

# Future Insurability Option Form

## OneAnswer Personal Super

2 May 2016

**OnePath Custodians Pty Limited (OnePath Custodians, Trustee)**

ABN 12 008 508 496 AFSL 238346 RSE L0000673

**OnePath Life Limited (Insurer or OnePath Life)**

ABN 33 009 657 176 AFSL 238341

242 Pitt Street, Sydney NSW 2000

**Customer Services**

**Phone** 133 665

**Email** customer@onepath.com.au

**Website** onepath.com.au

**This form is to be used by members who currently hold insurance cover through**

- OneAnswer Frontier Personal Super,
- OneAnswer Personal Super and
- OneAnswer Personal Super //Select.

**This form cannot be used for cover provided through OneCare Super.**

**Complete this form if you would like to apply to increase your current Death Only or Death and Total and Permanent Disablement (TPD) Cover due to one of the life events specified below under the future insurability option. Before completing this form please note the following:**

- Your insurance cover will be increased automatically to the lesser of 25% of your original sum insured or \$200,000. For those increasing cover under 'Purchase of first home' this increase is the lesser of 25% of your insured amount, \$200,000 or the amount of your mortgage.
- Insurance application increases are limited to one 'Life event' within any 12 month period.
- The application to increase Death Only or Death and TPD Cover must be made within 30 days of the specific Life event occurring. Please complete and return this form and required documentation to: OneAnswer, OnePath Life Limited, GPO Box 5306, Sydney NSW 2001. ( If your application is accepted, the acceptance date will be the date the application is accepted by OnePath Life in writing.)

The Life events where you may increase your insurance cover and the documents required are outlined below.

Life event	Documents required
<b>1. Marriage</b>	A copy of the marriage certificate in respect of a marriage recognised under the <i>Marriage Act 1961</i> . (Allowed once under the applicant's policy life time).
<b>2. Birth or adoption of a child</b>	A copy of the birth certificate or adoption documentation.
<b>3. A dependant child starts secondary school</b>	A copy of the letter of admission from the school your dependent child will be attending.
<b>4. Purchase of first home as your principal place of residence and you take out a mortgage</b>	A copy of mortgage papers.
<b>5. Salary package increase of 20% or more</b>	A copy of the salary package increase letter from the employer.

### 1. Member details

Member number           -

Title  Mr  Mrs  Ms  Miss  Dr Other

Surname

Given name(s)

Date of birth (dd/mm/yyyy)  /  /

### 2. Life event details

Please indicate which life event applies to you. **Please attach a copy of the relevant documentation to this form.**

- Marriage.  Purchase of first home as your principal place of residence and you take out a mortgage.
- Birth or adoption of a child.  Salary package increase of 20% or more.
- A dependant child starts secondary school.

### 3. Insurance increase amount

I wish to apply for  Death Only or  Death and TPD

\$    ,    (maximum applies – see page 1)

## 4. Declaration, signature and important notice

### The Trustee's duty of disclosure

The Trustee, who enters into a life insurance contract in respect of your life, has a duty, before entering into the contract, to tell the Insurer anything that it knows, or could reasonably be expected to know, may affect the Insurer's decision to provide the insurance and on what terms. The Trustee has this duty until the Insurer agrees to provide the insurance.

The Trustee has the same duty before it extends, varies or reinstates the contract.

The Trustee does not need to tell the Insurer anything that:

- reduces the risk the Insurer insures you for; or
- is of common knowledge; or
- the Insurer knows or should know as an insurer, or
- the Insurer waives your duty to tell the Insurer about.

### You must disclose relevant information

You must tell the Insurer anything you know, or could reasonably be expected to know, may affect the Insurer's decision to provide the insurance and on what terms. If you do not do so, this may be treated as a failure by the Trustee to tell the Insurer something that the Trustee must tell the Insurer.

If you provide relevant information to the Trustee rather than the Insurer, The Trustee will provide the information you give the Trustee to the Insurer. The Trustee will do this so that you comply with your obligation to provide relevant information to the Insurer.

### If the Trustee does not tell the Insurer something

In exercising the following rights, the Insurer may consider whether different types of cover can constitute separate contracts of life insurance. If they do, the Insurer may apply the following rights separately to each type of cover.

If the Trustee does not tell the Insurer anything the Trustee is required to, and the Insurer would not have provided the insurance or entered into the same contract with the Trustee if the Trustee had told the Insurer, the Insurer may avoid the contract within 3 years of entering into it.

