

# ANZ SUPER ADVANTAGE

## INSURANCE APPLICATION AND SHORT FORM PERSONAL HEALTH STATEMENT DEATH ONLY OR DEATH AND TPD APPLICATIONS (UP TO \$1,000,000 COVER)



1 February 2020

Customer Services

Phone 13 38 63

Email [customer@onepath.com.au](mailto:customer@onepath.com.au)

Website [anz.com](http://anz.com)

### INSTRUCTIONS

- Please complete sections 1–6 for all Death only and Death and Total and Permanent Disablement (TPD) applications up to and including \$1,000,000 (including any existing cover) or if joining outside eligibility rules.
- If you are applying for cover with OnePath Life for over \$1,000,000 please complete a Full Personal Health Statement available from Customer Services on 13 38 63 or at [anz.com](http://anz.com)
- Check your Welcome Letter for any restrictions applying to your insurance.
- If you need any assistance, contact Customer Services on 13 38 63 weekdays between 8.30am and 6.30pm (AEST).
- Please ensure that all applicable questions are fully answered. Date and sign the form and return to:

**ANZ Super Advantage**  
**OnePath Custodians Pty Limited**  
GPO Box 4028  
Sydney NSW 2001

### 1. YOUR DETAILS

Member number

Employer plan name (if applicable)

Title  Mr  Mrs  Ms  Miss  Dr  Other

Surname

Given name(s)

Date of birth          Male  Female

Residential address (this cannot be a PO Box)

Suburb/Town

State

Postcode

Country

Postal address (if different from above)

Suburb/Town

State

Postcode

Country

Home phone

Business phone

Mobile phone

Fax

Email

I authorise one of OnePath Life's underwriting staff or an authorised service provider to contact me by phone if further information is required.

I can be contacted during the following times:

Monday  Tuesday  Wednesday  Thursday  Friday  Any business day

Between  am/pm and  am/pm

Please tick your preferred contact method:

home phone  business phone  mobile phone

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### 2. AMOUNT OF COVER

#### Employer-sponsored members

I wish to apply for additional voluntary insurance cover or I am over my Plan AAL. Please check your Member Benefits Schedule for any restrictions applying to your insurance.

Are you currently on Basic or Enhanced Rates? (Refer to your Welcome Letter for details of applicable cover.)

Basic Cover     Enhanced Cover

Insurance cover

Death Only     Death and TPD

Total insurance amount requested (including current cover)\* \$

Personal members

Death Only     Death and TPD \$

\* If the total insurance amount exceeds \$1,000,000 please complete sections 1–3, sign the declaration in section 6 and complete a Full Personal Health Statement, available from Customer Services on 13 38 63 or at anz.com

### 3. OCCUPATION

Occupation

Occupational duties (include the percentage of time spent on each)

Occupational duties	%	Occupational duties	%
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Hours worked per week\*  Annual salary \$  Amount of manual work  %

\* Average over the past six months.

### 4. GENERAL DETAILS

Have you smoked tobacco, or any other substance within the past 12 months, or used a nicotine replacement treatment or anti-smoking medication within the past three months?  Yes  No

If yes please state type and quantity per day:

If you smoke more than 40 tobacco cigarettes per day and/or you smoke any other substance, please complete a Full Personal Health Statement available from Customer Services on 13 38 63 or anz.com

Non-smokers – Have you ever smoked regularly in the past?  Yes  No

If yes please state type and quantity per day:

If you have smoked more than 40 tobacco cigarettes per day and/or you smoked any other substance within the last five years, please complete a Full Personal Health Statement available from Customer Services on 13 38 63 or anz.com

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### 5. HEALTH DECLARATION FOR DEATH ONLY AND DEATH AND TPD COVER UP TO AND INCLUDING \$1,000,000

Other than for colds, flus, minor upper respiratory tract infections or minor headache:

a. Are you now off work due to illness or injury?  Yes  No

b. Have you been absent from work for 7 consecutive calendar days in the last 12 months due to illness or injury?  Yes  No

