

Seniors Funeral Insurance

Top Cover

**Product Disclosure Statement
and Policy Booklet**
Issue date: 1 July 2017



Seniors Funeral Insurance Top Cover is issued by the insurer, Hannover Life Re of Australasia Ltd (**Hannover**) ABN 37 062 395 484 of Level 7, 70 Phillip Street, Sydney NSW 2000.

Seniors Funeral Insurance Top Cover is distributed and promoted by Australian Seniors Insurance Agency Pty Ltd (**Australian Seniors**) ABN 31 604 937 902 an Authorised Representative (AR 1008593) of Greenstone Financial Services Pty Ltd (**GFS**) ABN 53 128 692 884, Australian Financial Services Licence 343079 of 58 Norwest Blvd, Bella Vista NSW 2153.

What's included in this Document Pack

Product Disclosure Statement (PDS) 4

Reading this PDS	5
Applying for a Policy	5
Policy Terms	5
The benefits of Seniors Funeral Insurance Top Cover	6
Definition of Accident	6
Benefit Amount	7
Early Cash Back Option	7
Children's Insurance Option	7
Cost of Seniors Funeral Insurance Top Cover	8
General Information	8

Policy Booklet – Seniors Funeral Insurance Top Cover 10

Single or Joint Plan	11
Seniors Funeral Insurance Top Cover benefits	11
What is not covered under your Policy	12

What we will pay you under your Seniors Funeral Insurance Top Cover	13
When can you elect to terminate your cover and receive the Early Cash Back Option?	13
When cover starts and ends	13
Children's Insurance Option	14
Premium	15
Making a Claim	15
Benefit Payments	16
Benefit Nominations	16
Changes	17
Your 30 day money back guarantee	17
Questions or complaints	17
Privacy Notice	18

Glossary 19

Direct Debit Service Agreement 22

Nomination of Beneficiaries Form 23

Product Disclosure Statement



Any advice given in this Product Disclosure Statement (**PDS**) is general only and does not take into account your individual objectives or financial situation. You should consider whether this product is right for you, in regard to your objectives, financial situation and needs. You should carefully read this and any other documentation we send you.

Seniors Funeral Insurance Top Cover and this PDS is issued by the insurer, Hannover Life Re of Australasia Ltd (**Hannover**) ABN 37 062 395 484 of Level 7, 70 Phillip Street, Sydney NSW 2000.

Seniors Funeral Insurance Top Cover is distributed and promoted by Australian Seniors Insurance Agency Pty Ltd (**Australian Seniors**) ABN 31 604 937 902 as an Authorised Representative (AR 1008593) of Greenstone Financial Services Pty Ltd (**GFS**) ABN 53 128 692 884, Australian Financial Services Licence 343079 of 58 Norwest Blvd, Bella Vista NSW 2153.

Australian Seniors and GFS do not guarantee Seniors Funeral Insurance Top Cover and they are not liable to pay benefits under a Seniors Funeral Insurance Top Cover policy. The assessment and payment of claims for benefits is the responsibility of the insurer, Hannover.

Both Australian Seniors and GFS have consented to being named in this PDS in the way shown and have not withdrawn their consent before the date of this PDS.

From time to time, Seniors Funeral Insurance Top Cover may be updated. Updates which are not materially adverse to you may be found on the Australian Seniors website at seniors.com.au. If you request a paper copy, this will be provided to you free of charge.



Reading this PDS

In this PDS:

- some words or expressions, shown in *italics*, have a special meaning which affects the insurance cover and/or benefits provided under a Seniors Funeral Insurance Top Cover policy. An explanation of these words or expressions may be found in the Glossary which begins at page 19.
- references to **we, us** and **our** mean the insurer, Hannover.

Applying for a Policy

After considering this PDS, you can apply for a Seniors Funeral Insurance Top Cover policy by calling **1800 004 005**. You can apply for a single plan on your own life, or you can apply for a joint plan to include your spouse, partner

or de facto (**Partner Life Insured**). As long as you, and your partner under a joint plan, are an *Australian Resident* aged between 18 and 79, we guarantee to accept your application.

Policy Terms

If your application is accepted, we will issue you a policy comprising a booklet setting out the terms and conditions applying and a policy schedule with details relevant to your benefits and those of your Partner Life Insured if you have a joint plan.

This PDS is a general description of the benefits provided under a Seniors Funeral Insurance Top Cover policy – you need to refer to your policy booklet and schedule for full details of how your insurance will operate. For convenience a copy of the policy booklet is included in this document which begins at page 10.

The benefits of Seniors Funeral Insurance Top Cover

Death from any cause – a Funeral Insurance Benefit is payable if you, or your partner under a joint plan, die from any cause at least 12 months after the day cover starts;

or

Death due to an accident – an Accidental Death Benefit, and the Funeral Insurance Benefit, is payable if you, or your partner under a joint plan, die as the direct result of an accident within 90 days of the accident.

While the lump sum benefit is designed to assist with the cost of your funeral and other final expenses, the benefit may be used for any purpose. This insurance does not provide any funeral, burial or cremation services. You can nominate beneficiaries to receive payment of the benefit payable on your death. How to make a nomination is explained in the information we send you with your policy.

