Your duty to take reasonable care

When you apply for insurance, you are treated as if you are applying for cover under an individual consumer insurance contract. A person who applies for cover under a consumer insurance contract has a legal duty to take reasonable care not to make a misrepresentation to the Insurer before the contract of insurance is entered into.

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. Under the Insurance Contracts Act 1984 (Cth) there are a number of different remedies that may be available to the Insurer. They are intended to put the Insurer in the position it would have been in if the duty had been met. For example, theInsurer 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 reasonable care was taken 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 it 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 any of these remedies are exercised, the Insurer will explain the reasons for its decision, how to respond and provide further information, and what you can do if you disagree.

Guidance for answering the questions in this form

You are responsible for the information provided to the Insurer. When answering questions, please:

- Think carefully about each question before you answer. If you
 are unsure of the meaning of any question, please ask us before
 you respond.
- Answer every question.
- Answer truthfully, accurately and completely. If you are unsure about whether you should include information, please include it.
- Review your application carefully before it is submitted.
 If someone else helped prepare your application (for example, your adviser), please check every answer (and if necessary, make any corrections) before the application is submitted.

Please note that there may be circumstances where the Insurer later investigates whether the information given to it was true. For example, it may do this when a claim is made.

Changes before your cover starts

Before your cover starts, the Insurer may ask you whether the information that has been given as part of your application for insurance remains accurate or whether there has been a change to any of your circumstances. 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 your obligations and the questions that are being asked. Please contact us for help if you have difficulty understanding the process of obtaining insurance or answering any questions.

Please also let us know if you're having difficulty due to a disability, understanding English or for any other reason – we're here to help and can provide additional support.

Privacy

The Privacy of TAL customers is important and TAL is bound by obligations imposed by current privacy laws including the Australian Privacy Principles. The way in which TAL collects, uses, secures and discloses your personal and sensitive information is set out in the TAL Privacy Policy available at tal.com.au/Privacy-Policy or free of charge on request to TAL by telephoning 1300 209 088.

Collection and use of personal information

We collect personal information, including, your name, age, gender, contact details, health information, salary, and employment information so that we may assess and administer our products and services to you. In certain circumstances, such as applications for life insurance products and claims, we may be required to collect personal information of a sensitive nature such as lifestyle and medical history information. If you do not supply the information that is required, we may not be able to provide our products and services to you or pay the claim.

We may take steps to verify the information that we collect, for example a birth certificate may be verified with records held by Births, Deaths and Marriages to protect against impersonation, or we may verify with an employer regarding remuneration information provided in a claim for income protection to ensure that it is accurate.

Disclosure of personal information

We disclose relevant personal information to external organisations that help us provide our services and may also disclose some of your personal information to other parties, when required to do so to provide our products and services to you, such as the following:

- claims assessors and investigators, claims managers and reinsurers
- medical practitioners (to verify or clarify, if necessary, any health information you may provide)
- any person acting on your behalf, including your financial advisor, solicitor, accountant, executor, administrator, trustee, guardian or attorney
- other insurers
- for members of superannuation funds where TAL is the insurer, to the trustee, or administrator of the superannuation fund
- other organisations to whom we outsource certain functions during the underwriting and claims processes, such as obtaining blood tests for underwriting purposes, rehabilitation providers, surveillance providers and forensic accountants.

There are situations where we may also disclose your personal information in circumstances where it is:

- required by law (such as to the police or Australian Tax Office) and
- authorised by law (e.g. under Court Orders or Statutory Notices).

Insurance fixed cover form



Save time, apply online

Applying to vary your insurance via the Member Online portal is quick and easy. Simply login via ngssuper.com.au/MOL go to the Insurance section and click on the link to the TAL Insurance portal.

Please complete this form if you are applying to convert your existing aged-based Life, TPD and/or IP cover to fixed cover.

If you wish to apply to increase the level of your cover, you will need to complete the **Increase cover form**. Alternatively, you can request all the changes through **Member Online** at **ngssuper.com.au/MOL**

If you need help

If you're unsure of your decisions, consider obtaining professional advice. We offer:

- advice at no extra cost through our advice Helpline or
- low-cost advice through NGS Financial Planning.