Are you currently prevented from performing all the usual duties of your occupation on a full-time basis of at least 30 hours per week due to illness or injury? (even if you are currently working less than 30 hours per week for non-medical reasons)  Yes  No

Have you ever made, or are you entitled to make a claim for any type of sickness, accident or disability benefit(s), Workers' Compensation or any other form of compensation (including Centrelink payments) due to illness or injury?  Yes  No

Have you been diagnosed with a medical condition that is expected to reduce your life expectancy to less than 12 months from today?  Yes  No

Have you ever had an application for life, trauma or disability insurance on your life declined, deferred, accepted with a higher than normal premium (other than for smoking) or issued with a restriction or exclusion?  Yes  No

Other than for colds, flus, minor upper respiratory tract infections or minor headache:

a. Do you have a medical condition for which you take or have been advised to take medication or undergo any other form of medical treatment?  Yes  No

b. Are you currently under investigation or been advised to undergo investigations for any medical condition or symptom?  Yes  No

**If you answered yes to any question in Section 5 please complete a Full Personal Health Statement available from Customer Services on 13 38 63 or anz.com**

### 6. IMPORTANT NOTICE AND AUTHORISATION

#### 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, that 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.

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### DECLARATION BY THE LIFE INSURED

I acknowledge that:

- I have either downloaded the current electronic version, or received a current hard copy version of the Product Disclosure Statement (PDS) and have read and understood the information it contains regarding the insurance offered.
- I understand that the Trustee's 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 have read the Trustee's Duty of Disclosure section above, and understand my obligations under the *Insurance Contracts Act 1984*.
- I have read and carefully considered the questions in this application and all the answers and any other information provided are true and correct and form the basis of the insurance contract.
- I am not restricted by injury from carrying out all my normal work duties and I am working my normal hours.
- If I do not complete this application correctly, or I do not sign and date this form, my application will be invalid and won't be considered by the Insurer.
- Insurance cover will not commence until I am notified of acceptance in writing.
- I have read the Privacy Statement in this form, and consent to the collection, use, storage and disclosure of my personal information (including health and other sensitive information) as described in the Privacy Statement set out in this form (refer to page 5), ANZ's Privacy Policy which is available at [anz.com/privacy](http://anz.com/privacy), OnePath Custodians' Privacy Policy which is available at [onepath.com.au/superandinvestments/privacy-policy](http://onepath.com.au/superandinvestments/privacy-policy) and OnePath Life's Privacy Policy which is available at [onepath.com.au/insurance/privacy-policy](http://onepath.com.au/insurance/privacy-policy). If I have provided information about another person in this application (for example my spouse/a beneficiary or life insured), I declare that I have the consent of that person to do so. I understand that ANZ, OnePath Custodians and OnePath Life require me to inform the person concerned that I have done so and direct them to the relevant Privacy Policies so they may understand the manner in which their personal information (including health and other sensitive information) may be used and disclosed by ANZ, OnePath Custodians and OnePath Life.
- OnePath Life is no longer a related body corporate of OnePath Custodians.
- 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).
- 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.

Name of applicant

Signature of applicant

Date

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### 7. PRIVACY STATEMENT

Your personal information will be handled by OnePath Custodians, as issuer of this product, ANZ, as alliance partner of IOOF Holdings Limited (IOOF), who wholly owns OnePath Custodians, and One Path Life, as group life insurer. Please read the information contained in this section carefully, as it describes how each of these parties will handle your personal information. In this section, any reference to your personal information includes any health or other sensitive information that OnePath Custodians, ANZ or OnePath Life may hold about you. Any or all of these parties may send you information on their products and services from time to time. If you do not wish to receive this information from any or all of these parties, please ensure you follow the separate opt out processes for the relevant party specified below.

#### OnePath Custodians Privacy Statement

OnePath Custodians, as issuer of this product, will collect your personal information when you deal with it, its agents, its related bodies corporate, including other members of the IOOF Group, alliance partners, or suppliers acting on OnePath Custodians' behalf.