Accidental Serious Injury Insurance – An Accidental Serious Injury Benefit is payable if you, or your partner under a joint plan, suffer one of the following conditions as the direct result of an accident within 12 months of the accident and before the Policy Anniversary following the life insured's 75th birthday:

- *Quadriplegia/Tetraplegia*
- *Paraplegia*
- *Hemiplegia/Diplegia*
- *Blindness*
- *Deafness*
- *Total and Permanent Loss of Use of Two Limbs*

The condition must be diagnosed by a *Medical Practitioner* within 12 months of the accident and confirmed by our medical advisers. The benefit is only payable once for a life insured and is not payable if the condition is directly or indirectly the result of any one of the following:

- an intentional self-inflicted bodily injury
- suicide or attempted suicide
- engaging in any professional sport
- war (whether declared or not) or war-like activity
- being a pilot or crew member of any aircraft, or engaging in any aerial activity except as a passenger in a properly licensed aircraft
- engaging in any criminal activities or illegal acts
- the consumption of drugs
- engaging in any motorsports as a rider, driver and/or passenger
- taking part in a riot or civil commotion
- the consumption of intoxicating liquor including driving with an alcohol level above the prescribed limit

Definition of "accident"

Where a benefit is payable due to death or serious injury as the direct result of an accident, "accident" means an event resulting in bodily injury occurring while your policy is in force where the injury is directly and solely caused by accidental, violent, external and visible means, without any other contributing causes, and the injury is not self-inflicted.

Benefit Amount

You can apply for a Funeral Insurance Benefit from \$3,000 to \$15,000. The Accidental Death Benefit is twice the Funeral Insurance Benefit amount (maximum \$30,000). The Accidental Serious Injury Benefit is three times the Funeral Insurance Benefit amount (maximum \$45,000).

If you, or your partner, are covered under more than one Seniors Funeral Insurance Top Cover policy, the maximum benefits apply to the total payable for the life insured under all such policies.

Seniors Promise

Seniors Funeral Insurance Top Cover comes with our Seniors Promise:

- We Promise that your Seniors Funeral Insurance Top Cover premium will never increase;
- We Promise that your Seniors Funeral Insurance Top Cover premium will reduce by 5% after every continuous 5 years your policy is in force;
- We Promise to give you choice. This means we will pay the higher of the Funeral Insurance Benefit (plus Accidental Death Benefit, if applicable) or the total premiums paid for the life insured on death if the policy is in force when that life insured dies; OR once you turn 85 you can choose to terminate your cover and receive an early cash back benefit of 150% of the Funeral Insurance Benefit. See section '**Early Cash Back Option**'.

You, and your partner under a joint plan, are protected 24 hours a day, 7 days a week, worldwide while your policy is in force.

Early Cash Back Option

At any time after you (and/or your partner under a joint plan) reach 85 years of age, you may elect to end your cover (and/or your partner's cover under a joint plan) and we will pay you 150% of the relevant life insured's Funeral Insurance Benefit.

If you terminate your cover under this option, but not your partner's cover if you have a joint plan, your policy will end, but we can issue a new policy to your partner if your partner wants to continue his or her cover (and any Children's cover).

Children's Insurance Option

If you (and/or the Partner Life Insured) are a parent or legal guardian of a child, you can apply to add Children's Insurance to your Seniors Funeral Insurance Top Cover policy. Your child must be an *Australian Resident* aged between 2 and 17 years of age.

The Children's Insurance benefit is \$10,000 for each child insured and is payable once only per child in any one of the following circumstances occurring before the policy anniversary following the child's 21st birthday:

Death from any cause – should the child insured die from any cause at least 12 months after the day cover starts.

Death due to an accident – should the child insured die as the direct result of an accident within 90 days of the accident. (Please refer to the definition of "accident" on page 6).

Serious injury or illness – should the child insured suffer one of the following conditions:

- *Paralysis*
- *Blindness*
- *Deafness*
- *Encephalitis*
- *Meningitis*

- *Total and Permanent Loss of Use of Two Limbs*
- *Major Head Trauma*

The condition must be diagnosed by a *Medical Practitioner* and confirmed by our medical advisers. The benefit is not payable if the condition is directly or indirectly the result of any one of the following:

- a congenital condition;
- the intentional act of the owner of the policy, or other person who would otherwise be entitled to all or part of the benefit;
- an injury which occurs, or an illness which becomes apparent, before the insurance for the child starts, or during the first 3 months after the insurance starts. If a child is covered under more than one Seniors Funeral Insurance Top Cover policy, the benefit is only payable once under the oldest policy.

Cost of Seniors Funeral Insurance Top Cover

Premiums are the cost of your insurance. Your premium is calculated based on the age of each life insured (you under a single plan and both you and your partner under a joint plan) when your policy starts.

If you include the Children's Insurance option, the cost of this insurance is added to the premium payable.

For a premium quote, or for more information on the cost of Seniors Funeral Insurance Top Cover, please call **1800 004 005** (week days between 8am and 8pm EST) or visit seniors.com.au

You can pay the premium by automatic debit from your bank, credit union or building society account, or by credit card.

Provided the cover remains unchanged, your premium is guaranteed never to increase and

will reduce by 5% after each continuous period of 5 years your policy is in force.

General Information

Your 30 day money back guarantee

You have 30 days from the Commencement Date, or the date any optional benefit starts, to make sure you are happy with the policy and decide whether you want to keep the policy, or the Children's Insurance option, if included. This is known as the "cooling-off" period. If you want to cancel your policy, or the Children's Insurance option (if included) within this 30 day period you may do so provided you have not made a claim under your policy. The policy booklet explains how to exercise your "cooling-off" cancellation.

