# Application to Transfer My Insurance to QSuper

#### When to use this form

Use this form if you want to transfer your insurance cover from another Australian insurer or super fund to your QSuper account. Please make sure you read the QSuper Insurance Guide before completing this form. After you have submitted your completed form to us, we may request further health and other information. We will contact you if this is required.



Client number

You can find your client number on your annual statement or by logging in to Member Online.

Title First name/s

Last name

Previous name (if we know you by another name)<sup>1</sup>

Date of birth (dd/mm/yyyy) Home phone number

Mobile phone number

Work phone number

We may need to contact you to discuss your transfer application. Please provide the best daytime number for us to call you on in the spaces above.

Email address

**Residential address** 

State Postal address Postcode

As above

State

Postcode

1 If your name has changed and you work for the Queensland Government or default employer, let your payroll office know and they will let us know. Otherwise, please send us a certified copy of either a marriage certificate or other legal change of name document. **2** ART Life Insurance Limited (ABN 79 607 345 853, AFSL 483057) ('ART Life') is a registered life insurance company that is ultimately owned by the Australian Retirement Trust Pty Ltd as trustee for Australian Retirement Trust.

Australian Retirement Trust Pty Ltd ABN 88 010 720 840 AFSL 228975, Trustee of Australian Retirement Trust ABN 60 905 115 063

#### The duty to take reasonable care

When applying for insurance, you have a legal duty to take **reasonable care not to make a misrepresentation** to Australian Retirement Trust or the insurer (ART Life)<sup>2</sup> before the contract of insurance is entered into. A misrepresentation is a false answer, an answer that is only partially true, or an answer that does not fairly reflect the truth.

This duty <u>also</u> 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 may later investigate whether the information you provided to us was true. For example, the insurer may do this when a claim is made. As part of these investigations, the insurer may require you to supply health and other information and require you to attend medical examinations.

#### Guidance for answering our questions

When we ask you questions, we do so on behalf of the insurer. You are responsible for the information provided to us and the insurer. When answering our 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 that we ask you.
- Do not assume that we will contact your doctor for any medical information.
- 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.



Part of Australian Retirement Trust

#### Changes before your cover starts

Before your cover starts, please tell us about any changes that mean you and each person that answered our questions would now answer differently. As any changes might require further assessment or investigation, it could save time if you let us know about any changes when they happen.

#### If you need help

It's important that you understand this information and the questions we ask. Ask us or your adviser for help if you have difficulty understanding the process of applying for insurance or answering our questions.

If you're having difficulty due to a disability, understanding English or for any other reason, please let us know so we can discuss any additional support you may need. If you want, you can have a support person you trust with you or receive assistance from the Australian Government's Translating and Interpreting Service (TIS National) on 131 450. It's available to anyone, 24/7 (all day, every day).

#### About this application

When you apply for insurance, we conduct a process called underwriting. It's how the insurer decides whether it can cover you, and if so on what terms and at what cost.

You will be asked questions that the insurer 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 give in response to these questions is vital to the insurer's decision.

#### Notifying the insurer

After your cover starts, please tell us immediately if you think you may not have met your duty and we'll let you know whether it has any impact on the cover.

#### What can we 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, when you answered our questions, you took reasonable care not to make a misrepresentation. This depends on all of the relevant circumstances. This includes how clear and specific our questions were and how clear the information we provided on the duty was.
- what the insurer would have done if the duty had been met – for example, whether the insurer 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, the insurer will explain its reasons, how to respond and provide further information, and what you can do if you disagree.

#### 2 Transfer checklist and declaration

Please confirm which documentation you will be providing us, by ticking the boxes below.

#### Checklist

I've attached supporting documents showing the terms and conditions of my existing cover, including the waiting period and benefit period (income protection only). This documentation also shows any special conditions (loadings) and terms (if applicable), including

OR any pre-existing condition exclusions and the date the exclusions are to expire. Suitable documents include annual statements and your last insurance policy renewal notice and they must be less than 12 months old.

I have attached all pages of a certificate of currency that was issued within the last 30 days for my cover and that cover is still valid at the date of this application.

Please tick each box below to confirm your actions.

#### Transfer declaration

I confirm that the existing insurance cover under my other super fund or individual insurance policy will be cancelled upon acceptance of this transfer request.

I won't be transferring the cover under my other fund or individual insurance policy to any other division of that other fund, or any other fund or insurer.

