

Transfer of insurance cover form

Please use **BLOCK LETTERS** and **black ink**.

Send your completed form to:

Australian Ethical Super, Locked Bag 20013, Melbourne VIC 3001.

You may be eligible to transfer any existing Death or Death and Total & Permanent Disablement (TPD) or Income Protection insurance cover that you have through another regulated superannuation fund, to the Australian Ethical Retail Superannuation Fund (subject to conditions).

Important notes

If you wish to apply to transfer your existing insurance cover you must meet the following requirements:

- your existing cover must be of similar nature to the cover provided under the Fund's insurance arrangements; and
- you are a member of the Fund; and
- you complete STEP 1 and provide all the required details; and
- you answer all questions contained in STEP 2 Personal Statement and Confirmation of Requirements; and provide the required documentation; and
- you sign and date the declaration contained in STEP 3.

If you don't complete details about your occupation in Step 3, you will be classified as being in the occupation category "Standard", irrespective of what occupation category you were listed as having with your previous insurance.

If transfer of your insurance cover is accepted, but you continue to hold the insurance cover transferred to the Fund elsewhere, then any benefit paid to you under insurance held through the Fund will be reduced by the amount of insurance cover that you continue to hold elsewhere that was the subject of your transfer cover application.

If the insurance cover you are seeking to transfer has restrictions (such as loadings or exclusions) then insurance cover accepted for transfer in the Fund will have the same restrictions applied.

If the Fund's Insurer (MetLife Insurance Limited ABN 75 004 274 882, AFSL No, 238 096) accepts your application to transfer cover, you will receive the cover as Fixed Cover and any Unitised Cover already held in the Fund will be transferred to Fixed Cover.

If you are applying to transfer cover from more than one fund, you will need to complete a separate form for each fund.

The **maximum** amount of insurance cover that you can transfer to the Fund (together with insurance cover you already hold in the Fund, or have applied to hold) is:

- for Death or Death & TPD; \$1,500,000
- for Income Protection; \$15,000 per month

Step 1: Personal details

Member number

Surname

Date of birth

D	D	M	M	Y	Y	Y	Y
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Full given name(s)

Street number and name

Suburb

State

Postcode

Country

Home phone number

Mobile

Interest in the Australian Ethical Retail Superannuation Fund (ABN 49 633 667 743) are offered by Australian Ethical Investment Ltd (ABN 47 003 188 930, AFSL 229949) and issued by the Trustee of the Fund, Australian Ethical Superannuation Pty Ltd (ABN 43 079 259 733). USI AET0100AU.

Step 1: Personal details continued

Other superannuation fund details (the fund from which cover is to be transferred)

Name of fund

Member number

ABN

USI

This application will be considered incomplete without at least ABN or SPIN of the identifiers provided.

Smoking status

Smoker

Non smoker

Step 2: Default cover

In order for the Fund and MetLife to consider your application to transfer your insurance cover from another regulated superannuation fund you must answer each of the following questions.

1. Please confirm (by ticking the box below) that all of the following statements are true and correct:

- I agree to cancel the existing insurance cover held with my other regulated superannuation fund once the transfer to Australian Ethical Super has been completed;
- I understand that if my previous insurance is not cancelled, I may not be able to make a claim with respect to the transferred insurance cover;
- I acknowledge I will not be transferring the cover under the other regulated superannuation fund to any other division or section of that fund or to any other fund; and
- I acknowledge I will not either effect a continuation option, or subsequently reinstate cover within the other regulated superannuation fund or any other division or associated fund.
- I confirm I have never had an application for Life, TPD, Trauma or Income Protection insurance declined by an insurer.

Important

If transfer of your insurance cover is accepted, but you continue to hold the insurance cover transferred to the Fund elsewhere, then any benefit paid to you under insurances held through the Fund will be reduced by the amount of insurance cover that you continue to hold elsewhere that was the subject of your transfer cover application.

