

# Your duty to take reasonable care not to make a misrepresentation

### **About your duty**

When you apply for life insurance as a member of Australian Retirement Trust, the insurer may conduct a process called underwriting. It's how the insurer decides whether it will cover you, and if so on what terms and at what cost. If your application is underwritten, you will be asked questions which the insurer needs to know the answers to. These will be about your personal circumstances and may include questions about your health and medical history, occupation, income, lifestyle, pastimes, and current and past insurance. The information you provide in response to the questions is vital to the insurer's decision.

### The duty to take reasonable care

When applying for insurance which is to be underwritten, you have a legal duty to take reasonable care not to make a misrepresentation before your application is accepted by the insurer. A misrepresentation is a false answer, an answer that is only partially true, or an answer which does not fairly reflect the truth. This duty also applies when extending or making changes to existing insurance, and reinstating insurance.

### If you do not meet your duty

If you do not meet your legal duty, this can have serious impacts on your insurance. Your cover could be avoided (treated as if it never existed), or its terms may be changed. This may also result in a claim being declined or a benefit being reduced. Please note that there may be circumstances where the insurer later investigates whether the information you provided was true. For example, the insurer may do this when a claim is made.

### **Guidance for answering questions**

When answering questions as part of an application for insurance cover, you should:

- Think carefully about each question before you answer. If you are unsure of the meaning of any question, please ask us or the insurer before you respond.
- · Answer every question.
- · Answer truthfully, accurately and completely.
- If you are unsure about whether you should include information or not, you should include it.
- Review your application carefully before it is submitted. If someone else
  helped prepare your application (for example, your adviser), you should
  check every answer (and if necessary, make any corrections) before the
  application is submitted.
- You must not assume that Australian Retirement Trust or the insurer will contact your doctor for any medical information.

### Changes before your cover starts

Before your application is accepted, the insurer may ask about any changes that mean you would now answer the questions differently. As any changes might require further assessment or investigation, it could save time if you let us or the insurer know about any changes when they happen.

### If you need help

It's important that you understand this information and the questions that you are asked. Ask us or the insurer for help if you have difficulty understanding the process of applying for insurance or answering our or the insurer's questions. If you're having difficulty due to a disability, understanding English or for any other reason, we are here to help and can provide additional support for anyone who might need it.

# What can the insurer do if the duty is not met?

If you do not take reasonable care not to make a misrepresentation, there are different remedies that may be available to the insurer. These are set out in the *Insurance Contracts Act 1984* (Cth). These are intended to put the insurer in the position they would have been in if the duty had been met.

For example, the insurer may:

- avoid the cover (treat it as if it never existed);
- · vary the amount of the cover; or
- · vary the terms of the cover.

Whether the insurer can exercise one of these remedies depends on a number of factors, including:

- whether you took reasonable care not to make a misrepresentation (this
  depends on all of the relevant circumstances);
- what the insurer would have done if the duty had been met for example, whether they would have offered cover, and if so, on what terms;
- whether the misrepresentation was fraudulent; and
- in some cases, how long it has been since the cover started.

Before the insurer exercises any of these remedies, they will explain their reasons, how to respond and provide further information, including what you can do if you disagree.

### **Qantas Group Super Plan**

(Defined Benefit members)

### **Life Event Insurance Options**

To be eligible for Life Events cover you must have active cover in the plan and apply within 90 days of the event occurring.

**Important**: Before completing this form please ensure you read and understand your Duty to Take Reasonable Care Not to Make a Misrepresentation located at <a href="art.com.au/duty">art.com.au/duty</a> and in your Super Savings – Corporate Insurance Guide.

Please make sure you've answered all questions. If all questions are not answered, your application may be delayed as the form may be returned. Please tick boxes where appropriate. Use **BLOCK** letters and black or blue ink when completing this form and ensure it is signed and dated. \***DENOTES MANDATORY FIELD.** 

To access information about your plan online, visit art.com.au/qgsp



**13 11 84 | art.com.au** Reply Paid 2924 Brisbane Qld 4001

Member number if already a member
Office use only
C59462

1 Personal details						
Title First name*		Middle name				
Last name*		Dat	te of birth (DD/MM/YYYY)*	Gender*		
Street address / PO Box*						
Suburb/Town*	State* Postcode*	Home phone number	Daytime phone nun	nber*		
Personal email address			Mobile phone numb	per*		
	uments, including statements and notices of cha mation is posted to you, change your preference:					
2 Your occupational r	ating					
Tour occupationary	uting					
Please select your occupational gro Group 1 - Working mainly i	•	nanual duties within an office or reta	ail environment, with less than 20%	of time spent		
Group 1 - Working mainly in a sedentary capacity or performing light manual duties within an office or retail environment, with less than 20% of time spent outdoors; or mainly engaged in light manual duties; or travel regularly for work but do not deliver goods (excludes Flight Crew).  Examples include: Telephone Sales Consultants, Customer Service Agents, Customer Sales Agents, Executives, Senior Professional Group (SPG) positions						
<b>Group 2 -</b> Flight crew, skilled trades workers performing a moderate amount of manual work; or engaged in full time home duties for more than 12 months. Examples include: Avionics Maintenance Engineer (AME), Cabin Crew, Chef, Home duties, Licensed Aircraft Maintenance Engineer (LAME), Technical Crew, Pilots						
<b>Group 3</b> - Mainly performing manual work; or skilled workers performing heavy manual work.  Examples include: Airline Services Operators, Airline Services Attendants, Apprentices, Catering Service Attendants, Ground Crew/Ramp Services, Store Persons						
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### **Life Event options**

When your life changes the Life Events option gives you the opportunity to increase your Additional Death and Total & Permanent Disability (TPD) cover. You can apply to increase your cover by up to \$50,000.