Insurance risks

In considering whether to acquire Seniors Funeral Insurance Top Cover, there are a number of insurance risks you should be aware of, including:

- you need to select the correct insurance product and apply for the appropriate level of cover for your needs. If you do not have enough cover it might cause you or your family to suffer financial hardship even after receiving the benefit payment;
- if you are replacing a contract or policy with another contract or policy, you should consider all the terms and conditions of each policy before making a decision to change;
- over time your circumstances may change and you may find that you are less able to afford to pay the premium; and
- Seniors Funeral Insurance Top Cover is designed purely for protection. This means that, unless the Early Cash Back Option applies (see page 7), if you cancel your policy (after the 30 day cooling-off period), or we cancel your policy, you will not receive anything back.

(We will cancel your policy if you do not pay the premiums when due or, if you are on a temporary work visa, you cease to reside in Australia).

Risks associated with taking up the Early Cash Back Option

Before you elect to take the Early Cash Back Option (this option is available after you (and/or the Partner Life Insured under a joint plan) reach age 85), you should consider the benefits otherwise available under your policy at that time and the risks that may apply in making this decision, including:

- the amount available on death will often exceed 150% of the Funeral Insurance Benefit at the time you make your election, (you can call Australian Seniors to find out the amount payable on your death, or on the death of the Partner Life Insured); and
- any premiums you have paid after your 85th birthday will not be refundable if you subsequently elect to take up this offer.
- unless you have a joint plan and a Partner Life Insured to whom we can issue a new policy, cover for any child insured under this Policy will end because your policy will terminate.

Tax

In most cases your premium will not be tax deductible and tax will not be payable on any benefit paid under your policy.

This information is based on continuance of present tax laws and our interpretation of those laws. Your individual situation may differ and you should seek qualified professional advice in relation to your particular circumstances.

Questions or complaints

We hope that you never have reason to complain, but if you do we will do our best to work with you to resolve it. You can contact us by phone – **1800 004 005** (weekdays between 8am and 8pm EST) or by writing to us:

Writing: Customer Service Complaints
Australian Seniors Policy Services
PO Box 6728
Baulkham Hills NSW 2153

Email: mail@seniors.com.au

Usually when you have a concern, we can resolve it immediately on the phone. If not, we will treat it as a complaint and our dispute resolutions team will take steps to resolve it as soon as possible.

In the unlikely event that your complaint is not resolved to your satisfaction, or a final response has not been provided within 45 days of it being referred to our dispute resolutions team, you may be eligible to refer your matter to the Financial Ombudsman Service (**FOS**), providing your matter is within the scope of the FOS Terms of Reference. FOS is an independent dispute resolution service provided free of charge. We will inform you of your rights to refer your complaint to FOS, and how to contact FOS, when we provide a response to your complaint.

Policy Booklet – Seniors Funeral Insurance Top Cover



Your Seniors Funeral Insurance Top Cover Policy is issued by Hannover Life Re of Australasia Ltd (**Hannover**) ABN 37 062 395 484 of Level 7, 70 Phillip Street, Sydney NSW 2000 and is referable to the Hannover Australian statutory fund.

Your Policy consists of this booklet, which explains the terms and conditions of the insurance cover provided, and your Policy Schedule which sets out the details of your cover, including any special conditions applying. The Policy Schedule which is issued with this booklet will be updated when the details of your cover change, with the new Schedule replacing the previous Schedule. Please keep these documents in a safe place.

In this booklet:

- Hannover is referred to as “we”, “our” or “us”;
- “you” or “your” refers to the owner of this Policy;

- some words or expressions have a special meaning – they normally begin with capital letters and their meaning is explained in the Glossary on page 19 of this booklet.

Seniors Funeral Insurance Top Cover is distributed and promoted by Australian Seniors Insurance Agency Pty Ltd (**Australian Seniors**) ABN 31 604 937 902 an Authorised Representative (AR 1008593) of Greenstone Financial Services Pty Ltd (**GFS**) ABN 53 128 692 884, Australian Financial Services Licence – 343079, of 58 Norwest Blvd, Bella Vista NSW 2153.

This Policy is not guaranteed by Australian Seniors or GFS, nor are they responsible for the assessment of claims and the payment of benefits under the Policy.



Single or Joint Plan

When you applied for this Policy, you nominated whether you sought a Single Plan on your own life, or a Joint Plan so your spouse, partner or de facto is also covered as a Life Insured, as indicated in the Policy Schedule.

To be accepted for cover under this Policy, each Life Insured must be an Australian Resident aged between 18 and 79 years of age.

Seniors Funeral Insurance Top Cover benefits

We will pay the benefits explained below, as long as the Policy is in force for the Life Insured at the date of the insured event, except in circumstances set out under the heading – **What is not covered under your Policy.** The Benefit Amount for each Life Insured is shown in the Policy Schedule and cannot be changed.

Death from any cause

We will pay the Funeral Insurance Benefit Amount if a Life Insured dies from any cause, where death occurs at least 12 months after the Acceptance Date or, if the Policy is reinstated, 12 months after the date of reinstatement of this Policy;

or

Death due to an Accident

We will pay the Accidental Death Benefit Amount and the Funeral Insurance Benefit Amount if a Life Insured suffers Accidental Death on or after the Acceptance Date.

Accidental Serious Injury Benefit

We will pay the Accidental Serious Injury Benefit Amount as a lump sum in the case of:

- Quadriplegia / Tetraplegia; or
- Paraplegia; or

- Hemiplegia/Diplegia; or
- Blindness; or
- Deafness; or
- Total and Permanent Loss of Use of Two Limbs,

occurring to the Life Insured as the direct result of an Accident, where the injury occurs within 12 months of the Accident.