I confirm that these statements are true and correct and agree to abide by these requirements.

Yes

No

If your answer is "No", you will not be eligible to transfer your insurance cover, please contact us and we will discuss further options available to you.

2. I confirm that my current level and type of cover under the other regulated superannuation fund is as follows:

a. Death Cover: \$

b. TPD Cover: \$

c. Income Protection Cover: \$ per month

Waiting Period: days

Benefit Period: years

If the Waiting Period and/or Benefit Period are not available, the next nearest Waiting Period and Benefit Period will be provided.

Please also attach the most recent superannuation statement, confirming the level and type of cover you have under the fund you are transferring your cover from.

Step 2: Default cover continued

3. Health Questions

a. Are you restricted, due to Illness or Injury, from carrying out the identifiable duties of your current and normal occupation on a full-time basis (even if you are not currently working on a full-time basis)? Full time basis is considered to be at least 35 hours per week.

Yes No

b. Have you been diagnosed with an illness that reduces your life expectancy to less than 3 years from today?

Yes No

c. Have you been paid, or are you eligible to be paid, or have you lodged a claim for a Total and Permanent Disablement benefit from a superannuation fund or life insurance policy?

Yes No

If you answered "Yes" to any of the Health Questions a) through to c) you will not be eligible to transfer your insurance cover via this form and you will need to apply for cover by completing the Insurance Application form available from our website. Applications are subject to acceptance by MetLife.

d. Is your cover under the other superannuation fund subject to any premium loading, exclusion including but not limited to pre-existing conditions exclusions, or restriction in regards to medical or other conditions?

Yes No

If 'Yes' details can be provided below or by supplying a copy of the advice you received from the Insurer or the superannuation fund confirming your acceptance of cover subject to these additional terms. You will be advised if your transfer of cover is accepted or not.

Continued over

Step 3: Occupation category

The category of occupation that we record for you will directly impact on the amount you pay for insurance, or the level of insurance cover you receive. It is in your best interest to ensure that we have your occupation correctly recorded.

The following table can be used to determine your occupation category. Please review the table and then advise us of your correct occupation category. In addition to the table we will consider your actual occupation and the industry in which you are employed, and in some circumstances, your earnings to finalise your occupation category. If you don't tell us your occupation, you will be classified under Standard.

Determination of occupation category	
<p>Are your duties limited to professional, managerial, administrative, clerical or secretarial work and are these duties undertaken within an office environment at least 80% of the time?</p> <p>Do you hold tertiary qualifications relevant to your current occupation and are a member of a professional institute or registered by a government body, or are you a member of the executive leadership team at your employer?</p> <p>Do you earn an income over \$100,000 per annum?</p>	<p>If you answered yes to all three questions, your occupational category may be Professional.</p>
<p>Are your duties limited to professional, managerial, administrative, clerical or secretarial work and are these duties undertaken within an office environment at least 80% of the time?</p>	<p>If you answered yes to this question, your occupational category may be White Collar.</p>
<p>Do you perform light-manual skilled work or are you trade qualified working in a non-hazardous industry?</p>	<p>If you answered yes to this question, your occupational category may be Standard Plus.</p>
<p>Do you perform moderate to heavy manual work or operate heavy machinery?</p> <p>Do you hold tertiary or trade qualifications relevant to your current occupation?</p>	<p>If you answered yes to both of these questions, your occupational category may be Standard.</p>
<p>Do you perform heavy manual work or operate heavy machinery without trade qualifications?</p> <p>Do you work in a very high risk occupation such as interstate bus/truck driver, labourer or warehouse worker?</p>	<p>If you answered yes to either of these questions, your occupational category will be Basic.</p>

*The determination of your occupation category will be confirmed by the Fund following receipt of your application. If you hold unitised cover, your occupation category will be re-assessed in the event of a claim.

