

Please use this form to apply for the lifestyle event cover option.  
This cover can only be applied for if you meet the conditions below.

### Tips to help you complete this form

- Use blue or black pen and BLOCK letters
- Use a cross (X) to mark answer boxes
- Complete all of the form and sign and date on the last page
- Read the 'Your duty of disclosure' section below.

**Any questions?** If you'd like help completing this form, or if you have any questions, just call us on 13 11 55 and ask for 'Super'

### Important information

**In order to exercise the lifestyle event cover option the following conditions must be met:**

- you must already have been accepted for insurance cover under Suncorp WealthSmart for the same type of insurance for which you are now applying
- you've reached one of these milestones
  - just married
  - have had a mortgage or an increase to your mortgage approved
  - had or adopted a child
- this option can only be taken out once in a 12 month period and a maximum of 3 times in total.
- your completed application must be received by us within 90 days of the lifestyle event occurring.
- this option is not available for any cover that is the Trustee Minimum cover.

## Your duty of disclosure

**To be read by the Insured Person before completing the application.**

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

Your duty, however, doesn't require disclosure of a matter:

- that diminishes the risk to be undertaken by the insurer
- that's of common knowledge
- that your insurer knows, or in the ordinary course of their business, ought to know
- as to which compliance with your duty is waived by the insurer.

**Non-disclosure** – 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 insurance fee that would have been payable if you had disclosed all relevant matters to the insurer.

**This duty continues to apply until the insurer notifies you that the risk has been accepted. It also applies when you extend, vary or reinstate a contract of life insurance.**

## 1. Personal details

Suncorp WealthSmart account Number	<input type="text"/>
Title	<input type="text"/>
Last name	<input type="text"/>
Given name(s)	<input type="text"/>
Date of birth	<input type="text"/>
Daytime phone number	<input type="text"/> <input type="text"/>
Mobile	<input type="text"/>
Email	<input type="text"/>

## 2. Lifestyle event

Lifestyle event	Minimum cover amount	Maximum cover amount
Get married	\$25,000	The lesser of: <ul style="list-style-type: none"> <li>\$100,000 and</li> <li>50% of your Death cover amount.</li> </ul>
Apply for or increase your mortgage (where the mortgage or increase in mortgage is at least \$25,000)	\$25,000	<b>The lowest of:</b> <ul style="list-style-type: none"> <li>\$100,000</li> <li>50% of your Death cover amount and</li> <li>the amount or increase of the mortgage.</li> </ul>
Have a child (by birth or adoption)	\$25,000	<b>The lesser of:</b> <ul style="list-style-type: none"> <li>\$100,000</li> <li>50% of your Death cover amount.</li> </ul>

Please select the lifestyle event you have reached and the amount of cover requested.

**Note, you will need to provide evidence of the lifestyle event as described below.**

Lifestyle event	Amount of cover (in addition to existing cover)	Proof of lifestyle event (please attach a copy)
Just married		<b>Marriage certificate</b>
Have had a mortgage or an increase approved		<b>Mortgage documents</b>
Had or adopted a child		<b>Birth or adoption certificate*</b>

\* You must be named as a parent or an adopting parent.

## 3. Declaration and signature

### I acknowledge that:

- I've read this application form and confirm that the answers given are my true and complete answers. If the answers either in this form or any attachment, aren't in my handwriting, I declare that they have been correctly written down at my dictation.
- I've read my Duty of Disclosure and haven't withheld any information material to the Insurer and understand that this duty continues to apply and that the insurance applied for won't become effective until the Trustee advises the risk has been accepted.
- I've read and agree to be bound by the Suncorp privacy policy found on our website at [suncorp.com.au](http://suncorp.com.au)
- I may request access to my personal information by contacting you, although I may in some circumstances not be granted access to it. Also, I acknowledge that if the personal information requested from me isn't provided to you, then you may not be able to provide services covered in the Suncorp privacy policy.
- I acknowledge Income Protection has a specific exclusion for disability caused directly or indirectly by war.

### I consent to:

- the use of personal information about me by the Trustee (if applicable) for the purposes of providing insurance through my membership of Suncorp WealthSmart, including to assess and decide whether to agree to an application and on what terms (if any) or any amendment or increase of any insurance provided; to provide and manage the insurance cover relating to an application that has been accepted; to investigate and, if covered, manage and pay any claims made in relation to any insurance I have with you or other members of the Suncorp Group and
- the disclosure of personal information about me by the Trustee (if applicable) to, and obtaining personal information from, other parties for any of these purposes. These other parties include my adviser, other members of the Suncorp Group, loss assessors and claim investigators, other insurance companies and reinsurers, mailing houses, claims reference providers, research and telephone service providers, hospitals, medical and other health professionals, government departments, other trustees, legal and other professional advisers and other service providers.

If I've disclosed personal information about any other person, I confirm that I'm authorised to disclose personal information about that person and to consent to its use and disclosure to other parties (and obtaining other personal information about that person from other parties) for the purposes above.

Signature of the Person  
to be Insured

X

Date / /

Please send the completed form and any required attachments to: **Suncorp WealthSmart®**  
GPO Box 2585  
Brisbane QLD 4001

or fax to: **1300 172 693**