



Preliminary Statement

Member No.:

Member Name:

Do any of the following statements apply to your own and current circumstances? **Yes / No**

1. Do you have any definite plans to travel outside of Australia?
2. Have you travelled outside of Australia in the last **21 days**?
3. In the last **21 days** have you experienced any of the following symptoms:

Fever	Yes/No
Flu-like symptoms	Yes/No
Fatigue	Yes/No
Cough	Yes/No
Sore throat	Yes/No
Loss of smell or taste	Yes/No
Shortness of breath	Yes/No
4. In the last **21 days** have you been told to self-isolate?
5. Have you tested positive for COVID-19 in the last **30 days** or are you currently awaiting a test result?
6. Have you tested positive for COVID-19 and since recovered by recording a negative test result less than **30 days** ago?

If you have answered 'No' to all the questions above, please include this Preliminary Statement with your Insurance Application'.

If you have answered "Yes" to the above statement, we are unable to consider your insurance application at this time. If your circumstances change in regard to the statements you have provided, please feel free to reapply.

Signature of member:

Date:

Superannuation Personal Insurance Short personal statement



NWINSUSPSP

Please use **BLACK** pen and **BLOCK** letters.

- ⚠** You should read the current Product Disclosure Statement, including the Insurance Guide and the Information Guides referred to in the Product Disclosure Statement for the product in which your account is held as there may have been changes to the terms and conditions governing this transaction. The current Product Disclosure Statement is available on our website.

You cannot complete this form if you:

- are aged 55 or older;
- require more than \$1,250,000 Death and Total & Permanent Disablement insurance cover; or
- earn over \$160,000 per annum and therefore require more than \$10,000 monthly benefit of Income Protection cover.

If you meet one of the above criteria please complete the Application form and personal statement.

Disclosure notice

Your duty of disclosure – Before you enter into a contract with or become insured by the insurer you have a duty under the Insurance Contracts Act 1984 to disclose to the insurer every matter that is known, or could reasonably be expected to be known, that is relevant to their decision whether to accept the risk of insurance, and if so, on what terms. This duty of disclosure applies until Netwealth has confirmed in writing that the insurer has accepted the risk and you have an active Netwealth Superannuation Master Fund account. The same duty of disclosure to disclose these matters to the insurer applies before you extend, vary or reinstate your life insurance contract. Your duty does not, however, require you to disclose a matter:

- that diminishes the risk to be undertaken by the insurer; or
- that is common knowledge; or
- that the insurer knows or should know as an insurer; or
- if your duty to disclose is waived by the insurer.

If you do not tell the insurer something that you know, or could reasonably be expected to know, this may affect the insurer's decision to provide the insurance and on what terms, this may be treated as a failure by you to tell the insurer something that you must tell them.

Consequences of non-disclosure – The insurer has a number of rights in the event of non-disclosure. In exercising these rights, the insurer may consider whether different types of cover can constitute separate contracts of life insurance. If they do, the insurer may apply the following rights separately to each type of cover. The rights are as follows:

- If you do not tell the insurer anything you are required to, and the insurer would not have provided the insurance if you had told them, the insurer may avoid the contract within 3 years of entering into it.
- If the insurer chooses not to avoid the contract, the insurer may, at any time, reduce the amount of insurance provided. This would be worked out using a formula that takes into account the premium that would have been payable if you had told the insurer everything you should have. However, if the contract 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 of insurance provided, the insurer may, at any time vary the contract in a way that places the insurer 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 provides cover on death.
- If the failure to tell the insurer is fraudulent, the insurer may refuse to pay a claim and treat the contract as if it never existed.

Step 1. Provide member details

Existing Netwealth client

Client name

Client number Netwealth account number

New client

Mr/Mrs/Miss/Ms/Dr/Other Family name

Given name(s)

Date of birth / / Sex Male Female

Step 1. Provide member details (continued)

Residential address

Suburb/town

State Postcode

Step 2. Nominate member advice fees - insurance

Adviser name

Adviser code

Please provide the details of ongoing member advice fee – insurance that you agree with your Nominated Financial Adviser, including GST¹. You authorise and direct us to pay these amounts to the AFS Licensee for whom your Nominated Financial Adviser acts as an authorised representative (whoever that may be from time to time) and you consent to some or all of this amount being paid by the AFS Licensee to your Nominated Financial Adviser (or their nominee).

This fee will apply to any new insurance attached to your account. Do not complete this section if you are increasing existing cover with the Netwealth Superannuation Master Fund as the same fee option that applies to your existing cover will also apply to the increased cover, once accepted by the Insurer.

Ongoing member advice fee - insurance % (0-25%)

Please refer to the 'Insurance Guide' for a full description of the member advice fee.

Netwealth may be entitled to receive a Reduced Input Tax Credit (RITC) on these fees and the amount deducted from your account to pay these fees may be less than the amount shown on this form.

¹ Please note, you can only pay member advice fees from Super for advice given by your Nominated Financial Adviser in relation to your Netwealth Superannuation account.

