose any information that they may possess about me to Zurich in relation to my application.
- I consent to the collection, use, storage and disclosure of my personal information (including health and other sensitive information) as described in the Privacy Statement on this form (see Section 6).

Signature of insured member

X Date (dd/mm/yyyy) / /

6. Privacy Statement

In this section 'we', 'us' and 'our' refers to Zurich Australia Limited. 'You' and 'your' refers to policy owners and life insureds. Any reference to your personal information includes any health or other sensitive information we may hold about you.

We collect your personal information from you in order to manage and administer our products and services. Without your personal information, we may not be able to process your application or provide you with the products or services you require.

We are committed to ensuring the confidentiality and security of your personal information. Our Privacy Policy details how we manage your personal information and is available on request or may be downloaded from zurich.com.au/important-information/privacy

We may disclose your personal information to certain third parties as outlined below. Unless you consent to such disclosure we will not be able to consider the information you have provided.

PROVIDING YOUR INFORMATION TO OTHERS

The parties to whom we may routinely disclose your personal information include:

- an organisation that assists us to detect and protect against consumer fraud;
- · organisations performing administration and/or compliance functions in relation to the products and services we provide;
- organisations providing medical or other services for the purpose of the assessment of any insurance claim you make with us (such as reinsurers);
- · our solicitors or legal representatives;
- · organisations maintaining our information technology systems;
- organisations providing mailing and printing services;
- · persons who act on your behalf (such as your agent or financial adviser);
- the policy owner (or parties acting on behalf of the policy owner);
- regulatory bodies, government agencies, law enforcement bodies and courts;
- · our related companies (members of Zurich Insurance Group Ltd group), including for carrying out any group business functions;
- organisations, including those in an alliance with us or our related companies, to distribute, manage and administer our products and services, carry our business functions, enhance customer service and undertake analytics activities.

We will also disclose your personal information in circumstances where we are required by law to do so. Examples of such laws are:

- the Family Law Act 1975 (Cth) enables certain persons to request information about your interest in a superannuation fund
- the disclosure obligations to third parties under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006.

INFORMATION REQUIRED BY LAW

We may be required by relevant laws to collect certain information from you. Details of these laws and why they require us to collect this information are contained in our Privacy Policy at zurich.com.au/important-information/privacy

PRIVACY CONSENT

Where you wish to authorise any other parties to act on your behalf, to receive information and/or undertake transactions please notify us in writing.

If you give us personal information about someone else, you must show them a copy of this document or our Privacy Policy available at zurich.com.au/important-information/privacy so that they may understand the manner in which their personal information may be used or disclosed by us in connection with your dealings with us.

PRIVACY POLICY

Our Privacy Policy contains information about:

- when we may collect information from a third party;
- · how you may access and seek correction of the personal information we hold about you; and
- · how you can raise concerns that we have breached the Privacy Act or an applicable code and how we will deal with those matters.

You can contact us about your information or any other privacy matter as follows:

In writing: GPO Box 75

Sydney NSW 2001

Email: privacy.officer@zurich.com.au
We may charge you a reasonable fee for this.

If any of your personal information is incorrect or has changed, please let us know by contacting Customer Services on 13 36 67.

More information can be found in our Privacy Policy at zurich.com.au/important-information/privacy

OVERSEAS RECIPIENTS

We may disclose your personal information to recipients (including service providers and related companies) which are (1) located outside Australia and/or (2) not established in or do not carry on business in Australia.

You can find details about the location of these recipients in Zurich's Privacy Policy at zurich.com.au/important-information/privacy

Phone: 1800 199 414

Email: group.risk.uw@zurich.com.au

Website: zurich.com.au

GPO Box 4129, Sydney NSW 2001

