

INSURANCE TRANSFER FORM

You can apply to transfer insurance cover that you have outside of NGS Super. The maximum amount of cover you can transfer from your former fund or individual insurer, inclusive of any existing cover with NGS Super is:

- \$2,000,000 for Life/TPD
- \$15,000 per month for IP

Your duty of disclosure

Before you enter into a life insurance contract, you have a duty to tell the insurer anything that you know, or could reasonably be expected to know, may affect our decision to insure you and on what terms.

You have this duty until the insurer agrees to insure you. You have the same duty before you extend, vary or reinstate the contract.

You do not need to tell the insurer anything that:

- reduces the risk they insure you for, or
- is common knowledge, or
- they know or should know as an insurer, or
- they waive your duty to tell us about.

In exercising the following rights, the insurer may consider whether different types of cover can constitute separate contracts of life insurance. If they do, they may apply the following rights separately to each type of cover.

If you do not tell the insurer anything you are required to, and they would not have insured you if you had told them, they may avoid the contract within 3 years of entering into it.

If the insurer chooses not to avoid the contract, they may, at any time, reduce the amount you have been insured for. This would be worked out using a formula that takes into account the premium that would have been payable if you had told them everything you 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 you have been insured for, they may, at any time vary the contract in a way that places them in the same position they would have been in if you had told the insurer everything you should have. However, this right does not apply if the contract has a surrender value or provides cover on death.

If your failure to tell the insurer is fraudulent, they may refuse to pay a claim and treat the contract as if it never existed.

You can apply to transfer insurance cover that you have outside of NGS Super if you:

- are under 60 years of age and not working in an occupation involving hazardous or very heavy manual work; and
- have superannuation with another fund where you are covered for death and/or total and permanent disablement (TPD) benefit and/or income protection benefit under that fund ('former fund'); or
- have an individual death and/or TPD and/or income protection insurance policy outside of superannuation from a life insurer ('individual insurer').

Do not cancel your existing cover until you have received confirmation in writing that your transfer request has been accepted by NGS Super.

If NGS Super's Insurer (TAL Life Limited) accepts your application, you will receive an amount of cover equivalent to the level of cover you currently have with your former fund or individual insurer.

If this cover is for death and/or TPD, this cover will apply in addition to any existing cover held under NGS Super (subject to terms and conditions of the policies).

The rules that will apply to any income protection transfer are:

- transfer cover (including relevant waiting and benefit period) will replace any existing cover you have with NGS Super
- where there is no equivalent waiting period (e.g. 45 days), the waiting period will be the next longer waiting period (e.g. 60 days)
- where there is no equivalent benefit period (e.g. up to 3 years), the benefit period will be the next shorter benefit period available (e.g. up to 2 years),
 - (i) the waiting period of the cover to be transferred must not be longer than 90 days, and
 - (ii) the benefit period of the cover to be transferred must not be shorter than up to 2 years.

or

- if the waiting and benefit period match (your existing NGS Super cover), the transfer cover can be added to your existing amount of cover - subject to your income supporting your requested cover level.

Any loadings, exclusions, restrictions or limitations which were imposed on your insurance cover by the former fund or individual insurer will apply to the transferred cover. Please attach a copy of the advice you received from the former fund or individual insurer advising you of the acceptance of that cover subject to these additional terms.

Please note that your respective sum insured for Life, TPD and/or IP will be converted to fixed sum insured if you transfer cover from a former fund or an individual insurer.

How to transfer your cover?

- 1 Complete Sections 1 to 7 of this Insurance Transfer Form (below), providing all the required details and signing the form; and
- 2 attach proof of your insured benefits from your former fund or individual insurer such as:
 - an up-to-date statement
 - certificate of currency
 - confirmation email/letter from your former fund/life insurer.

Documentation must confirm the type and level of cover you have under the former fund or individual insurer and must be received by NGS Super within **60** days of it being issued.

If you are considering cancelling or replacing your existing insurance cover, be aware there are risks in doing so. You should consider the terms and conditions of each insurance cover before deciding to make a change.

Please note that acceptance of your transfer request is subject to the insurer's acceptance and some limitations apply.

TAL Life Limited ABN 70 050 109 450 AFSL 237848

Issued by NGS Super Pty Limited ABN 46 003 491 487 AFSL No 233154 the trustee of NGS Super ABN 73 549 180 515

**ngs
Super**

Your fund.
Your wealth.
Your future.



Section 3. Short form personal statement

Please note you have a duty to disclose all relevant information. Failing to provide the insurer with full and accurate information could result in your insurance cover being cancelled and any claim for benefit could be denied, so it is vital you answer all questions fully and accurately.

Please note if you answer '**No**' to any of the questions 1 through to 7 below, you will **not be eligible to transfer your cover into NGS Super** and should not continue with completing this form. You will receive any standard cover or continue to maintain any existing cover applicable (conditions apply).