I won't be exercising a continuation option or subsequently reinstate cover within the other fund or any super fund or other individual insurance policy.

I confirm that my cover does not contain premium loadings and that evidence of exclusions is provided.

Once we've approved your application, your cover is subject to our terms and conditions, which may be different to your previous insurer's. We recommend you review your existing cover before you transfer your cover.

# Permanently opt in to cover

Complete this section if you want to permanently opt in to your insurance cover.<sup>3</sup>

I want to opt in to keep the type of cover that I currently hold (being death cover, total and permanent disability cover, and/or income protection cover), even if:

- My Accumulation account becomes inactive by not having money added in the last 13 months, and/or
- My Accumulation account balance is below \$6,000, and/or
- I am under 25 years of age.

I understand that the permanent opt in will only apply to the type of cover I currently hold and am applying to transfer in (subject to acceptance) on this form. I understand that I will need to permanently opt in again for any new types of cover I apply for, or any new types of cover that I may be given automatically because of my employment status.

# Occupational rating questions

You will need to complete these questions before we can assess your application to transfer your cover to Australian Retirement Trust (QSuper). These questions refer to the role you spend the most time performing.

#### Q1. Are you:

- A registered or enrolled nurse or assistant in nursing who is qualified and currently practicing, or
- Working in the retail sector, or food and beverage service? No

Yes

#### Q2. Are you:

- A qualified tradesperson working in your area of expertise (e.g. hairdresser, chef, plumber, electrician, plasterer, or concreter), or
- A skilled worker with light manual duties (e.g. jeweller, building inspector, laboratory technician, foreman, or office equipment technician)?
  - Yes

#### Q3. Are you:

• A police officer, firefighter, paramedic, or other emergency or protective services worker, including security guard or corrections officer, or

No

No

- A professional sportsperson, or
- Working in a manual occupation that does not require trade specific qualifications and may be subject to accident or environmental hazards (e.g. earthmover, driver, cleaner, labourer, factory worker, or agricultural worker)?

Yes

Q4. Are the usual work activities of your job considered office-based or school teaching (meaning you spend at least 80% of your work time doing clerical, call centre, administrative, or other office or classroom-based activities) OR

Are you a medical practitioner, lawyer, or engineer who spends at least 80% of your work hours in an office or clinical environment?

No Yes

Q5. Do you currently perform, or intend to work in a job within the next three months that includes any of the following risky activities:

- Handling firearms (other than as a police officer, correctional officer, or licensed security guard), dangerous chemicals, or explosives, or
- Offshore work oil and gas platforms or ships at sea, or
- · Being underground (in construction and mining environments) or underwater for more than 20% of total at work time, or
- Working at heights over 20 metres in any environment requiring hard hat and harness for safety by law, or
- Crop dusting, aerial mustering, or any low level flying activity (defined as below 150m or 500ft), or
- Flying more than 200 hours per annum as a passenger other than on a commercial airline, or as a pilot (fixed wing or helicopter)?

Yes No

Q6. Are you earning more than \$120,000 a year (before tax and employer-paid superannuation) from your job?

Yes No

Q7. Do you have a university qualification that you are using or is required in your current role?

Yes No

Q8. Do you have a senior/executive level management role in your company? (Your direct reports would be mid-level managers or skilled specialists in a sedentary setting.)

OR

Is your role considered professional (e.g. doctor, solicitor, accountant - requiring membership of a professional or government body to practise in your occupation)?

Yes No

#### 5 Other cover details

Please provide us with the details of the insurance cover you would like to transfer to Australian Retirement Trust (QSuper).

Name of the other Australian superannuation fund or life insurance company

The member/policy number

# Death cover and total and permanent disability (TPD) cover

Death cover	TPD cover
\$	\$

If you would like to apply for a lower amount of cover than you are transferring in, please specify the amount below (optional):

Death cover	TPD cover
\$	\$

#### Income protection (IP) cover

IP cover monthly benefit	Benefit period	
\$		
Waiting period		
days		

I understand that any transferred death cover, TPD cover, and/or income protection cover will be subject to the terms and conditions of cover in the Insurance Guide and the insurance policy between Australian Retirement Trust (QSuper) and the insurer. Any preexisting exclusion period under the cover I am applying to transfer in will continue to apply until it would have expired under my original policy.



#### Please answer the following questions:

Q1. Are you gainfully employed as at today's date and have been at work for 30 consecutive days immediately prior to this application to transfer your insurance cover? ("At work" has a specific meaning that can be found in the Definitions section of the Insurance Guide).