To make an appointment phone us on 1300 133 177 or complete the **Financial advice enquiry form** on our website at **ngssuper.com.au/advice**

Please send your completed form to:

NGS Super GPO Box 4303 MELBOURNE VIC 3001 or email to: NGSAdminTeam@mercer.com

All members must complete Section 1, 3 and 5

Complete Section 2 if you wish to change your insurance category.

Please print in black or blue pen, in capital let	ters.					
NGS member number	member number Gender Title			Date of birth		
	M () F ()			/	/	
Given names						
Surname						
Residential address						
Suburb				State	Postcode	
Postal address (if different to above))					
Suburb				State	Postcode	
May TAL contact you directly to clar	rify or gather informatio	n in relation to this a	pplication?		Yes No	
If yes, preferred method of contact:	Email Phone	Contact time				
Personal email address						
Job title/occupation			Average hours worked per week			
Phone number			Mok	oile		

Step 2. Default insurance category						
It's important to advise us of your occupation details, eminsurance category as this may impact your sum insured	aployer details and annual salary to ensure you have the right and will impact premium amounts.					
1. Are you employed by a school or other body providing education as its primary function, a credit union or other employer in the finance sector?						
2. Are the duties of your occupation limited to profession clerical, secretarial or similar 'white collar' tasks which undertaken entirely (or at least 80%) within an office of	n do not involve manual work and are					
Annual Salary \$, , , , , , ,						
•	u/PDS for further information on the default insurance category.					
	any existing level and type of insurance cover you currently hold in You can maintain or reduce the amount of cover you currently have,					
I wish to convert my existing Life and TPD cover and/	or IP cover to fixed cover as follows: tick the box for the cover are held, the change will be reflected on both covers). Please also					
Life cover amount	\$, , , , , , , , , , , , , , , , , , ,					
TPD cover amount	\$, , , , , , , , , , , , , , , , , , ,					
IP cover amount	\$ per month					
	ntain your cover account becomes Inactive for a continuous period of 16 months, your You must make an election before your account becomes Inactive.					
•	red a contribution or rollover for a period of 16 continuous months.					
To maintain your insurance cover and prevent it from bei	ng cancelled, simply complete this section.					
I confirm that I wish to maintain my insurance cover in writing, or my cover ceases due to the terms and co	even when my account is Inactive unless I notify you otherwise nditions of the NGS Super insurance policy.					
By submitting this election, I acknowledge:						
	/or the Insurance Transition guide for ex-QIEC Super members) cision to opt-in to keep this cover is based on my understanding of					
_	ided on the terms and conditions set out in the relevant insurance nited					
• I understand I can at any time apply to decrease or car cancellation form available at ngssuper.com.au/form	ncel my insurance cover by completing the Insurance reduction or s					

Insurance fixed cover form (3)

Step 5. Declaration and signature

I acknowledge that

- $\bullet\,I$ have read and understood my duty to take reasonable care.
- The information provided here is true and complete and I agree that this Declaration shall be held to form part of the application for insurance.
- I understand that the insurance cover will only be provided on the terms and conditions set out in the contract of insurance as agreed between NGS Super and TAL Life Limited.
- I agree to TAL's collection, use and disclosure of my personal information provided in this application.
- I have read and understood the insurance information contained in the current NGS Accumulation Product Disclosure Statment and Insurance Guide.

Member's signature		Date	/ / /
Please send your comp	leted form to:		
NGS Super GPO Box 4	1303 MELBOURNE VIC 3001		
or email to: NGSAdmin	Team@mercer.com		

Privacy Collection Statement

NGS Super Pty Limited ABN 46 003 491 487 of **Level 4, 14 Martin Place Sydney NSW 2000** collects personal information from you (or from third parties such as your employer or another super fund) to manage your NGS Super account, keep you informed, improve our products and services or take action on a matter you have contacted us about. If we don't have your personal information, we may not be able to perform these services. We may be authorised to collect your personal information by certain laws, including laws relating to superannuation, taxation and anti-money laundering/counter-terrorism financing.

We disclose personal information as required to manage the Fund, to service providers (including our administrator, our insurer and professional advisers), employers or parties required by law. Personal information may be accessed by service providers overseas, most likely by our administrator's processing centre in India. For any other offshore locations, details of how to access and change your personal information and the privacy complaints process, go to **ngssuper.com.au/pcs** and **ngssuper.com.au/privacy** or call us on **1300 133 177**.