The Accidental Serious Injury must occur while your Policy is in force and before the Policy Anniversary following the Life Insured's 75th birthday. It must be diagnosed by a Medical Practitioner within 12 months of the Accident and must be confirmed by our medical advisers.

Benefit Limits

Subject to the guarantee explained below, the following benefit limits apply to each Life Insured:

- Funeral Insurance Benefit Amount – \$15,000.
- Accidental Death Benefit Amount – \$30,000.
- Accidental Serious Injury Benefit Amount – \$45,000.

If the Life Insured is covered under more than one Seniors Funeral Insurance Top Cover policy, we will apply these limits to the total of the benefits payable for the Life Insured under all Seniors Funeral Insurance Top Cover policies. Any reduction in benefit amounts will be applied to the Seniors Funeral Insurance Top Cover policies most recently commenced and we will refund the premiums paid referable to the reduced benefits.

Only one Accidental Serious Injury Insurance Benefit Amount is payable per Life Insured. A successful claim under the Accidental Serious Injury Benefit will not reduce the Funeral Insurance Benefit Amount.

Guarantee – We guarantee that the total premiums you pay on your Funeral Insurance

for a Life Insured will never be more than the benefit we pay on the Life Insured's death. This means that we will pay the higher of the Funeral Insurance Benefit Amount (plus the Accidental Death Benefit Amount, if applicable) or the total premiums paid for the Life Insured, if the Policy is in force when that Life Insured dies.

What is not covered under your Policy

During the first 12 months after the Acceptance Date for a Life Insured, a Funeral Insurance Benefit Amount will only be paid if the Life Insured suffers Accidental Death. This means that no benefit is payable if the Life Insured dies as a result of any other cause during this limitation period. The same limitation applies for 12 months after the date the Policy is reinstated.

We will not pay an Accidental Serious Injury Insurance Benefit Amount in respect of a Life Insured if the Life Insured suffers Quadriplegia/ Tetraplegia, Paraplegia, Hemiplegia/Diplegia, Blindness, Deafness, or Total and Permanent Loss of Use of Two Limbs directly or indirectly as a result of:

- an intentional self-inflicted bodily injury; or
- engaging in any criminal activities or illegal acts; or
- suicide or attempted suicide; or
- the consumption of drugs (unless it was under the direction of a Medical Practitioner and not in connection with treatment for substance abuse, drug addiction or dependence); or
- the consumption of intoxicating liquor, including having a blood alcohol content over the prescribed legal limit whilst driving; or
- engaging in any professional sport (meaning the Life Insured's livelihood is substantially dependent on income received as a result of playing sport); or

- engaging in any motor sports as a rider, driver and/or passenger; or
- war (whether declared or not) or war-like activity, or taking part in a riot or civil commotion; or
- being a pilot or crew member of any aircraft, or engaging in any aerial activity except as a passenger in a properly licensed aircraft.

What we will pay you under your Seniors Funeral Insurance Top Cover

The amount payable for a Life Insured under the Funeral Insurance Benefit will be the Funeral Insurance Benefit Amount (plus the Accidental Death Benefit Amount, if applicable), or the total premiums paid for the Funeral Insurance Benefit under the Policy for that Life Insured, whichever is the greater.

The total benefit payable for a Life Insured under the Accidental Serious Injury benefit will be 3 times the Funeral Insurance Benefit Amount.

When can you elect to terminate your cover and receive the Early Cash Back Option?

At any time after your (or the Partner Life Insured's (if applicable)) 85th birthday, you can elect to terminate your cover (or the cover of a Partner Life Insured) by notifying us in writing. Please phone 1300 306 775 or write to Australian Seniors Policy Services, PO Box 6728 Baulkham Hills NSW 2153. We will pay you an amount equivalent to 150% of the relevant Life Insured's Funeral Insurance Benefit.

The Life Insured's cover will then end and no further payments of benefits will be payable under the Policy for the relevant Life Insured.

If you terminate your cover by taking up this option, as you are the Key Life Insured, the

Policy will end and, unless there is a Partner Life Insured whose cover has not terminated and to whom we can issue a new policy, cover for any Child Insured under this Policy will also end. If there is a Partner Life Insured whose cover has not terminated under this Policy, the Benefit Amount for the Partner Life Insured and any Child Insured under this Policy can continue (subject to payment of the first premium) under a new policy we will issue to the Partner Life Insured in his or her name as the owner. The new policy will be issued on the same terms as this Policy and takes effect subject to payment of the first premium. We will carry over all premiums paid for the Partner Life Insured under this Policy to the new policy we will issue in his or her name as owner.

IMPORTANT INFORMATION:

Before you elect to terminate your cover (or the cover of a Partner Life Insured) under the Early Cash Back Option, you should call Australian Seniors on 1300 306 775 to find out what the amount payable on your death (or on the death of the Partner Life Insured) under the Policy is at that time, as it will often be greater than 150% of the Funeral Insurance Benefit. You can then consider what is the best decision for you.

When cover starts and ends

Your cover starts on the Acceptance Date and your first premium is deducted from the Commencement Date.

Your Policy (and all cover under the Policy) ends on your death, or the earlier of:

- the date you cancel the Policy; or
- the date you elect to take up the Early Cash Back Option for the Key Life Insured; or
- the date we cancel the Policy.

As long as the Policy is in force, Accidental Serious Injury Insurance ends for a Life Insured when the first of the following occurs:

- the date of payment of an Accidental Serious Injury Insurance Benefit Amount for the Life Insured; or
- the Policy Anniversary following the Life Insured's 75th birthday.