If the Insurer chooses not to avoid the contract, the Insurer may, at any time, reduce the amount of insurance provided. This would be worked out using a formula that takes into account the premium that would have been payable if the Trustee had told the Insurer everything it should have. However, if the contract provides cover on death, the Insurer may only exercise this right within 3 years of entering into the contract.

If the Insurer chooses not to avoid the contract or reduce the amount of insurance provided, the Insurer may, at any time vary the contract in a way that places the Insurer in the same position it would have been in if the Trustee had told the Insurer everything it should have. However this right does not apply if the contract provides cover on death.

If the failure to tell the Insurer is fraudulent, the Insurer may refuse to pay a claim and treat the contract as if it never existed.

I declare that:

I have read and understood the questions in this Future Insurability Option Form.

- All the answers provided in this form are true and correct (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 OnePath Life 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 OnePath Life will also apply to any increased cover.
- I have read and understand the Duty of Disclosure section above, and I have not withheld any information that may affect the OnePath Life's decision as to whether to accept my application. I understand that the Duty of Disclosure continues after I have completed this form until my application has been accepted by OnePath Life and confirmation is issued in writing.
- 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 OnePath Life.
- 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 OnePath Life in relation to my application.
- I have read the Privacy Statement in this form, and authorise the collection, use, storage and disclosure of my personal information for the purposes of this application, as outlined in the Privacy Statement. If I have provided information about another person in this application (for example a beneficiary or life insured), I declare that I have the consent of that person to do so. I understand that OnePath Life require me to inform the person concerned that I have done so and direct them to the Privacy Policy which is located at onepath.com.au
- I acknowledge that if this application is declined, any of my existing cover on the date of this application will continue on same terms, including but not limited to any pre-existing condition exclusion(s).
- I acknowledge that any information received by OnePath Life in relation to this application may be used when assessing my existing or future claim, and may operate as an exclusion to my claim. This is irrespective of whether this application is accepted or declined.
- I understand that I may cancel my existing cover at any time.

**Signature of member**  
(sign clearly within the box)

X

Date (dd/mm/yyyy)

/ /

## 5. Financial adviser details

Master sales account no.	<input type="text"/>
Company name	<input type="text"/>
Name of financial adviser	<input type="text"/>
Phone	<input type="text"/>
<b>Signature of financial adviser</b> X (sign clearly within the box)	<input type="text"/>
Date (dd/mm/yyyy)	<input type="text"/>

**PRIVACY STATEMENT**

In this section 'we', 'us' and 'our' refers to OnePath Custodians Pty Limited, OnePath Life Limited and other members of the ANZ Group. 'You' and 'your' refers to life insured's.

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 [onepath.com.au/privacy-policy](http://onepath.com.au/privacy-policy)

In order to undertake the management and administration of our products and services, it may be necessary for us to disclose your personal information to certain third parties.

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 and/or ANZ to detect and protect against consumer fraud;
- any related company of ANZ which will use the information for the same purposes as ANZ and will act under ANZ's Privacy Policy;
- 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 (where you are a life insured who is not the policy owner);
- regulatory bodies, government agencies, law enforcement bodies and courts.

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;
- There are disclosure obligations to third parties under the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006*.

**Information required by law**

ANZ 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 [onepath.com.au/privacy-policy](http://onepath.com.au/privacy-policy)

**Life risk – sensitive information**

For life risk products, where applicable, we may collect health information with your consent. Your health information will only be disclosed to service providers or organisations providing medical or other services for the purpose of underwriting, assessing the application or assessing any claim.

## **Privacy consent**

We and other members of the ANZ Group may send you information about our financial products and services from time to time. ANZ may also disclose your information to its related companies or alliance partners to enable them or ANZ to tell you about a product or service offered by them or a third party with whom they have an arrangement.

You may elect not to receive such information at any time by contacting Customer Services.

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 or ANZ personal information about someone else, please show them a copy of this document so that they may understand the manner in which their personal information may be used or disclosed by us or ANZ in connection with your dealings with us or ANZ.

## **Privacy Policy**

Our Privacy Policy contains information about:

- when we or ANZ 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 or ANZ has breached the Privacy Act or an applicable code and how we and/or ANZ 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@onepath.com.au](mailto:privacy@onepath.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 133 665.

More information can be found in our Privacy Policy which can be obtained from our website at [onepath.com.au/privacy-policy](http://onepath.com.au/privacy-policy)

## **Overseas recipients**

We or ANZ may disclose 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 our Privacy Policy at [onepath.com.au/privacy-policy](http://onepath.com.au/privacy-policy)