

CONVERT YOUR BASIC COVER TO VOLUNTARY COVER

Use this form to apply to convert your current Basic Cover amount or a lesser amount to Voluntary Cover.

IMPORTANT INFORMATION

This form is for members who hold insurance in the MINING DIVISION. Generally, you're in the MINING Division if you joined the Fund before 20 May 2024, are eligible for insurance and/or have opted in to the MINING DIVISION.

If you hold insurance in the DEFAULT DIVISION you're covered under different insurance arrangements.

If you currently have insurance, you can find the Division you're part of by logging in to your online account at teamsuper.com/login or by calling us on 13 64 63.

Before you start...

Fill this form out in **BLOCK** letters using a black or blue pen. Write 'X' to mark boxes.

You can only apply to convert your Basic Cover to Voluntary Cover if you're aged 64 years or less. By converting your cover you:

- Death and Terminal Illness (DTI) Cover will be fixed until age 70.
- Total and Permanent Disablement (TPD) Cover will gradually reduce from age 66 to be zero at age 70.

Your Basic Cover will be cancelled from the date this application is accepted by our insurer, TAL Life Limited. For details about the differences between Basic Cover and Voluntary Cover and the premium that will apply, read the **Product Disclosure Statement (PDS)**, including the **Insurance Guide**, which you'll find at teamsuper.com/pds

Turn over to finish filling out this form...

Locked Bag 2020 Newcastle NSW 2300 | T 13 64 63 | teamsuper.com
Insurance is provided by TAL Life Limited ABN 70 050 109 450 AFS licence 237848 under a life insurance policy issued to Team Super Pty Ltd ABN 70 003 566 989 AFS licence 246864 as trustee of Team Superannuation Fund ABN 16 457 520 308 MySuper authorisation number 16457520308485.



The duty to take reasonable care

If you apply for life insurance, you will be treated as if you are applying for cover under an individual consumer insurance contract. The Insurer will conduct a process called underwriting. It's how it decides whether it can cover you, and if so on what terms and at what cost.

As part of underwriting, the Insurer will ask questions it needs to know the answers to. These will be about your personal circumstances, such as your health and medical history, occupation, income, lifestyle, pastimes, and current and past insurance.

The information you provide in response to those questions will be vital to the Insurer's decision. As such, when applying for life insurance you have a legal duty to take reasonable care not to make a misrepresentation to 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 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. 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.

Turn over to finish filling out this form...

1. Your personal details

Mr	Ms	Mrs	Miss	Dr	Other	Male	Female	Member number																	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
Given names																									
<input type="text"/>																									
Surname										Date of birth (DD-MM-YYYY)															
<input type="text"/>										<input type="checkbox"/>	<input type="checkbox"/>	-	<input type="checkbox"/>	<input type="checkbox"/>	-	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Residential address																									
<input type="text"/>																									
Suburb										State			Postcode												
<input type="text"/>										<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Postal address. If the same as your residential address, mark 'X' in this box <input type="checkbox"/>																									
<input type="text"/>																									
Suburb										State			Postcode												
<input type="text"/>										<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mobile phone						Home phone						Work phone													
<input type="text"/>						<input type="text"/>						<input type="text"/>													
Preferred email										Other email															
<input type="text"/>										<input type="text"/>															

2. Tell us your Occupation Group

- Read the below descriptions of the five Occupation Groups carefully, as they're used to work out how much your insurance costs.
- If you're retired or not working, select 'light manual'. Open cut miners are classified as Heavy Manual, not Mining.
- Your selected Occupation Group will apply to all your insurance with us. Any new insurance premiums will apply to your total insurance cover, including existing Basic Cover, Voluntary Cover and / or Income Protection insurance, from the date we receive this form and your application is accepted by our insurer.
- If you don't select a Occupation Group you could pay more for your insurance than you have to. Refer to the PDS and Insurance Guide for more information about the Occupation Groups and how it may impact your insurance.

Mark 'X' in one box

- Professional:** You work in a predominantly office based sedentary occupation for over 80% of your total work time and earn more than \$80,000 pa, excluding employer super contributions, so long as you're not defined as 'mining'.
- White collar:** You work in a predominantly office based sedentary occupation for over 80% of your total work time and earn \$80,000 pa or less, excluding employer super contributions, so long as you're not defined as 'mining'.