Otherwise, cover for a Life Insured ends on his or her death or where you elect to terminate their cover.

Children's Insurance Option

If you (and/or the Partner Life Insured) are a parent or legal guardian of a child aged between 2 and 17 years of age who is an Australian Resident, you can apply for Children's Insurance cover for the child. If you have Children's Insurance, each Child Insured is shown in the Policy Schedule.

The Children's Insurance Benefit Amount is \$10,000 for each Child Insured. Only one Children's Insurance Benefit Amount is payable per Child Insured, on the first covered event to occur before the Children's Insurance ends for that child.

We will pay a Children's Insurance Benefit Amount if a covered event occurs to a Child Insured while the Policy is in force, except in circumstances set out under the heading –

What is not covered under your Children's Insurance.

The covered events are:

Accidental Death – We will pay the Children's Insurance Benefit Amount as a lump sum in the case of Accidental Death of the Child Insured while covered under the Policy.

Death by any cause – We will pay the Children's Insurance Benefit Amount as a lump sum in the case of death of the Child Insured due to any cause while covered under the Policy and 12 months or more after the

Acceptance Date. The same limitation applies for 12 months after the date the Children's Insurance for the Child Insured is reinstated.

Serious injury or illness – We will pay the Children's Insurance Benefit Amount as a lump sum in the event the Child Insured suffers Paralysis, Blindness, Deafness, Total and Permanent Loss of Use of Two Limbs, Encephalitis, Meningitis or Major Head Trauma while covered under the Policy. The serious injury or illness condition must be diagnosed by a Medical Practitioner and confirmed by our medical advisers.

Limit

Only one Children's Insurance Benefit Amount of \$10,000 is payable per Child Insured under all Seniors Funeral Insurance Top Cover policies. If a Child Insured is covered for Children's Insurance under more than one Seniors Funeral Insurance Top Cover Policy, we will only pay the \$10,000 Benefit Amount on acceptance of the claim under the oldest cover and will refund the premiums paid referable to the Children's Insurance for that Child Insured under all other Seniors Funeral Insurance Top Cover policies.

Cost of your Children's Insurance

The premium you are required to pay for this option for each Child Insured is shown in your Policy Schedule. The premium must be paid in Australian currency.

Guarantee – We guarantee that the premium you pay for each Child Insured:

- will never increase after the Commencement Date; and
- will reduce by 5% after each continuous period of 5 years your Policy is in force.

What is not covered under your Children's Insurance

We will not pay a Children's Insurance Benefit Amount if the Child Insured suffers Paralysis, Blindness, Deafness, Total and Permanent Loss

of Use of Two Limbs, Encephalitis, Meningitis or Major Head Trauma as a result of:

- a congenital condition; or
- the intentional act of the Policyowner or person who will otherwise be entitled to all or part of the Benefit Amount; or
- an injury which occurs, or an illness which becomes apparent, before the Children's Insurance for the Child Insured starts, or during the first 3 months after the Children's Insurance starts or, if reinstated, the first 3 months after the Children's Insurance for the Child Insured is reinstated.

We will pay for any new and unrelated occurrence of Paralysis, Blindness, Deafness, Total and Permanent Loss of Use of Two Limbs, Encephalitis, Meningitis or Major Head Trauma suffered by a Child Insured after this 3 month period, while the Child Insured is covered under the Policy.

When your Children's Insurance starts and ends

If your application for Children's Insurance is accepted by us cover for the child starts on the Acceptance Date.

The Children's Insurance ends for a Child Insured when the first of the following occurs:

- the date of death of the Child Insured; or
- the date of payment of a Children's Insurance Benefit Amount for the Child Insured; or
- the date you die or cancel the Policy; or
- the date you take up the Early Cash Back Option on the Key Life Insured (if there is a Partner Life Insured under a Joint Plan, the Children's Insurance can continue under a new policy issued to the Partner Life Insured – refer page 7); or
- the date we cancel the Policy; or

- the date you cancel this cover for the Child Insured; or
- the Policy Anniversary following the attainment of age 21 by the Child Insured.

Premium

The premium you are required to pay when the Policy starts is shown in the Policy Schedule. The premium for each Life Insured is calculated at the Commencement Date and is based on the age of each Life Insured at that time and the Benefit Amount for each Life Insured. The premium must be paid in Australian currency.

Guarantee – We guarantee that:

- the premium you pay will never increase unless you add Children's Insurance after the Commencement Date; and
- the premium you pay will reduce by 5% after each continuous period of 5 years your Policy is in force.

You can pay your premium by automatic debit from your bank, credit union or building society account, or by charge to your credit card. Your premium will be debited on the date of your choice, either fortnightly, monthly or annually. You may apply at any time to change the method of payment of premiums by phoning **1800 004 005**.

If you are having difficulty making your premium payments please contact us and we will inform you of the options we can provide to assist you to retain your cover.

Making a Claim

If you (or your legal personal representative on your death) wish to claim under this Policy, please phone **1300 306 775** or write to Australian Seniors Policy Services, PO Box 6728 Baulkham Hills NSW 2153. You will be sent a form to be completed, signed and returned. We may also require your treating doctor or specialist to complete a form at your (or your estate's) expense.