Occupation	Industry	Suggested occupation category
<input type="text"/>	<input type="text"/>	<input type="text"/>

Brief description of your duties

Step 4: Declaration

Duty of disclosure

Before you become insured under a life insurance contract, you have a duty to tell the Insurer anything that you know, or could reasonably be expected to know, that may affect the Insurer's decision to provide the insurance and the terms of that insurance.

You have this duty until the Insurer agrees to insure you. You have the same duty before you extend, vary or reinstate your insurance cover. You do not need to tell the Insurer anything that:

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

If the person entering into the contract 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 person entering into the contract does not tell the insurer anything he or she is required to, and the insurer would not have provided the insurance if he or she had disclosed the information, 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 person had told the insurer everything he or she should have.

However, if the contract has a surrender value, or 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 the insurer would have been in if the person had told the insurer everything he or she should have. However, this right does not apply if the contract has a surrender value or 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.

Continued over

Step 4: Declaration continued

I declare that I:

- Have read and carefully considered the questions and statements in Step 2 on page 2 and that I undertake to abide by these requirements. All answers provided are true and correct.
 - Have read and understood the Duty of Disclosure above and I have not withheld any information that may affect MetLife's decision as to whether or not to accept my application for cover.
 - Consent to the collection, use and disclosure of personal information by the Australian Ethical Retail Superannuation Fund and MetLife in order to assess my application and any claim under the policy.
 - Consent to MetLife seeking medical information from any doctor/hospital/healthcare professional whom I have consulted.
 - Will provide the Australian Ethical Retail Superannuation Fund and MetLife access to the health evidence I provided to any other regulated superannuation fund and its Insurer in application for this cover and acknowledge that any non-disclosure to another regulated superannuation fund or Insurer may be acted upon by the Australian Ethical Retail Superannuation Fund or MetLife.
 - Agree to be bound by the terms and conditions set out in the insurance policy document.
- My replacement cover will not commence in the Australian Ethical Retail Superannuation Fund until the later of:
 - o MetLife accepting my application; or
 - o Cancellation of my existing insurance cover under my other superannuation fund.
 - The Australian Ethical Retail Superannuation Fund and MetLife may undertake appropriate enquiry and investigation to verify the answers I have provided. These enquires and investigations may be made at any time including, but not limited to, when the Australian Ethical Retail Superannuation Fund and MetLife are considering this application or in the event of a claim at that time.
 - The Australian Ethical Retail Superannuation Fund and MetLife may investigate whether any restrictions that may have applied within the terms of the policy document were applicable to the type and/or level of cover stated on my benefit statement.
 - Should it become apparent to the Australian Ethical Retail Superannuation Fund or MetLife that I have not undertaken the requirements that I confirmed in Step 2 on page 2, then any insured benefit that may be payable to me, my estate or my beneficiaries from the Australian Ethical Retail Superannuation Fund may be reduced by the insured amount paid or payable from any other regulated superannuation fund as a consequence of my failure to abide by these conditions. This reduction in benefit will be limited to the extent that my benefit from the Australian Ethical Retail Superannuation Fund is no less than I would have been eligible to receive under the terms of the policy between the Australian Ethical Retail Superannuation Fund and MetLife had I not applied for a transfer of cover.

Additionally I acknowledge that:

- If I do not fully complete this application, or I do not sign and date it, I will not be eligible to transfer my existing insurance cover to my account with the Australian Ethical Retail Superannuation Fund.
- If MetLife accepts my application to transfer my existing insurance cover, I will receive the cover as Fixed Cover and any Unitised Cover already held in the Australian Ethical Retail Superannuation Fund will be transferred to Fixed Cover.

Signature

Date

D	D	M	M	Y	Y	Y	Y
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Signatory's full name (please print)

Contact us

t 1300 134 337
e members@australianethical.com.au
w australianethical.com.au
p Australian Ethical Super, Locked Bag 20013, Melbourne VIC 3001