For the **professional** and **white collar** Occupation Groups, it's important to select the Occupation Group that reflects your circumstances. We'll record your Occupation Group according to what you tell us. Refer to the **PDS** and **Insurance Guide** for more information about Occupation Groups and salary, and how it may impact your insurance.

- Light manual:** You perform light manual work for more than 20% of your total work time and spend less than 5% of your work time in an underground mine, so long as you're not defined as 'heavy manual' or 'mining'. This category includes duties such as carpenter, electrician, plumber and factory production manager.
- Heavy manual:** You perform heavy manual work or work in an **open-cut mine** for more than 20% of your total work time and spend less than 5% of your work time in an underground mine, so long as you're not defined as 'mining'. This category includes duties such as bricklayer, roof carpenter and truck, forklift or bulldozer driver.
- Mining:** You perform light or heavy manual work in an **underground mine** for more than 5% of your total work time or work in any other high risk occupation agreed between Team Super and the insurer.

Turn over to finish filling out this form...

3. Convert your Basic Cover to Voluntary Cover

I understand my Voluntary Death and Terminal Illness (DTI) Cover will be fixed until age 70 and my Voluntary Total and Permanent Disablement (TPD) Cover will gradually reduce from age 66 to be zero at age 70.

Mark 'X' in one box

I want to apply to convert my current level of Basic Cover to Voluntary Cover, rounded up to the nearest \$10,000.

I want to apply to convert my Basic Cover to a lesser amount of Voluntary Cover

- The amount you nominate must be in multiples of \$10,000.
- Your total Total and Permanent Disablement (TPD) Cover, including any existing Voluntary Cover, must be less than or equal to your total Death and Terminal Illness (DTI) Cover.

I want \$, of Voluntary Death and Terminal Illness (DTI) Cover

I want \$, of Voluntary Total and Permanent Disablement (TPD) Cover

Have you smoked tobacco or any other substance in the past 12 months?

No

Yes An additional premium loading will apply to the cost of your insurance.

If you want to apply for a higher amount of insurance than your current level of Basic Cover, you'll need to complete the **Voluntary Cover application** form found at teamsuper.com/resources

4. Your declaration

Team Super and the insurer may verify the information you've provided and ask for more information.

I declare that I:

- I've read the duty to take reasonable care and my legal duty to take reasonable care not to make a misrepresentation to the Insurer before the contract of insurance is entered into. I understand that in connection with my insurance application, I must advise Team Super and TAL Life Limited ABN 70 050 109 450 AFS licence 237848 of any changes in my health from now until I'm notified in writing that my application has been accepted.
- understand that by converting my Basic Cover to Voluntary Cover the cost of my insurance will change.
- understand that my Voluntary Cover won't become effective until my application is accepted by Team Super in writing and my account has enough funds to pay the premium.
- acknowledge that if I don't complete this form correctly or don't sign and date this declaration, my application won't be considered and any insurance cover I currently have won't be affected.
- have read and understood the Team Super **PDS**, including the **Insurance Guide - Mining Division**, at teamsuper.com/pds
- consent to the collection, use and disclosure of my personal information in accordance with the Team Super Privacy Policy outlined in the Team Super PDS and our insurer's privacy policy at tal.com.au/privacy-policy or available on request.
- understand that if my application is accepted, cover will be provided to me on the terms contained in Team Super's insurance policy with TAL Life Limited, as changed from time to time.

Your signature



Date (DD-MM-YYYY)

When complete return this form to us by:

Post Team Super
Locked Bag 2020 Newcastle NSW 2300
Email help@admin.teamsuper.com

Locked Bag 2020 Newcastle NSW 2300 | T 13 64 63 | teamsuper.com
Insurance is provided by TAL Life Limited ABN 70 050 109 450 AFS licence 237848 under a life insurance policy issued to Team Super Pty Ltd ABN 70 003 566 989 AFS licence 246864 as trustee of Team Superannuation Fund ABN 16 457 520 308 MySuper authorisation number 16457520308485.