Claims should be made as soon as possible after the event giving rise to the claim. If you do not notify us within 120 days after the event giving rise to the claim, and we are disadvantaged by the delay, we may be able to reduce the amount we would otherwise pay, or we may be able to refuse to pay the claim. Before a claim is payable we must receive proof, provided at your (or your estate's) expense and to our satisfaction, that the insured event has occurred. In addition:

- proof must be supported by one or more appropriate Medical Practitioners; and
- all relevant information, including any test, examination, or laboratory results, must be provided to us.

We reserve the right to require the Life Insured to undergo, at our expense, examinations or other reasonable tests (including, where necessary, a post-mortem examination) to confirm the occurrence of an insured event. In addition we may conduct investigations to assess the validity of the claim. This could involve the use of investigation agents and surveillance, legal advisers and the collection of personal data.

Benefit Payments

Unless a valid Benefit Nomination (explained below) applies, we make all benefit payments to you, or on your death:

- under a Single Plan, to your legal personal representative, or other person that we are permitted to pay under the Life Insurance Act 1995; or
- under a Joint Plan, to your surviving Partner Life Insured.

Benefits will be paid in Australian currency.

Benefit Nominations

You can nominate beneficiaries to receive payment of the Funeral Insurance Benefit Amount (and, any Accidental Death Benefit Amount) on your death. To make a nomination, you need to complete a Nomination of Beneficiaries Form (available from seniors.com.au) and return it to Australian Seniors Policy Services. (For convenience, a Nomination of Beneficiaries form is included on page 23).

All the following conditions apply to nominations:

- there must not be more than 5 nominees;
- nominations must be of a natural person;
- you must advise Australian Seniors Policy Services of your nominations;
- you may vary the nomination at any time by properly completing and signing a new Nomination of Beneficiaries Form and returning it to Australian Seniors Policy Services. The variation takes effect when it is received by Australian Seniors Policy Services;
- payment of benefits will be made on the basis of the latest valid nomination received by Australian Seniors Policy Services;
- if a nominee is a minor when payment is made, the payment will be made to the minor's legal guardian or trust for the benefit of the minor; and
- if a nominee pre-deceases you, that nominee's share is payable to the your legal personal representative, or other person that we are permitted to pay under the Life Insurance Act 1995.

The payment of the benefit in accordance with the above in respect of a Life Insured is full and final discharge of our liability under the Policy for that benefit.

If you die leaving a surviving Partner Life Insured, from the time of your death, the Benefit Amount for all surviving Lives Insured under this Policy can continue (subject to payment of the first premium) under a new policy we will issue to the surviving Partner Life Insured in his or her name as the owner. The new policy will be issued on the same terms as this Policy and takes effect subject to payment of the first premium. We will carry over all premiums paid for the Partner Life Insured under this Policy to the new policy we will issue in his or her name as owner.

Changes

You may apply at any time in writing to:

- change from a Joint Plan to a Single Plan (you are not able to change your Policy from a Single Plan to a Joint Plan);
- add a Child Insured to the Policy; and/or
- remove a Child Insured from the Policy.

Any change, and the terms and conditions relating to the change, are subject to our approval and written confirmation by us.

Your 30 day money back guarantee

You have 30 days from:

- the Commencement Date to decide whether you want to keep the Policy, or
- the date a Children's Insurance Option starts to decide whether you want to keep the optional benefit,

provided you have not made a claim under the Policy. This is known as the "cooling-off" period.

To cancel the Policy, or the optional benefit, as applicable, within the cooling off period, send your Policy Schedule to Australian Seniors Policy Services, PO Box 6728, Baulkham Hills NSW 2153 with a written request for cancellation within the 30 day period. When Australian Seniors Policy Services receives

your letter and Policy Schedule, the Policy and/or optional benefits will be cancelled, as applicable, and any premiums you may have paid will be refunded.

Questions or complaints

We hope that you never have reason to complain, but if you do we will do our best to work with you to resolve it. Our complaints resolution process has three steps.

1 – Immediate Response

Usually when you have a concern, we can resolve it immediately on the phone. If we can't immediately resolve your concern we will treat it as a complaint and take steps to resolve your matter as soon as possible. Please contact us using one of the following means:

Phone: 1800 004 005
(Weekdays between 8am and 8pm EST)

Writing: Customer Service Complaints
Australian Seniors Policy Services
PO Box 6728
Baulkham Hills NSW 2153

Email: mail@seniors.com.au

Please supply your Policy number to enable the enquiry to be dealt with promptly. Your enquiry or complaint will be dealt with by someone with appropriate authority.

2 – Internal Dispute Resolution

If we haven't resolved your matter to your satisfaction, at your request, we will escalate your complaint for review by our Internal Dispute Resolution team. All escalated matters will be acknowledged within 2 business days of being escalated. After full consideration of the matter a written final response will be provided that will outline the decision reached and the reasons for the decision.

3 – External Dispute Resolution

In the unlikely event that your complaint is not resolved to your satisfaction, or a final response has not been provided within 45 days, you may be eligible to refer your matter to the Financial Ombudsman Service (FOS), providing your matter is within the scope of the FOS Terms of Reference.

The FOS is an independent dispute resolution service provided free of charge.

You may contact the FOS at:

Financial Ombudsman Service

Mail: GPO Box 3,
Melbourne VIC 3001

Phone: 1800 367 287

Fax: (03) 9613 6399

Website: www.fos.org.au

Email: info@fos.org.au

Privacy Notice

In this Notice “we”, “our” and “us” means Hannover and anyone (including Australian Seniors Insurance Agency) collecting information on our behalf.

We collect the personal information requested in the application for insurance directly from you and we assume that, where you disclose information about others, you have obtained their permission to do so.

