

# Virgin Money Super Insurance Cover Transfer Application Form

# What's this form for?

Complete this form if you wish to transfer your current insurance cover under another life insurance policy ("Previous Cover") to Virgin Money Super ("Transferred Cover").

You can apply to transfer your cover if:

- you are transferring up to \$1 million of Death only or Death & TPD cover;
- your Previous Cover is not held with a self-managed superannuation fund; and
- your Previous Cover is valid and has not been cancelled.

# Cancelling your Previous Cover

You must cancel your Previous Cover once you are informed that your application has been accepted by OnePath Life. If you do not cancel your Previous Cover, and in the event OnePath Life accepts a claim for Death, Terminal Illness or Total and Permanent Disablement – OnePath Life will reduce any benefit payable under the Policy by the benefit payable under the Previous Cover.

You are responsible for making enquiries regarding any exit, transfer or other fees that will be triggered by cancelling your Previous Cover. You should do this so that you completely understand the effects of transferring your insurance cover to Virgin Money Super.

To ensure you are covered at all times, do not cancel your Previous Cover until you are notified in writing that your application has been accepted by OnePath Life.

## About the insurer

Virgin Money Super's insurer is OnePath Life Limited ABN 33 009 657 176 AFSL 238341 (OnePath Life). To understand what insurance cover is all about, be sure to read the current Virgin Money Super Product Disclosure Statement (PDS), Product Guide and Insurance Guide which is available at **virginmoney.com.au/super** or by contacting our Customer Care Team on **1300** 652 770.

## Your privacy

The personal info you provide on this form is 100% confidential. To see how we use it, check out the Privacy Statements contained in this form.

## 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, that 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 the Trustee's 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 that information 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.

## If you need help

For assistance call our Customer Care Team on **1300 652 770** (Mon to Fri 8am to 6pm (AEST)).

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Surname  Gurname  Gurname  Gurname  Gurname  Work telephone  Work telephone  Work telephone  Work telephone  Work telephone  State  Postcode  Address  State  Postcode  Postal Address (if different from above)  State  Postcode  For you an Australian citizen or permanent resident of Australia?  Previous Cover Detrails  Previous Cover that you wish to transfer to Virgin Money Super on the terms set out in the Policy Member number/Policy number (if known)  Jame of Insurer  Warne of Insurer  Name of Insurer  Date of insurance cover (Tick the appropriate box(es)  Death only OR Death and TPD S  Proof of Insurance cover must be valid and current at the date of this application. Your cover must be valid and current at the date of this application and must not have changed since the date the stached proof was issued.  OnePath Life will not a ccept documentation that is older than 60 days than today's date.  Lave you attached to this form proof of your insurance cover described above?  YES NO  Yes NO  Yes NO  Yes NO  Acceptable Forms of proof include:  A recent member statement; or	Virgin Money Super customer number Date of birth Age Gender	le 🔾
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Home telephone  Work telephone  Work telephone  Address  Suburb  Postal Address (if different from above)  State  Postcode  Postal Address (if different from above)  State  Postcode  Are you an Australian citizen or permanent resident of Australia?  YES  NO  If NO, what type of working visa do you hold?  PREVIOUS COVER DETAILS  PREVIOUS COVER DETAILS  PREVIOUS COVER DETAILS  Previous Cover (if known)  Name of super fund or insurance plan  Name of insurer  Prope and amount of insurance cover (Tick the appropriate box(es)  Death only OR  Death and TPD  Death or insurance cover  Prease attach proof of your insurance cover* confirming the type and amount of your Previous Cover at the time of completing his application. Your cover must be valid and current at the date of this application and must not have changed since the date the attached proof was issued.  DinePath Life will not accept documentation that is older than 60 days than today's date.  Lave you attached to this form proof of your insurance cover described above?  YES  NO  YES  NO  YES  NO  A recentable forms of proof include:  A recent member statement; or	Surname	
Home telephone  Work telephone  Work telephone  Work telephone  Address  Suburb  Postal Address (if different from above)  Suburb  State  Postcode  Postal Address (if different from above)  Suburb  State  Postcode  Postal Address (if different from above)  State  Postcode  Postal Address (if different from above)  State  Postcode  Are you an Australian citizen or permanent resident of Australia?  If NO, what type of working visa do you hold?  PREVIOUS COVER DETAILS  PREVIOUS COVER DETAILS  PREVIOUS COVER DETAILS  Postcode  Postal Address (if different from above)  Name of super fund or insurance plan  Name of insurer  Prope and amount of insurance cover (Tick the appropriate box(es)  Death only OR  Death only OR  Death and TPD  Previous Cover at the time of completing his application. Your cover must be valid and current at the date of this application and must not have changed since the date the attached proof was issued.  OnePath Life will not accept documentation that is older than 60 days than today's date.  No fly out ticked NO, you cannot submit this application form without the proof of insurance cover.  * Acceptable forms of proof include:  A recent member statement; or		
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	* Acceptable forms of proof include:	
<ul> <li>A Certificate of Currency – this document provides proof of your insurance coverage on the date that the certificate is requested</li> </ul>	<ul> <li>A recent member statement, or</li> <li>A Certificate of Currency – this document provides proof of your insurance coverage on the date that the certificate is req</li> </ul>	וופגדפר

 $\label{eq:Note:ARecord} \mbox{Note: A Record of Contributions (ROCs) is not an acceptable form of proof of insurance cover.}$ 

If your insurance cover has changed since the date your statement or Certificate of Currency was issued, you need to provide evidence of your current type and level of Previous Cover.

