

One Company
Many Brands



Suncorp Everyday Super[®]

Insurance Policy Document

About this Policy Document

This policy document is for:

- individuals
- employers

And generally, anyone who would like to know more detail about the insurance that is available within Suncorp Everyday Super.

If you're reading this you should have already seen the eight-page Product Disclosure Statement (PDS) and the Product Guide for Suncorp Everyday Super.

This Policy Document is the legally binding document between the trustee of Suncorp Everyday Super (Suncorp Portfolio Services Limited ABN 61 063 427 958 AFSL 237905 RSE R1056655) (the Trustee) and the insurer (Suncorp Life & Superannuation Limited ABN 87 074 979 530 AFSL 229 880). It will tell you about the insurance offer. It's a more detailed version of the information you have already seen in the Product Guide and consequently it's a bit more complex so please bear with us. The document is set out as an agreement between the trustee and the insurer. The trustee is the policy owner.

Throughout this policy document there are lots of references to "You", "Your", "We" and "Our". As the document is set out as an agreement between the trustee and the insurer, it's important to remember that not all of these references are to be confused as meaning you the reader of the document.

As a quick overview in this section titled **"About this Policy Document"**

- "You" and "Your" or "Insured Person" means you the customer, who has applied and been accepted for insurance as part of your Suncorp Everyday Super Account.
- "We", "Us", and "Our" means the Insurer.
- "Policy Owner" means the Trustee.

In the all other parts of this policy document

- "Insured Person" means you the customer, who has applied and been accepted for insurance as part of your Suncorp Everyday Super Account.
- "We", "Us", and "Our" means the Insurer.
- "You" and "Your" or "Policy Owner" means the Trustee.

As detailed in the Product Guide, there are some important things to bear in mind when you read this document. Regardless of the cover chosen you will be subject to exclusions. The complicated thing with exclusions is they can vary depending on the way you have selected to set up your insurance.

You will note that in the Product Guide we give you an overview of the cover that is available to you. The terms we use are "Suncorp Lifestages Cover" or "Customised Cover". To explain how the insurance works more clearly in the policy document, we have split the terms in to three: "Suncorp Lifestages Cover", "Default Cover" and "Customised Cover".

If you have Suncorp Lifestages Cover, it means you have "Default Cover" or, if you have Customised Cover, the Insurance Cover we agreed to provide you after Underwriting your application to return to Suncorp Lifestages Cover. You may have a Pre-Existing Condition exclusion (see below for more details) applying to your Insurance Cover.

Default Cover is the Life and TPD cover automatically provided to you when you join the Insured Fund. The amount of Life and TPD Cover is dependent on your age and is automatically adjusted according to your age.

If you have Customised Cover, it means you have nominated your own level of Life and TPD cover up to the maximums and we have agreed to provide you with cover following Underwriting, and you will no longer have a Pre-Existing Condition exclusion applying to your policy.

If you apply to change between Suncorp Lifestages Cover and Customised Cover your application will be subject to Underwriting.

The exclusions you have on your policy will depend on whether you have Customised Cover, or Suncorp Lifestages Cover. The table below gives a quick overview on what these exclusions are and how they apply to your policy.

Exclusion	Applies to	What it is
'Pre-Existing Condition' (PEC)	Suncorp Lifestages cover only [†]	Any injury, sickness, illness or symptom that existed in the two years prior to or at the time your Suncorp Lifestages cover commenced and that you: <ul style="list-style-type: none"> • Were aware of, or a reasonable person in your position should have been aware of; or • Should have sought advice or treatment (conventional or alternative) from a Medical Practitioner or other health professional for (in circumstances where a reasonable person in your position would have sought advice or treatment); or • Had a medical consultation for or were prescribed medication or therapy for.
Hazardous Pursuits	Customised cover only	The participation in or preparation for or practice of selected hazardous pursuits, including: <ul style="list-style-type: none"> • Motor racing over land or water • Scuba diving (below 40 metres, pot-holing, caving in or around wrecks) • Aviation (other than as a fare paying passenger on a licensed public service) • Mountaineering and/or rock climbing, parachuting or skydiving.
Intentional 'self-inflicted act'	All cover	An intentional 'self-inflicted act' (including suicide), whether sane or insane within the first 13 months of all cover commencing, being increased (on the increased amount only) or if it was reinstated after being cancelled (for both Life and TPD cover).

[†] If at any time you return to Suncorp Lifestages cover after having Customised Cover, or your Suncorp Lifestages cover is reinstated, the 'Pre-existing Condition' exclusion will not apply. However, your application to return to Suncorp Lifestages cover or to have that cover reinstated will be subject to Underwriting. Please refer to clause 3.3 'When we won't pay' for further information.

If you've got any questions, just call us on 1800 191 517 or email us at everydaysuper@suncorp.com.au. We will be happy to help.

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Section A – Policy details

Policy details

Policy Name:	Suncorp Everyday Super
Issuer:	Suncorp Life & Superannuation Limited ABN 87 073 979 530, AFSL No. 229880
Policy Owner:	Suncorp Portfolio Services Limited ABN 61 063 427 958 in its capacity as trustee of the Suncorp Master Trust ABN 98 350 952 022, RSE Fund Registration No. R1056655
Policy Number:	EDS2013
Policy Commencement Date:	1 December 2012
Re-issue dates:	<ul style="list-style-type: none">• 1 December 2012 (Suncorp Everyday Super)• 1 July 2014 (Suncorp Everyday Super)• The date on which members of Suncorp Everyday Super - are transferred into the Suncorp Superannuation Division of the Suncorp Master Trust being the 27th May 2017
Policy Type:	Superannuation
Insured Fund:	Suncorp Master Trust ABN 98 350 952 022, RSE Fund Registration No. R1056655

Section B – Terms and Conditions

Part 1 – Information about this Policy

1.1 Introduction

The following are the Terms and Conditions of the *Policy* including:

- the basis on which *We* agree to provide *Insurance Cover* to the *Insured Persons*
- the *Benefits* provided under the *Policy*, and
- the rights and responsibilities of *You* as *Policy Owner* and *Us*.

