

Step 2 – Life event and increase to insurance

1. Please tick which life event you are applying for:

- You or your partner gives birth or adopts a child
- You get married
- You get divorced
- You have a new mortgage or increased your mortgage on your permanent residence. The mortgage or increase must be at least \$100,000.

Note that if you have made an application for one of the above life events in the past, the option to select that particular life event is no longer available to you.

2. What date did your life event occur? / /

Note this application and supporting evidence must be received within 90 days of the above date that your life event occurred.

3. Specify amount of life event insurance required \$ (must be a multiple of \$1,000)

Step 3 – Supporting evidence for the life event

You must provide certified* supporting evidence with your application for it to be approved.

The table below shows the documentation that is to be provided. Tick the box next to the life event that you have selected confirming you have attached the relevant certified* documentation.

<input type="checkbox"/> Birth or adoption of a child	A copy of the birth certificate or adoption papers naming you as a parent
<input type="checkbox"/> Marriage or divorce	A copy of the marriage certificate or divorce papers naming you as a party to the marriage or divorce
<input type="checkbox"/> Purchase of your permanent residence with a new mortgage, or increase of your existing mortgage, by at least \$100,000	A copy of the mortgage documentation from the issuer of the mortgage showing the address the mortgage applies to and the amount of the mortgage. The address must be the same as the residential address known to us.

* All copies of documentation must be certified. A certified copy is a copy of an original document that has been certified by any of the following acceptable persons: legal practitioner, Justice of the peace, magistrate, notary public, police officer, dentist, veterinary practitioner, pharmacist, accountant, Member of Parliament, minister of religion, and medical practitioner.

Step 4 – Duty of disclosure

Before you enter into a contract of life insurance with an Insurer, you have a duty, under the Insurance Contracts Act 1984, to disclose to the Insurer every matter that you know or could be reasonably expected to know, that is relevant to the Insurer's decision whether to accept the risk of insurance and, if so, on what terms.

You have the same duty to disclose those matters to the Insurer before you renew, extend, vary or reinstate a contract of life insurance. Your duty, however, does not require disclosure of a matter that diminishes the risk to be undertaken by the Insurer; that is of common knowledge; that the Insurer knows or in the ordinary course of its business ought to know; as to which compliance with your duty is waived by the Insurer.

If you fail to comply with your duty of disclosure and the Insurer would not have entered into the contract on any terms if the failure had not occurred, the Insurer may avoid the contract within three years of entering into it. If your non-disclosure is fraudulent, the Insurer may avoid the contract at any time. An Insurer who is entitled to avoid a contract of life insurance may, within three years of entering into it, elect not to avoid it but to reduce the sum that you have been insured for in accordance with a formula that takes into account the premium that would have been payable if you had disclosed all relevant matters to the Insurer.



Your Privacy

The Scheme is administered by us along with our service provider, Mercer Outsourcing (Australia) Pty Ltd. We collect, use and disclose personal information about you in order to manage your superannuation benefits and give you information about your super. We may also use it to supply you with information about the other products and services offered by us and our related companies. If you do not wish to receive marketing material, please contact the Manager on (08) 8204 3826.

Our Privacy Policies are available to view at www.superfacts.com/samfs or you can obtain a copy by contacting the Manager on (08) 8204 3826.

If you do not provide the personal information requested, we may not be able to manage your superannuation.

We may sometimes collect information about you from third parties such as your employer, a previous super fund, your financial adviser, our related entities and publicly available sources.

We may disclose your information to various organisations in order to manage your super, including your employer, our professional advisors, insurers, our related companies which provide services or products relevant to the provision of your super, any relevant government authority that requires your personal information to be disclosed, and our other service providers used to assist with managing your super.

In managing your super your personal information will be disclosed to service providers in another country, most likely to Mercer's processing centre in India. Our Privacy Policies list all other relevant offshore locations.

Our Privacy Policies set out in more detail how we deal with your personal information and who you can talk to if you wish to access and seek correction of the information we hold about you. It also provides detail about how you may lodge a complaint about the way we have dealt with your information and how that complaint will be handled.

If you have any other queries in relation to privacy issues, you may contact the Manager on (08) 8204 3826 or write to our Privacy Officer, SA Metropolitan Fire Service Superannuation Scheme, GPO Box 98, Adelaide, SA 5001.

Step 5 – Sign the form

By signing this form I declare that:

- The information I have given on this form and the accompanying supporting information is true and correct; and
- The Life Event nominated in this application form has occurred within 90 days of completing this form; and
- I satisfy all of the eligibility criteria to apply to increase my cover as the result of the occurrence of the Life Event nominated; and
- I have read and understood the Duty of Disclosure above and I have not withheld any information that may affect the Insurer's decision as to whether or not to accept my application for cover.
- I have read and understood the SA Metropolitan Fire Service Scheme Member Benefit Guide and agree to be bound by the terms and conditions outlined in them

Furthermore, I acknowledge that:

- If I do not fully complete this application or I do not sign and date it, I will not be eligible for the nominated additional insurance cover within SA Metropolitan Fire Service Scheme; and
- My insurance cover will not commence until the Insurer has accepted my application. Cover will commence from the date that SA Metropolitan Fire Service Scheme advises in writing, subject to the payment of premiums; and
- In the event of a claim arising within the first 12 months of my cover increasing as the result of an accepted Life Event, then the Insurer will only pay the increased cover where the claim is the result of an accidental bodily injury.
- The Insurer may undertake appropriate inquiry and investigation to verify the answers that I have provided. These inquiries and investigations may be made at any time including, but not limited to, when the Insurer is considering this application or at the time of the claim.
- I understand and consent to my information being collected, disclosed and used in the manner set out in this form.

Signature

Date

/ /

Please return your completed form and any supporting evidence to SA Metropolitan Fire Service Superannuation Scheme, GPO Box 98, Adelaide SA 5001

