

# Special offer to increase insurance

## NEW EMPLOYER-SPONSORED MEMBERS ONLY (AS APPLICABLE)\*

This form must be completed in full. This form is for legalsuper Employer-sponsored members to:

1. Increase their existing Death and Total and Permanent Disablement cover [or Death Only cover] from the Default Cover Level to the Automatic Acceptance Level; and/or
2. Apply for Salary Continuance (SC) cover of up to \$6,000 per month with a two-year benefit period. If you wish to vary your insurance cover in any other way, please complete the relevant forms available at [legalsuper.com.au](http://legalsuper.com.au)

You can only apply to increase your cover with this form if you are: (1) an Employer-sponsored member; (2) aged less than 70; (3) aged less than 65 years for SC cover; and (4) you answer the questions in Section 1 [Screening Questions] to the satisfaction of the insurer and you sign and date this application in Section 6 [Declaration and signature]. Please carefully read Section 5 [Important Notices] and Section 6 [Declaration and signature]. Once you have read the declaration, please sign and date the form and return this to legalsuper at the address shown above. It will not be accepted if unsigned and undated.

Some words or terms in this form have a special meaning in the insurer's policy documents. These words appear capitalised and are explained in the *Employer Sponsored Super & Personal Super Additional Information* document.

Please use **BLOCK LETTERS** and **BLACK INK** when completing this form.

\* Please note that the whole or only parts of this form may not be applicable to you if your employer entered into a separate Death, Total and Permanent Disablement (TPD) and/or Salary Continuance insurance arrangement with the Trustee. We will let you know if separate insurance arrangements apply to you and provide you with a copy of your employer's *Insurance Guide*. You should read your employer's *Insurance Guide* to determine if this whole form or only parts of it are not applicable to you.

## Return this completed form to:

legalsuper  
Locked Bag 5081  
Parramatta NSW 2124  
Phone: 1800 060 312

To be eligible to increase your insurance under a special offer, you must return this completed, signed and dated form within 60 days of the date of your Welcome Letter

Please refer to the legalsuper *Product Disclosure Statement (PDS)* and *Employer Sponsored Super & Personal Super Additional Information* document (available online at [legalsuper.com.au/pds](http://legalsuper.com.au/pds)) for full terms and conditions that apply to your application.

### 1. Screening Questions

**If you answer 'Yes' to any of questions 1 to 4 you cannot proceed with this application and will need to apply for cover by completing the Personal Statement, available online at [legalsuper.com.au/forms](http://legalsuper.com.au/forms)**

**If you answer 'No' to all of questions 1 to 4 (including both parts 4a and 4b) continue to answer questions 5 and 6.**

**IMPORTANT:** Your responses to the questions below will be checked at the time you make a claim. Therefore, you must answer all questions truthfully and accurately. If you don't, any insurance cover you receive under this application may later be reduced or refused. Please read the 'Duty of disclosure' information in this form.

#### QUESTIONS 1 to 4

1. Other than for colds, flu, 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
2. Have you been diagnosed with a medical condition that is expected to reduce your life expectancy to less than 24 months from today?  Yes  No
3. Have you ever had an application for life, trauma or disability insurance declined, deferred, accepted with a higher than normal premium (other than for smoking) or issued with a restriction or exclusion?  Yes  No
4. a) Other than for colds, flu, minor upper respiratory tract infections or minor headaches, 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

#### QUESTIONS 5 and 6

Only complete these questions if you answered 'No' to all of questions 1 to 4 (including both parts 4a) and 4b)) above

5. 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

**If you answered 'Yes' to this question you are entitled only to Limited Cover for Death & TPD cover (but you are not eligible for Salary Continuance cover under this Special offer and will need to apply for cover by completing the Personal Statement).**

6. Have you ever made or are you entitled to make a claim for
  - a) Any TPD benefit from any source, or  Yes  No
  - b) Other than any TPD claim disclosed in questions 6a, 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