Yes No

Q2. Are you restricted from performing your usual occupation or any identifiable duties of your current and normal occupation due to any illness or injury?

Yes No

Q3. Have you received medical advice, been diagnosed with an illness or suffered an injury, which is or may restrict you in the future from performing any identifiable duties of your usual occupation?

Yes No

Q4. Have you been advised you have, or been diagnosed with a sickness, illness or injury that reduces or is likely to reduce your life expectancy to less than 24 months?

Yes No

Q5. Do any special conditions (loadings) apply to any of your death, total and permanent disability (TPD), or income protection cover?

Yes No

Q6. Have you been paid, or are you currently being paid, a benefit through any life insurance policy (including total and permanent disability (TPD) and trauma) or any source of income support (e.g. Workers' Compensation or income protection benefits) replacing all or part of your income while unable to work as a result of accident, injury, or sickness?

Yes No

Q7. Are you in the process of, or are you considering, submitting a claim through any life insurance policy (including total and permanent disability (TPD) and trauma) or any source of income support (e.g. Workers' Compensation or income protection benefits) to replace all or part of your income if unable to work as a result of accident, injury, or sickness?

Yes No

If you have answered **No** to Q1 or **Yes** to any of Q2-Q7 in section 6, you are not eligible to transfer your insurance cover to Australian Retirement Trust (QSuper). You may be eligible to apply for additional cover with Australian Retirement Trust by completing our Change of Insurance form available on our website, or via Member Online.

# Important information

You should not cancel the cover you have with your other super fund or insurer until you have received confirmation from us that we've accepted this transfer request.

Once your application for transfer of cover has been assessed we'll notify you of the outcome. We may need to contact your other fund or the insurer of your other policy in completing our assessment of your application.

If your application to transfer existing death cover and TPD cover is accepted, you'll be allocated additional Australian Retirement Trust cover (up to a maximum limit of \$1 million for this transfer) to replace your death and TPD cover under your other fund or other policy. Your death cover and TPD cover will be rounded up to the nearest number of units. If your transfer in is a fixed amount of death cover and/or TPD cover, we will convert all your cover to fixed cover rounded up to the nearest \$1,000 if it is not already in a multiple of \$1,000. Any existing cover you were eligible to receive on opening a QSuper account won't be affected by our acceptance of this transfer request.

If your application to transfer existing income protection cover is accepted, your income protection cover will be converted and rounded up to the nearest equivalent number of units (subject to a maximum transfer of \$20,000 per month of cover). The waiting period will be matched to an equivalent or nearest longest waiting period offered by us (except if you are a Queensland police officer). The benefit period will be matched to an equivalent or nearest lower benefit period offered by us (except if you are a Queensland police officer). If you are a Queensland police officer). If you are a Queensland police officer you will have a waiting period of accrued sick leave plus approved Queensland Police Service sick leave bank or 180 days, whichever is greater, and a benefit period of up to two years.

We'll advise you of your cover upon acceptance of this transfer request.

Premiums for any cover transferred in are charged at the relevant Australian Retirement Trust occupational rate premium. Any exclusions on your other cover will continue to apply. However, you can apply to have any exclusions on your cover removed by completing our *Change of Insurance* form.

Replacing your existing cover may result in the loss of any accrued benefits or waiting periods restarting. Deciding what is best for you will depend on your personal circumstances, and you may want to seek personal financial advice to get the most from your super. You can find out more about financial advice options at **qsuper.qld.gov.au/advice** 

### Your Privacy

Information collected on this form and in connection with your application is collected by Australian Retirement Trust Pty Ltd as trustee for Australian Retirement Trust and ART Life Insurance Limited (ART Life), our registered life insurance company. This information may be shared with other entities that are ultimately owned by Australian Retirement Trust Pty Ltd when it is necessary.

We take protecting your privacy seriously. We are collecting your personal information that may include sensitive information in order to assess your application for insurance cover.

Without this information and information we may collect, with your consent, from third parties such as medical, we may be unable to appropriately assess your application or provide you with cover for which you may be eligible. We may share your personal information with third parties if we need to, if you have provided consent, or if we are required to by law. Some third parties may be located overseas. More information about how we may use or disclose your personal information or how individuals can access or correct their information, is set out in our Privacy Policy, available from **qsuper.qld.gov.au/privacy**.