OnePath Custodians uses your personal information to issue and administer our products and services. If you do not provide us with your personal information, we may not be able to issue this product to you and/or administer your account.

OnePath Custodians may disclose your personal information to related bodies corporate, relevant group life insurers, such as OnePath Life, and organisations, including those in an alliance with us, to distribute, manage and administer our products and services, carry out business functions, undertake analytics activities and as set out in OnePath Custodians' privacy policy.

OnePath Custodians may also use and disclose your personal information to send you information on its products and services from time to time. OnePath Custodians may also disclose your personal information to its related companies, relevant group life insurers, such as OnePath Life and organisations, including those who are in an alliance with it, to enable those organisations to send you information about their products and services. You can opt out of OnePath Custodians using and disclosing your information for this purpose at any time by calling Customer Services on 133 665.

OnePath Custodians may also send your personal information overseas, as set out in OnePath Custodians' privacy policy.

OnePath Custodians' privacy policy, available at [onepath.com.au/superandinvestments/privacy-policy](http://onepath.com.au/superandinvestments/privacy-policy), sets out how (i) you can access and/or correct your personal information; (ii) you can make a privacy complaint; and (iii) OnePath deals with any privacy complaints.

#### ANZ Privacy Statement

ANZ is committed to ensuring the confidentiality and security of your personal information. As an alliance partner of IOOF, ANZ will collect your personal information when you deal with it, its agents, or its related bodies corporate, issuers, insurers and distributors of this product, or suppliers acting on ANZ's behalf. ANZ may use your personal information for the purposes of carrying out business functions, undertaking analytics activities and as otherwise set out in ANZ's privacy policy available at [anz.com/privacy](http://anz.com/privacy).

ANZ may disclose your personal information to certain third parties, including OnePath Custodians (as issuer of this product), OnePath Life (as general life insurer), ANZ's related companies, organisations, including those in an alliance with us, to distribute, manage and administer our products and services, carry out business functions, undertake analytics activities and as otherwise set out in the ANZ Privacy Policy.

ANZ may send you information about its products and services from time to time. ANZ may also disclose your personal information to its related companies or alliance partners to enable them or ANZ to tell you about a product or service. You can opt out of ANZ using and disclosing your information for this purpose at any time by contacting ANZ Customer Services on 13 13 14.

Sometimes ANZ discloses your personal information overseas. The location varies, but includes the Philippines, India, Ireland, the UK, the USA, China and countries within the European Union.

ANZ's privacy policy, available at [anz.com/privacy](http://anz.com/privacy), sets out how (i) you can access and/or correct your personal information; (ii) you can make a privacy complaint; and (iii) ANZ deals with any privacy complaints.

#### OnePath Life Privacy Statement

OnePath Life, as group life insurer of this product, will collect your personal information when you deal with it, its agents, or its related bodies corporate, distributors of this product, or suppliers acting on OnePath Life's behalf.

OnePath Life may disclose your personal information to related bodies corporate and organisations, including service providers and those in an alliance with us, to distribute, manage and administer our products and services, carry out business functions, enhance customer service, undertake analytics activities and as set out in OnePath Life's privacy policy.

OnePath Life may also use and disclose your personal information to send you information on its products and services from time to time. OnePath Life may also disclose your personal information to its related companies and organisations, including those who are in an alliance with it, to enable those organisations to send you information about their products and services. You can opt out of OnePath Life using and disclosing your information for this purpose at any time by contacting customer services on 133 667.

In disclosing or using your personal information as described above, OnePath Life may also send your personal information overseas, as set out in OnePath Life's privacy policy.

OnePath Life's privacy policy, available at [onepath.com.au/insurance/privacy-policy](http://onepath.com.au/insurance/privacy-policy) sets out how (i) you can access and/or correct your personal information; (ii) you can make a privacy complaint; and (iii) OnePath deals with any privacy complaints.