**If you answered 'Yes' to this question you are entitled only to Limited Cover for Death & TPD cover (but you are not eligible for Salary Continuance cover under this Special offer and will need to apply for cover by completing the Personal Statement).**

## 2. Personal details

legalsuper Membership Number (if known)

Mr  Mrs  Ms  Miss  Dr  Justice

Gender

Male  Female

Surname

Given Names



Date of birth (dd/mm/yyyy)

Postal Address



Town or Suburb

State

Postcode

Telephone number

Mobile number

Email



## 3. Increase your existing Death & TPD cover (or Death Only cover) from the Default Cover Level to the Automatic Acceptance Level

Choose how many additional units of Death and TPD cover (or Death Only cover) you would like to take out (on top of your existing units).

Your age upon joining legalsuper	Additional units of cover			
	1	2	3	4
24 years and under	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25 to 44 years	<input type="checkbox"/>	<input type="checkbox"/>	n/a	n/a
45 years and older	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	n/a

Note that you cannot hold more than \$3 million TPD cover at any time.

## 4. Apply for Salary Continuance (SC) cover

### Important Notes:

- 1) To be eligible for the Salary Continuance Special Offer you must have truthfully answered 'No' to all parts of the six Screening Questions in Section 1 of this form; and
  - 2) In the event of a claim your responses to these questions will be checked by the insurer to determine your eligibility for this special offer. Please read the Duty of Disclosure information in this form.
- a) What is your current Salary? Note: for members who are employed this is before tax and excluding employer superannuation contributions. For members who are self-employed or working as a partner or a director, Salary is gross income after costs and expenses (but before income tax). Please note that at claim time the definition of Salary used to calculate the Monthly Benefit depends upon whether you are an employee, or self-employed or working as a partner or a director. Please refer to the *Employer Sponsored Super & Personal Super Additional Information* document for the insurer's definition of Salary.
- \$  ,  per year (annual salary)
- b) Please indicate the amount of SC cover you require under this special offer (including any existing cover up to a maximum monthly gross benefit of \$6,000 including a superannuation contribution benefit):
- \$  ,  per month (before tax)
- The maximum monthly benefit you are entitled to cannot be higher than 85% of your monthly Salary (any amount selected in excess of 75% is paid as a Superannuation Contribution Benefit to your legalsuper account).
- c) Do you work at least 15 hours per week on a regular basis?  Yes  No
- d) Are you employed in or engaged on a Casual Basis (defined by the insurer as you are performing all the normal duties of your occupation, are working on an hourly, daily or weekly basis without any commitment from your Employer or principal that your engagement will be on-going and have no entitlement to holiday leave or sick leave)?  Yes  No

You are not eligible for the Special offer for Salary Continuance if you answered 'No' to 4c or 'Yes' to 4d.

- e) Please choose one of the following Waiting Period options by inserting a cross [X] in the relevant box:

30 days  60 days  90 days

The Waiting Period is the period you must remain Totally Disabled or Partially Disabled before any benefit becomes payable. You are not entitled to any benefit during the Waiting Period.

Benefits are payable monthly in arrears. This means that your first payment will be paid no earlier than 30 days after the expiry of your chosen Waiting Period.

**If you require cover above \$6,000 per month and/or a benefit period 'to age 60' or 'to age 65', please complete the Superannuation change details form.**

## 5. Important Notices

### A) Previous applications

The insurer will not assess your application if you have previously applied under this special offer - whether your application was approved or declined. You will need to apply for additional cover by providing health evidence.

### B) Terms and conditions

Legal Super Pty Ltd, as trustee of legalsuper, has taken out a contract of insurance with OnePath Life Limited (ABN 33 009 657 176) (OnePath Life) to provide the insurance benefits in legalsuper. On becoming a member, you are bound by the terms and conditions of this contract of insurance.

### C) 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.

In order for the Trustee to comply with the duty of disclosure, we require you to tell us (the Trustee and the insurer), anything you know, or could reasonably be expected to know, that may affect the insurer's decision to insure you and on what terms.