To be eligible to increase cover under the Life Events option, you must:

- have existing Additional Death only or Additional Death and TPD cover in the plan
- submit your application for Life Events cover, including evidence confirming the Life Event, within 90 days of the Life Event occurring.

For full terms and conditions for the Life Events insurance options refer to your Super Savings – Corporate Insurance Guide, available at art.com.au/qgsp

<b>3A</b>	Please answer yes or no to the following questions:		
	Have you received or previously been entitled to receive a Terminal Illness or TPD benefit payment from any insurer?	Yes	No
	Have you applied for an increase in cover due to the same life event before, regardless of whether the application was accepted or declined?	Yes	No

If you answered **Yes** to any of the above questions, you are not eligible to increase your cover under the life event option. If you wish to increase your current cover, please go to **art.com.au/qgsp** to complete the Change of Insurance Cover form.

3B

I'd like to apply for Life Events cover for:

(please tick)

Life Event	Evidence required (please attach with completed form)
Marriage or divorce	Marriage certificate or divorce order
Birth or legal adoption of a child or children	Birth certificate or adoption certificate with your name appearing as mother or father
You become a carer for the first time	Documentation from Centrelink
Grant of a loan from a financial institution on the initial purchase or renovation of a principal place of residence	<ol> <li>A letter from the lender showing the identity of the lender and confirming:         <ul> <li>the amount of the loan to purchase your principal place of residence, and</li> <li>the loan has been drawn-down (not just approved)</li> </ul> </li> <li>A statement declaring that the mortgage property is your principal place of residence</li> </ol>
Death of your spouse	Death certificate
Completion of your first undergraduate degree at an Australian university	Your degree
Your dependent child starts secondary school for the first time	Enrolment confirmation from secondary school

### Insurance cover

Please tell us the amount of insurance required (maximum of \$50,000 per life event):

Death & TPD¹ cover \$ Death only cover \$

**Note:** An overall lifetime maximum of \$200,000 applies for Life Events increases. Maximum cover limits also apply, as detailed in your Super Savings – Corporate Insurance Guide.

 $1\,From\,age\,61, your\,Additional\,TPD\,cover\,will\,reduce.\,Refer\,to\,your\,Super\,Savings-Corporate\,Insurance\,Guide\,for\,details.$ 

Please continue over page

## Authorisation and declaration Sign this application form and return to Australian Retirement Trust:

### Your privacy - Personal information collection notice

#### **Australian Retirement Trust**

We are collecting your personal information to set up and/or to administer your superannuation account. We may also disclose this information to third parties such as our Insurer, medical and health professionals, if we need to, if you have given consent to the disclosure, or if we are required to by law. If you want to know more about our privacy policy, including how we collect, hold, use and disclose personal information, or how individuals can access or correct their information, visit art.com.au/privacy or call us to request a copy.

### MetLife Insurance Limited ABN 75 004 274 882 AFSL 238096 ('MetLife' or the 'Insurer')

The personal information you provide in the form is necessary for MetLife to provide you with the products and services you have requested from MetLife. You do not have to provide MetLife with your personal information, but if you do not do so MetLife may not be able to provide you with the products or services. MetLife complies with the Privacy Act 1988 and the principles laid out in its Privacy Policy which details information about the entities that MetLife usually discloses personal information to (including overseas recipients), how you may access or seek correction of your personal information, how MetLife manages that information and their complaints process. MetLife's Privacy Policy is readily available and can be viewed at metlife.com.au/privacy.

#### I declare that:

- I confirm the information I have given is true and correct.
- I understand that the change to my insurance cover through Australian Retirement Trust will commence when the insurer has accepted my application and my account balance is sufficient to cover annual insurance premiums.
- I confirm that I have Additional Death only or Death and Total & Permanent Disability (TPD) cover currently in place through Australian Retirement Trust.
- I confirm that I am applying to increase my cover within 90 calendar days of the Life Event occurring.
- I understand that the Trustee cannot provide me with advice about my insurance options and that I should seek advice from an appropriately qualified adviser for advice that takes into account my personal situation, objectives or needs.
- I have received, read and understood the Super Savings Corporate
  Product Disclosure Statement for Defined Benefit Account (PDS) and
  Super Savings Corporate Insurance Guide.
- By signing this Life Event Insurance Options form, I acknowledge the collection and disclosure of information about me for the purposes shown above.
- I acknowledge and have read my Duty to Take Reasonable Care Not to Make a Misrepresentation at art.com.au/duty.

#### Member to sign here\*



Full name (print in BLOCK letters)\*

Date (DD/MM/YYYY)\*

✓ Please return the form to Australian Retirement Trust Reply Paid 2924 Brisbane Qld 4001 OR via art.com.au/contact-us

We are committed to respecting your privacy and take protecting the privacy of personal information seriously. Our Privacy Policy sets out how we do this including how we collect, hold and disclose personal information. For a copy of the Privacy Policy, please visit art.com.au/privacy or call 13 11 84.

Australian Retirement Trust Pty Ltd ABN 88 010 720 840 AFSL No. 228975 Trustee of Australian Retirement Trust ABN 60 905 115 063