Step 3. Insurance options

New insurance OR Increase to existing insurance (if applying for an increase please enter total required insurance amount below)

Type of insurance

Death only (only complete this section where no TPD cover is required)

1) Sum insured \$

2) I wish to opt out of annual CPI increase

Death and Total & Permanent Disability

1) Sum insured \$ If TPD cover required is less than death cover, please specify \$

2) I wish to opt out of annual CPI increase

Income protection

1) Amount of income insured % (up to 75% of annual income)

OR

Fixed amount of \$ per month (monthly benefit can be up to 75% of annual income as described in the Insurance Guide)

PLUS (optional)

Superannuation contributions % up to 10% of annual income (these are paid directly to your superannuation account)

2) Waiting period (select one) **AND** Benefit payment period (select one)

30 days

2 years

60 days

Up to age 65 (no escalation)

90 days

Up to age 65 (with escalation)

3) I wish to opt out of annual CPI increases

Step 4. Personal questionnaire and declaration

At the date of this application:

1) Do you permanently reside in Australia? Yes No

2) Occupation

Industry

Annual salary \$ If you are self employed, please supply evidence of income.

Number of hours worked per week (must be regular consistent hours each week)

Daily duties (including % time spent

performing each duty including any

manual work):

3) Please state your height cm

Please state your weight kg

4) Have you smoked any tobacco or any other substances in the last 12 months? Yes No

If yes, please state forms and quantities

5) At the date of this application, are you absent from work or unable to carry out all of the duties of your current or usual occupation on a full time basis, due to an injury or illness (even if you are not currently working on a full time basis or are unemployed)? Yes No

6) Do you drink more than 20 standard drinks per week? Yes No

7) Do you participate or intend to participate in any of the following?

aviation (other than as a passenger on a recognised airline), football (all codes), scuba diving (more than 40 metres), motor racing or any other hazardous activity? Yes No

8) Have you ever suffered symptoms of, or had, or been told you have or received any advice or treatment for:

- high blood pressure, high cholesterol, heart complaint, chest pain or stroke;
- mental or nervous disorder including stress, anxiety, depression or neurological condition;
- cancer or a tumour of any type;
- back/joint disorder, arthritis, loss of limb or paralysis;
- loss of sight of any eye(s) or blindness;
- kidney, bladder, bowel or stomach disorder and or disease; or
- diabetes or liver disease (including hepatitis)?

Yes No

9) a) Have you ever:

- suffered from AIDS or been infected with the HIV virus; or
- injected yourself with any illicit drugs not prescribed by a medical practitioner; or

b) In the past 5 years have you:

- engaged in male to male sex without a condom (except in a relationship between you and only one other person where neither of you have had sex without a condom with anyone else in the past 5 years); or
- had sex without a condom:
 - with someone you know or suspect to be HIV positive; or
 - with someone who injects non prescribed drugs; or
 - with a sex worker or as a sex worker

Yes No

! If you answered 'Yes' to any question from 4 to 9 you are required to complete the Application form and personal statement in the Insurance Guide.

Step 5. General declaration

- 1. **Truth and accuracy** – I hereby declare that to the best of my knowledge and belief all of the answers to questions on this application and personal statement are true and accurate and I have not deliberately withheld any information material to the proposed insurance.
- 2. **Changes to contract** – I understand that I must advise the Insurer of any material change in my health during the period between the application date shown below and the cover commencement date. I understand that my failure to advise of such a change may make the contract of insurance voidable by the Insurer.
- 3. **Acceptance of this application** – I note that this application is subject to acceptance by the Insurer and that the insurance cover does not commence until I have been advised by AIA Australia Limited or Netwealth Investments Limited about acceptance of my application.
- 4. **Duty of disclosure** – I have read and understood the Disclosure notice at the beginning of this form and understand its contents and what is meant by my duty to disclose and I understand that my duty to disclose continues after I have completed this application until the Insurer has accepted the risk.
- 5. **Privacy statement** – I have read and understood the 'Privacy' section as detailed in the Insurance Guide.
I consent to my personal information being collected and used in accordance with the Privacy Statement.
- 6. **Adviser fees** – If I have specified a member advice fee – insurance in Step 2 of this form, I confirm that the member advice fees are for financial product advice provided to me by my Nominated Financial Adviser relating solely to insurance held through my Netwealth Superannuation account. The authority to deduct the member advice fees entered at Step 2 (if any) will continue unless revoked by me or my Nominated Financial Adviser.
- 7. I consent to my personal information being collected and used in accordance with the Privacy Statement.

Insurance Election Notice

By completing this form:

- 1. You elect to apply for and maintain insurance benefits even if, at the date of this application/request, your superannuation account has been inactive² for a continuous period of 16 months; and
- 2. You elect to maintain your insurance benefits if, at any time after this application/request is accepted, your superannuation account becomes inactive² for a continuous period of 16 months,

unless you complete the following instruction:

I agree to be notified periodically when my account has had a continuous period of inactivity (to warn me that, if I do not take any further action, my insurance will be cancelled if my account becomes inactive² for a continuous period of 16 months).

Warning: If you tick this box and at the time or any time after this application/request is accepted your account has been inactive² for a period of 16 months, we may cancel your insurance cover at that time.

² Your superannuation account will be considered inactive if you do not make a contribution or rollover to the account for a period of 16 months or more.

Member

Signature of the person to be insured Date / /

Step 6. Once complete please send to us

Send to us: contact@netwealth.com.au Netwealth Investments Limited, Reply Paid 336, South Melbourne VIC 3205
 [Activities & Tasks > Document Upload > Super Personal Super Application \(Advisers only\)](#)

For more information: netwealth.com.au 1800 888 223 Your adviser