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

#### If you do 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 you do not tell the insurer and the Trustee anything you are required to, and the insurer would not have provided the insurance or entered into the same contract with the Trustee if you had told the insurer and the Trustee, 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 insurance fee that would have been payable if you had told the insurer and the Trustee everything you 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 you had told the insurer and the Trustee everything you 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.

### 6. Declaration and signature

- I have read and understand the insurance information contained in the most recent version of legalsuper's *Superannuation Product Disclosure Statement, Employer Sponsored Super & Personal Super Additional Information* document (both available online at [legalsuper.com.au/pds](http://legalsuper.com.au/pds)) and, if applicable to me, the *Insurance Guide* related to my employer's insurance arrangements with the Trustee.
- The answers that I have provided to all questions in this application are true and correct (including those not in my own handwriting).

- I have read the Duty of Disclosure in this form and understand the consequences available to OnePath Life if I fail to tell OnePath Life any matter relevant to its decision to provide insurance. I understand that the duty of disclosure continues after I have completed this application until I am notified in writing that my application for insurance has been accepted.
- I understand that my insurance will not become effective until OnePath Life has accepted my application for insurance cover in writing.
- I consent to OnePath Life collecting, using, storing and disclosing my personal information (including health and other sensitive information) to assess and process my application, as well as to manage and administer my insurance in accordance with the OnePath Life's Privacy Policy which is available at OnePath's website [onepath.com.au/insurance/privacy-policy](http://onepath.com.au/insurance/privacy-policy) or by calling Customer Services on 133 667. The parties to whom OnePath Life may routinely disclose the information include: the policy owner and the policy owner's administration services provider; any related company of OnePath Life Limited; any agent, contractor or service provider that helps OnePath Life carry out its activities; and organisations that assist OnePath Life to prevent unlawful activity. I understand that some of the recipients of this information may be located outside of Australia and may not be established in or do not carry on business in Australia. OnePath's Privacy Policy contains information about where these overseas recipients are located and also details: how I can access and correct my information; how I can raise concerns about privacy breaches; and how OnePath will deal with these matters.
- If I give OnePath Life information about someone else, I will inform them of the contents of this authorisation so they understand how their information may be used and disclosed.
- I have read and understood the legalsuper privacy policy (available at [legalsuper.com.au](http://legalsuper.com.au)). I consent to my personal information being collected and used in accordance with the policy.
- I understand that if my application for cover is accepted, insurance cover will be provided to me on the terms contained in legalsuper's insurance policy with OnePath Life, as changed from time to time.
- 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 understand that increases to insurance fees will apply and insurance deductions from my account will be adjusted.
- I understand that I can only apply once under the special offer to increase my Death & TPD or Death Only cover and/or apply for SC cover. I understand that legalsuper will process the first 'special offer' application that it receives from me (whether by post or electronically).

#### Member's signature

#### Date (dd/mm/yyyy)

Please send the original of this form to:

**legalsuper**  
**Locked Bag 5081**  
**Parramatta NSW 2124**

**To be eligible, legalsuper must receive this form 60 days from the date of your Welcome Letter.**

This offer and the information above is provided to new legalsuper members in the Employer-Sponsored Division only. This offer does not take into account your objectives, financial situation or needs. You should read the legalsuper *Superannuation Product Disclosure Statement (PDS)* and *Employer Sponsored Super & Personal Super Additional Information* document (available free of charge online at [legalsuper.com.au](http://legalsuper.com.au) or by calling **1800 060 312** (8am to 8pm [AEST] Monday to Friday) before deciding whether to acquire or obtain cover under the Group Life Insurance Policy or Group Income Protection Policy. The Group Life Insurance Policy and Group Income Protection Policy are issued by OnePath Life Limited (OnePath Life) (ABN 33 009 657 176, AFSL 238 341), to Legal Super Pty Ltd as policy owner.