

# Life Events Cover

You may apply to increase your insurance without providing Evidence of Insurability if you experience a life event while your insurance is in force. Please provide evidence of the life event within 90 days of the event occurring.

Before completing this form, please make sure you read the CBH Superannuation Fund PDS for information on eligibility.

## Your duty of disclosure

When you apply for a life insurance policy, you have a duty to tell us anything that you know, or could reasonably be expected to know, that may affect our decision to insure you and on what terms. You have this duty until we agree to insure you. You have the same duty before you extend, vary or reinstate the policy. You do not need to tell us anything that:

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

If someone other than you will be the life insured under the policy, any failure by that person to comply with the above duty will be treated as failure by you. If you request life insurance inside super, the Trustee obtains this insurance from us in relation to you. In this circumstance, we rely on the disclosures that you or the Trustee makes to us.

### If you do not tell us something

In exercising the following rights, we may consider whether different types of cover can constitute separate policies of life insurance.

If they do, we may apply the following rights separately to each type of cover.

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

If we choose not to avoid the policy, we 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 us everything you should have.

However, if the policy provides cover on death, we may only exercise this right within 3 years of entering into the policy.

If we choose not to avoid the policy or reduce the amount you have been insured for, we may, at any time vary the policy in a way that places us in the same position we would have been in if you had told us everything you should have. However, this right does not apply if the policy provides cover on death.

If your failure to tell us is fraudulent, we may refuse to pay a claim and treat the policy as if it never existed.

## 1. Member details

Policy number <input type="text" value="G1140"/>	Member number <input type="text"/>	Policy name <input type="text" value="CBH Superannuation Fund"/>
Title Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="text"/>	First name <input type="text"/>	
Middle name <input type="text"/>	Surname <input type="text"/>	
Date of birth (DD/MM/YYYY) <input type="text"/>		

### Residential address (your residential address can't be a PO Box)

Unit number <input type="text"/>	Street number <input type="text"/>	Street name <input type="text"/>
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Suburb <input type="text"/>	State <input type="text"/>	Postcode <input type="text"/>	Country <input type="text"/>
Email address (Please provide your email so notices relating to your application can be sent to you) <input type="text"/>			Home telephone <input type="text"/>
Mobile phone number <input type="text"/>			Business telephone <input type="text"/>

## 2. Additional cover required

You can apply for up to two units (\$50,000 per unit). Life Event increases are limited to one event in any 12 month period, and three events over the life of the policy. They are also subject to the policy maximum benefit levels.

Type of insurance required:  Death  Death and Total and Permanent Disability

Units required:

All documentation must be certified as a 'true and complete' copy of the original by one of the authorised persons listed in the CBH Superannuation Fund PDS.

Date of event (DD/MM/YYYY)

Life event	Documents required
Marriage or divorce	A certified copy of your marriage certificate or divorce papers
You have a child or legally adopt a child	A certified copy of the birth certificate or adoption papers
You are granted a home loan from a financial institution on the initial purchase of a principle place of residence	A certified copy of the loan documents from the mortgage lender, including the amount of the drawdown loan (not just approval)
Loyalty increase	Members with 10 years of membership. A statement from fund

## 3. Declaration

### Please review this declaration and sign you agree to it.

- I've read the current CBH Superannuation Fund PDS which explains the terms and conditions that will apply to me once my application has been accepted
- I've read and understood the duty of disclosure and I understand the duty continues until MLC accepts my application and agrees to provide the requested insurance
- I haven't been declined for cover, or received, or am eligible to receive, any disability or terminal illness benefit payment, or in the process of lodging any disability claim
- The information provided in this application is true and complete
- I'm under the age of 60
- My increased insurance will not start until I receive written confirmation MLC has accepted my application
- I acknowledged that I have access to the Insurer's privacy policy and agree that the Insurer may collect, use, disclose, and handle my personal information in any manner set out in the Insurer's privacy policy available on [mlc.com.au](http://mlc.com.au)
- I consent to notices relating to my application to be sent to the email address or the mobile number provided by me and I acknowledge that my personal and sensitive information may be sent to that email address and or mobile number.

### Member's signature

Full name (please print)

	Date (DD/MM/YY)
	<input type="text"/>

## 4. Send us your form

Please mail your completed, sign and dated form to: **CBH Superannuation Fund, 30 Delhi Street, West Perth WA 6005**  
For more information or assistance with completing this form, please call **08 9237 9707**.