I confirm the following:

- 1 I am currently able to perform all of the normal duties of my usual occupation for at least 35 hours per week without any restriction due to an illness or an injury (even if I am not employed to work 35 hours per week). Yes No
- 2 I do not currently suffer and I have not been diagnosed with an injury or illness that may cause me to be permanently unable to perform my usual occupation in the next two years. Yes No
- 3 I have not been diagnosed with an injury or illness that is likely to reduce my life expectancy to less than 12 months. Yes No
- 4 I have never had, been told I had, or received advice or treatment for any of the following:
 - a. Any circulatory disorder (e.g. high blood pressure)
 - b. Stroke or heart condition (including angina)
 - c. Hepatitis or any liver disease or blood disorder
 - d. Paralysis or multiple sclerosis
 - e. Any mental or nervous condition
 - f. Diabetes or sugar in urine
 - g. Any form of cancer, including skin cancer or leukaemia
 - h. Impairment of sight (that can't be corrected by glasses, contact lenses or laser eye surgery), hearing or speech.Yes No
- 5 I have never made a claim and I am not currently intending to make a claim for an illness or injury from the following:
 - a. Worker's Compensation
 - b. Government benefits (such as sickness benefit, invalid pension)
 - c. Motor accident scheme
 - d. Superannuation fund
 - e. Life insurance policies.Yes No
- 6 I have not within the last 12 months:
 - a. Been absent from my usual occupation (employed or unemployed) for more than 6 days (not necessarily consecutively) due to an injury or illness
 - b. Consulted, been examined, treated by or received advice from any Specialist Medical Practitioner
 - c. Been admitted to hospital or been advised to have an operation
 - d. Taken any prescribed medication (other than preventative asthma medication, cold or flu remedies, antibiotics or contraceptives)
 - e. Consulted a Medical Practitioner in relation to mental health issues.Yes No
- 7 I have never had any application for Life, Terminal Illness, Total and Permanent Disablement or Income Protection cover declined whether accepted by me or not. Yes No



Section 5. Telephone underwriting

The telephone underwriting facility reduces the need for follow-up information and medical reports, resulting in faster completion. I permit the insurer TAL Life Limited to call me (the life to be insured) to clarify or gain further information regarding any matter pertaining to the assessment and processing of this application. I understand that the call will form part of my duty of disclosure as described on page 1.

No Yes If 'Yes', I am contactable on the following number ()

between (usual business hours eastern standard time) the hours of AM / PM and AM / PM.

Section 6. 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 information is set out in the TAL Privacy Policy available at <http://www.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 we collect; for example, a birth certificate provided as identification 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; and
- 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).

Section 7. Declaration and signature

Read the following statements and indicate your acceptance below:

- I understand and acknowledge that I am bound by the Duty of Disclosure. I declare that 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 on my life now made to the Company.
- I will cancel my existing insurance cover under my former fund or individual insurer.
- I will not be transferring the cover under my former fund or individual insurer to any other division or section of the former fund or individual insurer or to any other fund, other than NGS Super.
- I will not effect a continuation option, or subsequently reinstate cover within the former fund or individual insurer or any other division or associated fund of the former fund or individual insurer.
- I will transfer my total superannuation account balance (available at the time of transfer) with my former fund (if applicable) to NGS Super within 60 days from the date my application to transfer my cover has been accepted.
- I understand that my cover, once accepted, will be subject to the terms and conditions relating to insurance provided by the Fund.

I confirm I have attached verification of the type and level of cover I have under my former fund or individual insurer (NGS Super must receive this evidence within 60 days of it being issued).

Signature

Date / /



PRIVACY COLLECTION STATEMENT

If you are a member of NGS Super, or you are applying for membership

We may collect your personal information from you or from third parties such as

- your employer
- a previous super fund
- your financial adviser
- our related entities
- publicly available sources.

We may be required or authorised by law to collect your personal information. Relevant laws include the Australian Securities and Investments Commission Act 2001, Corporations Act 2001, Family Law Act 1975 and laws relating to superannuation, taxation and anti-money laundering/counter-terrorism financing.

If we are unable to collect all the personal information we have asked for, we may not be able to administer your NGS Super account or take action on a particular request you have made.

We will use your personal information to

- manage your NGS Super account (*Accumulation, Transition to retirement or Income account*)
- give you information about your NGS Super account
- supply you with information about other products and services offered by us or our related companies
- include your relevant account data in statistics and market research.

We will disclose your personal information to various organisations (but only as required to manage your NGS Super account or the Fund generally), including

- our administrator, Mercer Outsourcing (Australia) Pty Ltd (Mercer)
- our insurer
- our professional advisers
- your employer
- other service providers that provide services or products relevant to your NGS Super account
- any relevant government authority that requires your personal information to be disclosed.

In managing your super your personal information may be disclosed to service providers in another country, most likely to Mercer's processing centre in India. Our Privacy Policy lists any other relevant offshore locations.

Our **Privacy Policy** sets out in more detail

- how we deal with your personal information
- how to access and seek correction of the information we hold about you
- how you may lodge a complaint if we breach an Australian Privacy Principle
- how we will handle any complaint.

You can view our Privacy Policy at

www.ngssuper.com.au/privacy-policy or obtain a copy by contacting us on **1300 133 177**.

If you have any other queries in relation to privacy issues, or if you do not wish to receive marketing material, you may contact us on **1300 133 177**. You may also write to the NGS Super Privacy Officer at PO Box 21236 World Square NSW 2002 or online at www.ngssuper.com.au/contact-us.

If you are not a member of NGS Super, and you are not applying for membership

We will use your personal information only to enable us to take action on the particular matter you have contacted us about. In most instances we will not need to collect any further personal information from any other source. We will disclose your personal information only to those organisations mentioned above as are necessary to take action on the matter in question or for the management of the Fund generally.