Your personal information is collected for the purpose of processing your application, administering your Policy (if issued) and assessing and paying any claims under the Policy. Your information may also be used to consider any other application you may make in the future, or to perform our administrative operations. If you do not consent to us collecting and using your personal information in this manner, or do not provide the requested information in full, we will be unable to provide the requested insurance services.

Australian Seniors Insurance Agency may use your personal information (but not sensitive information) to assist them in developing and identifying products and services that may interest you and (unless you ask them not to by calling them on 1800 004 005) telling you about products and services offered by Australian Seniors Insurance Agency.

Your personal information may be disclosed to third parties who assist in the provision of insurance services (i.e. reinsurers, related companies, our advisers, persons involved in claims, medical service providers, external claims data collectors and verifiers, your employer, your agents and other persons where required by law). We are unlikely to send your personal information to any foreign jurisdiction and we take steps to ensure our service providers don't either.

By applying for cover, you consent to sensitive information about you being collected and it being used to consider your application for insurance, assess a claim, using it or giving it to related companies for research and analysis, to design or underwrite new insurance products, and disclosing it to any of the third parties listed above for these purposes. Your sensitive information will not be disclosed for any other purpose. Third parties are prohibited from using your personal information for purposes other than those for which it is supplied.

You can read more about how we collect, use and disclose your personal information in our Privacy Policy, including how to complain about a breach of the Australian Privacy Principles. Our Privacy Policy is available at seniors.com.au or you can request a copy. If you wish to gain access to your information (including correcting or updating it), have a complaint about a breach of your privacy or have any other query relating to privacy please call **1800 004 005** Monday to Friday 8am – 8pm EST.

Glossary



Acceptance Date means:

- in respect of a Life Insured, the date an application for a Life Insured is accepted by us and cover starts, as set out in the Policy Schedule; and
- in respect of a Child Insured, the date that Children's Insurance for that child is accepted by us, as set out in the Policy Schedule.

Accident means an event resulting in bodily injury occurring while this Policy is in force, where the injury is directly and solely caused by accidental, violent, external and visible means without any other contributing causes and where the injury is not self-inflicted.

Accidental Death means death occurring as the direct result of an Accident and where death occurs within 90 days of the Accident.

Australian Resident means a person who resides in Australia at the time of application

and either holds Australian or New Zealand citizenship, or holds an Australian permanent residency visa, or has been in Australia continuously for six months or more on a temporary work visa and resides in Australia.

Benefit Amount means the amount payable on the applicable insured event under this Policy in respect of a Life Insured and Child Insured (as applicable). The Benefit Amount at the Acceptance Date for each benefit for each Life Insured and Child Insured is shown in the Policy Schedule.

Blindness means the complete and irrecoverable loss of the sight of both eyes.

Child Insured means a child accepted by us as set out in the Policy Schedule.

Commencement Date means the date on which your first premium payment is deducted. The date you select for the first premium deduction is set out in the Policy Schedule.

Deafness means the total, irreversible and irreparable loss of hearing (both natural and assisted) in both ears as measured by an audiogram.

Diplegia means total and permanent loss of use of corresponding parts of the body caused by permanent damage to the nervous system.

Encephalitis means the unequivocal diagnosis of encephalitis where the condition is characterised by severe inflammation of the brain, that results in a permanent impairment of at least 25% of the whole person function (as defined in the American Medical Association publication 'Guides to the Evaluation of Permanent Impairment', 5th Edition).

Hemiplegia means the total and permanent loss of use of one half of the body caused by permanent damage to the nervous system.

Key Life Insured means the person named in the Policy Schedule as the Key Life Insured.

Life Insured means, as the context requires, the Key Life Insured and, if applicable, the Partner Life Insured. The Lives Insured are set out in the Policy Schedule.

Major Head Trauma means an injury to the head resulting in either:

- suffering at least 25% permanent impairment of whole person function (as defined in the American Medical Association publication 'Guides to the Evaluation of Permanent Impairment', 5th Edition), or
- being permanently unable to perform at least one of the following "activities of daily living" without the physical assistance of someone else and without the use of special equipment:

Activity	Description
Washing	bathing and showering
Dressing	dressing and undressing
Eating	eating and drinking
Continenence	maintaining continence with a reasonable level of personal hygiene
Mobility	getting in and out of bed, a chair or wheelchair, or moving from place to place by walking, wheelchair or walking aid

Medical Practitioner is a qualified, practicing medical specialist, licensed to practice his or her medical specialty within Australia or New Zealand, and whose specialty qualifies him or her to make a prognosis related to the injury or illness of a Life Insured or Child Insured. The Medical Practitioner must not be the Policyowner or a Life Insured under this Policy, their spouse, relative or business associate.

Meningitis means the unequivocal diagnosis of meningitis where the condition is characterised by severe inflammation of the brain, that results in a permanent impairment of at least 25% of the whole person function (as defined in the American Medical Association publication 'Guides to the Evaluation of Permanent Impairment', 5th Edition).

Paralysis means total and permanent loss of use of two or more limbs through injury or illness caused by permanent damage to the nervous system. This includes, but is not limited to, Paraplegia, Quadriplegia, Diplegia, Tetraplegia and Hemiplegia.

Paraplegia means the total and permanent loss of use of two limbs caused by permanent damage to the nervous system.

Partner Life Insured means a person named in the Policy Schedule as the Partner Life Insured. A Partner may be a legal spouse or de facto of the Key Life Insured and may be of the same gender as the Key Life Insured.