# 7 Your declaration and authorisation

By signing this application, I am making the following statements:

- The information I have given on this form is true and correct.
- I have read the Product Disclosure Statement for Accumulation Account (PDS), including the Insurance Guide.
- I authorise Australian Retirement Trust and the insurer to disclose my personal and medical information (if collected) to their appointed service providers in connection with assessing my application.
- I confirm I am under age 65 at the date of this application.
- I authorise Australian Retirement Trust and the insurer to give effect to the transfer of Insurance as described above.
- I have read and understand my legal duty to take reasonable care not to make a misrepresentation to Australian Retirement Trust and the insurer. I understand that If I do not meet my legal duty, my cover could be avoided (treated as if it never existed) or its terms may be unfavourably changed. In addition, if I make a claim, it may be declined or the applicable benefit reduced.
  - I agree to assist the insurer to investigate any claim or representation I make by:
    - a) providing all information and third party consents reasonably required by the insurer, and/or
    - b) attending all medical examinations reasonably required by the insurer.

- I understand Australian Retirement Trust will cancel my insurance if I don't have enough funds available in my Accumulation account to cover the cost of my insurance premiums, or I stop being a member with an Accumulation account.
- I understand Australian Retirement Trust will cancel my insurance in certain circumstances.<sup>4</sup>
- I know I can permanently opt in<sup>5</sup> to this cover to prevent my cover being cancelled, subject to certain eligibility terms and conditions.<sup>6</sup>
- I understand I can cancel my insurance at any time using Member Online or by completing an Application to Cancel Insurance form.
- I authorise my other super fund or the insurer of my other policy to provide Australian Retirement Trust and the insurer with any information about my current insurance cover. For this authority, a photocopy of this declaration is as valid as the original.
- Any non-disclosure to the other superannuation fund (or its insurer) or the other policy insurer may be acted upon by Australian Retirement Trust and the insurer.
- My replacement cover will not commence until Australian Retirement Trust and the insurer accepts this transfer request.
- I authorise Australian Retirement Trust and the insurer and persons I have appointed (or authorised) to obtain and refer to:
  - Any statements that have been made in connection with my application for insurance
  - Any medical reports to other entities involved in providing or administering my insurance (e.g. reinsurers, third party administrators, specialist claims providers, and legal advisers)
  - Financial, employment, or medical related information in support of the assessment of my claims from any other entity holding information on me.
- In the event that I become entitled to an insured death, TPD, or IP benefit from my other fund or insurer after my acceptance, the transferred in cover will be cancelled from inception and no benefits will be payable, and premiums will be refunded.

#### Name

#### Signature

(Please sign in blue or black pen – we do not accept electronic signatures on this form.)

Date signed (dd/mm/yyyy)

#### Where to send this form

Please send your completed form to us by: Post \_\_\_\_\_

QSuper GPO Box 200 Brisbane QLD 4001

Email qsuper@qsuper.qld.gov.au

4 There are various circumstances when cover will end. See the Insurance Guide at gsuper.gld.gov.au/pds

**5** To permanently opt in to insurance you have, visit Member Online or complete section 3 of this form.

6 For details on available insurance, including eligibility and exclusions, please refer to the Insurance Guide available at qsuper.qld.gov.au/pds

#### **Member Centres**

Visit **qsuper.qld.gov.au/membercentres** for locations

 Member Services team

 Phone 1300 360 750

 Overseas +61 7 3239 1004

 Monday to Friday 8.00am – 6.00pm (AEST)

Postal address GPO Box 200, Brisbane QLD 4001 Email qsuper@qsuper.qld.gov.au Fax 1300 242 070 Website qsuper.qld.gov.au

This form and all QSuper products are issued by Australian Retirement Trust Pty Ltd (ABN 88 010 720 840, AFSL 228975) as trustee for Australian Retirement Trust (ABN 60 905 115 063). Any reference to "QSuper" is a reference to the Government Division of Australian Retirement Trust. This is general information only, so it does not take into account your personal objectives, financial situation, or needs. You should consider whether the product is right for you by reading the relevant product disclosure statement (PDS) and target market determination (TMD) available at qsuper.qld.gov.au or call us on 1300 360 750 to request a copy. Where necessary, consider seeking professional advice tailored to your individual circumstances. We take protecting the privacy of personal information very seriously. 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 qsuper.qld.gov.au/privacy or call us to request a copy.

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