





### 3. Your personal statement and confirmation of requirements (continued)

#### (c) Salary Continuance cover

To be eligible for Salary Continuance cover you must be permanently employed and working at least 15 hours per week.

Please tick the type of Salary Continuance cover below that you had in your current insurance cover.

Indemnity       Agreed value cover\*\*

\*\* An additional premium will be applied to your Salary Continuance cover. In the event of a claim for an agreed value Salary Continuance benefit, we will require proof of income at the date of claim. If this amount is less than the amount stated on your acceptance certificate from your current fund/insurer, we may require financial proof of income from the start date of your current insurance cover.

Salary Continuance cover (per month) A\$          (maximum amount of cover you can transfer is \$20,000 per month)

Current Salary Continuance waiting period  days (ie 30 days, 60 days, 90 days)

Current Salary Continuance benefit period  (ie 2 years or to age 65)

I understand that the transfer of my current Life, TPD and Salary Continuance cover once accepted by the Insurer, will be subject to the terms and conditions of Advance Super insurance arrangements with the Insurer and that my Salary Continuance benefit period and waiting period (if applicable) will be matched to the Advance Super offer where possible.

**① You must obtain and attach an up-to-date statement (such as an acceptance certificate, letter or email) from your current fund/insurer confirming the type and level of cover, or any loadings or exclusions currently held with the current fund/insurer. All written evidence must be produced and dated within the last 60 days.**

3. Are you currently absent from work or unable to carry out all of the duties of your current or usual occupation on a full-time basis, due to an injury or illness (even if you are not currently working on a full-time basis)?  Yes  No

4. Have you been paid, or are you eligible to be paid, or have you lodged a claim for a TPD/Salary Continuance benefit with another superannuation fund or life insurance policy?  Yes  No

5. Have you been diagnosed with an illness that reduces your life expectancy to less than 12 months from today?  Yes  No

**If you answered 'Yes' to any of the questions 3 – 6 you will not be eligible to transfer your existing insurance cover from your current fund/insurer to Advance. You are not required to complete the remaining sections of this form.**

6. Is your cover under the current insurance cover subject to any premium loadings and/or exclusions including but not limited to pre-existing conditions, exclusions, or restrictions in regards to medical or other conditions.  Yes  No

**① If you answered 'Yes' please provide details of the premium loadings, exclusions and/or restrictions, including a copy of the advice you received from your current fund/insurer advising you of the acceptance of your cover subject to these additional terms.**

**Important note:** If any of your benefits from your current fund/insurer, had more than two exclusions, or had a loading of more than +100% extra mortality, then cover for that benefit cannot be transferred to Advance Super.

### 4. Declaration and signature

#### Duty of disclosure

Before you enter into a contract of life insurance with an insurer, you have a duty under the Insurance Contracts Act 1984 to disclose to the insurer every matter that you know, or could reasonably be expected to know that is relevant to the insurer's decision whether to accept the risk of insurance and, if so, on what terms.

You have the same duty to disclose those matters to the Insurer before you extend, vary, reinstate or transfer a contract of insurance. Any disclosure that you have made or ought to have made at the inception of a contract of life insurance being extended, varied, reinstated or transferred must be made as part of your application for the Insurer to accept your application for cover. A transfer of an existing insurance cover does not release an applicant from the duty of disclosure under the Insurance Contracts Act 1984.

#### Non-disclosure and misrepresentation

If you fail to comply with your duty of disclosure and the Insurer would not have entered into the contract on any terms if the failure had not occurred, the Insurer may avoid the contract within three years of entering into it. If your non-disclosure is fraudulent, the Insurer may avoid the contract at any time. An insurer who is entitled to avoid a contract of insurance may, within three years of entering into it, elect not to void it but to reduce the sum that you have been insured for in accordance with a formula that takes into account the contribution that would have been payable if you had disclosed all relevant matters to the insurer.

#### 4. Declaration and signature (continued)

##### Privacy

By completion of this form you consent to any personal information, including information that may be of a sensitive nature we or the Insurer may collect about you in the normal course of our and the Insurer's business, being used as outlined in our and the Insurer's respective Privacy Policies. These policies are designed to protect your interests and are consistent with the requirements of the Privacy Act. A copy of the Insurer's privacy policy can be obtained from [www.aia.com.au](http://www.aia.com.au). Please refer to the relevant Advance PDS for information on the Advance privacy statement.