Policy means the legal contract between you and us. This booklet, the current Schedule, and any special conditions, amendments, or endorsements make up the Policy.

Policy Anniversary means the applicable anniversary of the Commencement Date of your Policy.

Policyowner means you. You are also the Key Life Insured. This Policy may not be transferred or assigned to another person.

Quadriplegia / Tetraplegia means the total and permanent loss of use of all limbs caused by permanent damage to the nervous system.

Schedule means the Schedule issued with this Policy and updated from time to time. A new Schedule will replace previous Schedules.

Total and Permanent Loss of Use of Two Limbs means complete and irrecoverable loss of the use of two limbs. Limb in this context means an arm, leg, hand or foot.

Direct Debit Service Agreement

1. Hannover Life Re of Australasia Ltd ABN 37 062 395 484 ("Debit User") will initiate direct premium debit payments in the manner referred to in the Schedule (contained in the Direct Debit Request).
2. Debit payments will be made when due. The Debit User will not issue individual confirmation of payments made.
3. The Debit User will give the customer at least 14 days' written notice if the Debit User proposes to vary details of this arrangement, including the amount and frequency of debit payments.
4. If the customer wishes to defer any payment or alter any of the details referred to in the Policy Schedule, they must either contact the Debit User on **1300 306 775** or write to the Debit User at PO Box 6728, Baulkham Hills NSW 2153.
5. Customer queries concerning disputed debit payments must be directed to the Debit User in the first instance. Details of the dispute resolution process that applies to the Debit User are described in this document on page 17. Queries about claims in regards to disputed debit payments should also be directed to the Debit User and may also be directed to the customer's financial institution nominated in the Schedule.
6. Direct payment debiting is not available on the full range of accounts at all financial institutions. If in doubt, the customer should check with their financial institution before completing the Direct Debit Request.
7. The customer should ensure that their account details given in the Policy Schedule are correct by checking against a recent statement from their financial institution at which their account is held.
8. It is the customer's responsibility to have sufficient cleared funds available, by the premium due date, in the account to be debited to enable debit payments to be made in accordance with the Direct Debit Request.
9. By authorising the Direct Debit Request, the customer warrants and represents that he/she/they is/are duly authorised to request and instruct the debiting of premium payments from the account described in the Policy Schedule.
10. If a debit payment falls due on any day which is not a business day, the payment will be made on the next business day. If you are uncertain as to when a debit payment will be processed to your account, you should make enquiries directly with the financial institution nominated in the Policy Schedule.
11. If a debit payment is returned unpaid, the customer may be charged a fee by the financial institution nominated in the Policy Schedule for each returned item.
12. Customers wishing to cancel the Direct Debit Request or to stop individual payments must give at least 7 days' written notice to the Debit User at the address referred above.
13. Except to the extent that disclosure is necessary in order to process debit payments, investigate and resolve disputed transactions or is otherwise required by law, the Debit User and its service providers will keep details of the customer's account and debit payments confidential.

Nomination of Beneficiaries Form

If you wish to nominate a beneficiary or beneficiaries to receive benefits payable under your Policy on your death, please complete the form on the reverse of this page and return it to:

Australian Seniors Insurance Agency

PO Box 6728

Baulkham Hills NSW 2153

Nomination of Beneficiaries Form

As the Policyowner, you have the option to nominate a beneficiary or beneficiaries to receive benefits payable under your Policy on your death. The option to nominate a beneficiary is subject to the conditions listed below.

Unless a valid nomination applies (explained below):

- we make all benefit payments to you, the Policyowner; or
- if the Policyowner dies, for a Joint Plan, the Insurance benefit will be paid to the surviving Partner Life Insured, or for a Single Plan, the Insurance benefit will be paid to the Policyowner's legal personal representative, or other person that Hannover Life Re of Australasia Ltd (Hannover) is permitted to pay under the Life Insurance Act 1995.

Nominations

As Policyowner, you can nominate beneficiaries to receive payment of any benefits on your death. To make a nomination, you need to complete a Nomination of Beneficiaries Form and return it to Australian Seniors Insurance Agency PO box 6728, Baulkham Hills NSW 2153.

Conditions

The following conditions apply:

- There must not be more than 5 nominees. Nominations must be of a natural person; and
- Nominations must be in writing on a Nomination of Beneficiaries Form; and
- You may vary the nomination at any time by properly completing and signing a new Nomination of Beneficiaries Form and returning it to Australian Seniors Insurance Agency. The variation takes effect when it is received by Australian Seniors Insurance Agency; and
- Payment of benefits will be made on the basis of the latest valid nomination received by Australian Seniors Insurance Agency; and
- If a nominee is a minor when payment is made, the payment will be made to the minor's legal guardian or trust for the benefit of the minor; and
- If a nominee pre-deceases the Policyowner, that nominee's share is payable to the Policyowner's legal personal representative, or other person that Hannover is permitted to pay under the Life Insurance Act 1995.

Full Name of Beneficiary	Address	Date of Birth	Relationship to Policyowner	Proportion of Benefit (%)
		/ /		%
		/ /		%
		/ /		%
		/ /		%
		/ /		%
Your Policy number				
Name of Policyowner				
Signature of Policyowner				Date: / /

Please return this form to Australian Seniors Insurance Agency PO Box 6728, Baulkham Hills NSW 2153



**For more
information**
Call 1800 004 005
Monday to Friday 8am–8pm (EST)
or visit seniors.com.au



**For more
information**

Call 1800 004 005

Monday to Friday 8am–8pm (EST)

or visit seniors.com.au