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# PERSONAL STATEMENT

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	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
2.	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
3	Have you ever made, or are you entitled to make a claim for any type of sickness, accident	1123	
٥.	or disability benefit(s), Workers' Compensation or any other form of compensation		
	(including Centrelink payments) due to illness or injury?	YES	NO
4.	Have you been diagnosed with a medical condition that is expected to reduce your life expectancy		
	to less than 12 months from today?	L YES	L NO
5.	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
6	Other than for colds, flus, minor upper respiratory tract infections or minor headache, do you		
0.	have a medical condition for which you take or have been advised to take medication or undergo		
	any other form of medical treatment?	YES	L NO
7.	Are you currently under investigation or been advised to undergo investigations for any medical		
	condition or symptom?	YES	L NO
If vo	ou answered YES to any of the above statements, you cannot proceed with this application. You will ne	ed to apply fo	or cover
	completing our Tailored Insurance Cover Application Form available at <b>virginmoney.com.au/super</b> .	ica to apply to	i covei
	Is your Previous Cover subject to a premium loading or an exclusion which prevents you from		
0.	claiming a benefit for a specific medical condition or for pre-existing medical conditions?	YES	NO
	If YES, please attach a copy of the correspondence you received from your Previous Fund or insurer w	hich specifies	the
	loading and/or exclusion. If your application is accepted, that same exclusion will continue to apply to		
	In assessing your application, OnePath Life may contact your Previous Fund or insurer to confirm when	ther any prem	ium loadings
	or evaluations apply	arer arry premi	iairi ioaairigs
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Co	or exclusions apply.  ost of your insurance cover	arer arry premi	iam iodalings
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I understand that I may cancel my existing cover at any time.	
I have read and understood the Virgin Money Super Product Disclosure Statement (PDS), Product Guide and Insurance C I have read the OnePath Life's Privacy Statement set out in Step 6 of this form. The Privacy Policy details how OnePath Lipersonal information. It is available free of charge by calling Customer Services on 133 667 or may be downloaded from com.au/privacy-policy.	e manages
I consent to the collection, use, storage and disclosure of my personal information (including health information) as set OnePath Life's Privacy Statement.	ut in
If I have provided information about another person in this application (for example a beneficiary or life insured), I decla the consent of that person to do so. I understand that OnePath Life require me to inform the person concerned that I hand direct them to OnePath Life's Privacy Policy which is located at onepath.com.au/privacy-policy	
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gnature Date	

Send your completed form to: Virgin Money Super GPO Box 4650 Melbourne VIC 3001

Print name

# Privacy – OnePath Life

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

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;
- 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

#### 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**

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
- ow 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

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 133 667.

More information can be found in our Privacy Policy 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 ANZ's Privacy Policy at anz.com/privacy

# Your Privacy

Mercer collects your personal information and will use it to manage your superannuation benefits and give you information about your super.

Your personal information will be disclosed to Virgin Money. Both Virgin Money and Mercer may supply you with information about other products and services offered by them and our related companies, to conduct customer satisfaction research or improve products and develop new products. Call the Customer Care Team on **1300 652 770** if you do not want to receive marketing material from Virgin Money and Mercer.

If you don't provide your personal information or otherwise authorise us to collect this information from third parties, we may not be able to provide you with one or more of our products or services.

We may sometimes collect information about you from third parties such as your employer, a previous super fund, your financial adviser, our related entities and publicly available sources.

We may disclose your information to various organisations to manage your super, including your employer; the fund's administrator; our professional advisors; insurers; our related companies which provide services or products relevant to your super; any relevant government authority that requires your personal information to be disclosed; and our other service providers that help manage your super.

To manage your super, your personal information will be disclosed to Mercer's service providers in another country, most likely at the administrator's processing centre in India. It may also be disclosed to some of Virgin Money's partners, service providers and other third parties in New Zealand, Philippines, India, Singapore, the United States of America, United Kingdom, Spain and Israel. Our Privacy Policies list all other relevant offshore locations.

Our Privacy Policies include more details about how we deal with your personal information and who you can talk to if you wish to access and/or correct information we hold about you. These policies also include details about how you may lodge a complaint about the way we have dealt with your information and how that complaint will be handled.

You can read Virgin Money's Privacy Policy online at **virginmoney.com.au/super** and Mercer's Privacy Policy at **mercerfinancialservices.com** or you can obtain a copy by calling the Customer Care Team. If you have a question or you have a complaint about a breach of your privacy, please contact our Customer Care Team or write to Mercer's Privacy Officer, Mercer Superannuation (Australia) Limited, GPO Box 4303, Melbourne VIC 3001 or Virgin Money's Privacy Officer, Level 8, 126 Phillip Street, Sydney NSW 2000, or email privacy@virginmoney.com.au