##### By signing this form I acknowledge that:

- I have been given a copy of the current Advance Personal Protection Package (APPP) PDS and any Supplementary Product Disclosure Statement (SPDS), as per confirmed by my financial adviser, which I have read and understood;
- if I do not fully complete, sign and date this **Individual Insurance Transfer** form, I will not be eligible to transfer my current insurance cover to Advance Super;
- if the Insurer accepts my application, the cover I hold as at the transfer date with my current fund/insurer will be replaced with an equal amount of cover under Advance Super subject to a maximum of \$2 million each for Life and TPD cover and \$20,000 per month for Salary Continuance cover;
- my replacement cover will not commence in Advance Super until the later of:
  - the Insurer accepting my application; and
  - cancellation of my current insurance cover with my current fund/insurer;
- The Insurer and any person appointed by the Insurer may undertake appropriate enquiries and investigations to verify the answers I have provided;
- Advance and the Insurer may investigate whether any premium loadings, restrictions and exclusions apply to your current insurance cover;
- I agree to provide Advance or the Insurer with access to the health and/or financial evidence I provided to any current fund and their insurer or retail insurer in an application for the cover. Any non-disclosure to a current fund/insurer may be acted upon by Advance or their insurer, and
- should it become apparent to Advance or the Insurer that I have not responded truthfully or satisfied the requirements that I confirmed in Section 4 above, then any insured benefit that may be payable may be reduced by the insured amount paid or payable by my current fund otherwise; or any other fund or retail insurance arrangement; or any policy issued under any option that I exercised, as a consequence of my failure to abide by these conditions;
- I authorise the Insurer to disclose personal medical information and any other information gathered in relation to this application to my financial adviser and any other entity involved in the administration of this insurance, including reinsurers, medical consultants and legal advisers;
- I hereby declare that the information contained in this **Individual Insurance Transfer** form (whether written in my hand or not) is true and correct and that no information material to this application for transfer has been withheld;
- if the Insurer accepts my application, my replacement cover will be held upon and subject to the terms and conditions of the relevant Master Policy of insurance held by the Trustee and the terms and conditions applying to my cover through my current fund/insurer will cease to apply;
- I understand that the Trustee is the owner of the relevant Master Policy effected with the Insurer and that I will become a Life Insured under that Master Policy;
- I have read the Duty of Disclosure notice and understand its contents and what is meant by my duty to disclose. I also understand that my duty to disclose continues after I have completed this application for transfer until the Insurer has accepted the risk;
- I understand that my total Life and Total and Permanent Disablement insurance cover will convert to a fixed sum insured;
- I acknowledge that premiums are paid to, and my replacement cover and benefits provided in the relevant Master Policy are liabilities of the Insurer. Premiums are not deposits in, nor liabilities of, and not guaranteed by any bank or company whether related to the Insurer or not;
- I authorise Advance to deduct the premiums and charges for this insurance from my Account, retain the Administration fee and pay the balance on my behalf to the Insurer.
- I agree to receive any communications (including any confirmation of any transaction, dealing, notice of material changes and significant events and other information I may request) and documents (including periodic reports) which Advance or the Insurer is or may be required to give, or has agreed to give, to me relating to my Account via Investor Online, or any other electronic means chosen by Advance or the Insurer (and for these purposes, I agree I will be taken to have received the relevant information whether or not I access the information).

Signature

Date

## Important information about Individual Insurance Transfer

The Insurer agrees to provide individual transfer terms for your current insurance cover with another superannuation fund or insurer on the following basis.

- The maximum amount of cover that can be transferred is:
  - \$2 million each for Life and Total Permanent Disablement (TPD).
  - \$20,000 per month for Salary Continuance.
- The waiting period (WP) and benefit period (BP) will be matched to Advance's insurance offer. If your current WP is different, the WP for your replacement cover will be rounded up to the next longest WP offered by Advance, ie a 45 day WP will be rounded up to a 60 day WP in the insurance cover. For BP, you will receive the equivalent of your current BP, or if not available in the insurance cover, the lesser BP offered in the replacement insurance cover.
- The level of cover provided to you will be the level of cover currently held through your current fund/insurer and only where the current insurer's acceptance terms were less than or equal to +100% extra mortality or two exclusions for Life/TPD and Salary Continuance.
- For Life/TPD and Salary Continuance cover, if an exclusion is transferred from your current fund/insurer, the exclusion wording of the relevant Advance PDS will apply.
- The current cover held through your 'current fund/insurer' ('current fund/insurer' refers to another retail insurer which you intend leaving) or 'current insurance cover' ('current insurance cover' refers to any external retail insurance arrangement you might intend cancelling) ceases on acceptance of cover in Advance Super.
- You have not received nor is eligible for a TPD or Salary Continuance benefit from another insurance arrangement.
- You are not terminally ill with a life expectancy of less than 12 months.
- You are gainfully employed and physically capable of undertaking gainful employment for at least 30 hours per week.
- You must be under the age of 65 at the date of application.
- You must meet the eligibility criteria for insurance cover as set out in the relevant PDS.
- You do not continue the cover under another insurance arrangement.
- You provide a copy of an up-to-date statement, letter or email produced by the current fund/insurer dated within the last 60 days, as evidence of cover currently held with the current fund/insurer.
- Your replacement cover will not commence in Advance Super until the later of:
  - the Insurer accepting your application, and
  - the existing insurance cover with the current fund/insurer being cancelled.
- You complete this **Individual Insurance Transfer** form to the Insurer's satisfaction.
- Occupational classifications will be based on the classifications used by Advance Super.
- Ratings and premiums may change to adapt to Advance's ratings and premiums.