The *Insurance Cover* provided under the *Policy* including eligibility and when cover starts and stops, is explained in **Part 2**.

Details of the *Benefits* provided under the *Policy*, limitations on these *Benefits* and how to claim a *Benefit* are detailed in **Part 3**.

The methods used to calculate and pay insurance fees are detailed in **Part 4**.

1.2 Policy owner acknowledgement

You acknowledge in accepting the *Policy* that:

- *We* have relied on information provided by *You* and *Your* appointed representatives; and
- *You* have the power to enter into this arrangement.

1.3 Interpretation

Various terms used in this document are in *italics*. Their meaning can be found in **Part 5 – Definitions**.

In these Terms and Conditions:

- words expressed in the singular include the plural and vice versa; and
- the headings contained in these Terms and Conditions are for ease of reference only and do not form part of the text of the Terms and Conditions; and
- a reference to a Legislative Act includes that Act, as amended, modified, or re-enacted from time-to-time and any legislation which supersedes that Act; and
- a reference to writing in this *Policy* includes facsimile and email.

1.4 Governing law

The *Policy* is subject to and governed by the laws of New South Wales.

1.5 Statutory fund

The *Policy* is referable to the Suncorp Life & Superannuation Limited (SLSL) Statutory Fund No. 1.

The assets of the SLSL Statutory Fund No. 1 will alone be responsible for the payment of *Benefits* under the *Policy*. All insurance fees in respect of this *Policy* will be credited to that fund and the payment of all insurance claims under this *Policy* will be paid from that fund.

The *Policy* is a non-participating *Policy*, which means it does not share in the distribution of any surplus of the SLSL Statutory Fund No. 1. *You* and/or any *Insured Person* have no rights to the assets of the SLSL Statutory Fund No. 1.

1.6 Profit share

No profit share arrangement will be provided under the *Policy*.

1.7 Notices

Any notice between *You* and *Us*:

- must be in writing; and
- will be to the most recently advised address by *You* or *Us* as applicable.

1.8 Currency

All payments made in connection with these Terms and Conditions must be made in Australian dollars.

1.9 Right to inspect your records

We reserve the right to inspect and take copy of any records held by *You* or *Your* agents or representatives which *We* believe are relevant to this *Policy*.

We will continue to reserve this right after the termination of the *Policy* until the later of two (2) years after termination of the *Policy* or the settlement of all claims under the *Policy*.

Should *We* need to do this, *We* will do so during normal business hours and give *You* reasonable notice of the inspection.

1.10 Duty of disclosure

Before *You* enter into the *Policy*, *You* have a duty under the Insurance Contracts Act 1984 (Cth) to disclose to *Us* every matter that *You* know or could reasonably be expected to know, is relevant to *Our* decision whether to accept the risk of insurance and, if so, on what terms.

You have the same duty to disclose those matters to *Us* before *You* renew, extend, vary or reinstate the *Policy*. *Your* duty, however, does not require disclosure of a matter:

- a. that diminishes the risk to be undertaken by *Us*; or
- b. that is of common knowledge; or
- c. that *We* know, or in the ordinary course of business, ought to know; or
- d. as to which compliance with *Your* duty is waived by *Us*.

If *You* fail to comply with the Duty of Disclosure and *We* would not have entered into the *Policy*, or agreed to any variation of the *Policy*, on any terms if the failure had not occurred, *We* may avoid the *Policy* within 3 years of entering into it, or agreeing to the variation, as applicable. If the non-disclosure is fraudulent, *We* may avoid the *Policy* at any time.

We may elect not to avoid the *Policy* but to vary it by:

- (i) reducing the sum insured in accordance with a formula that takes into account the premium that would have been payable if *You* had complied with *Your* duty of disclosure; or
- (ii) placing *Us* in the position in which *We* would have been in if *You* had complied with *Your* duty of disclosure.

The options to vary the *Policy* are available to *Us* while cover under the *Policy* remains in force

Where the *Policy* provides death cover, *We* may only apply i) above and must do so within 3 years of *You* entering into the contract with *Us*.

When entering into the *Policy*, this duty continues to apply until *Our* formal notification of acceptance of Insurance Cover.

When making an application for Insurance Cover under the *Policy* which requires Underwriting, this duty applies to that application and continues until *Our* formal notification of acceptance of the application.

As the *Policy* is for insurance of the *life* of another person, any failure by him or her to tell *Us* a matter that he or she knows, or could reasonably be expected to know, is relevant to *Our* decision whether to accept an application for *Insurance Cover* which requires *Underwriting* and, if so, on what terms, may be treated as a failure by *You* to comply with *Your* duty of disclosure.

1.11 Declaration of occupation and changes in occupation

Under the Duty of Disclosure in Clause 1.10, *You* must notify *Us* of the *Insured Person's* occupation and of any changes to the *Insured Person's* occupation *Category* throughout the life of their *Insurance Cover*.

An *Insured Person's* eligibility for *Insurance Cover* under the *Policy* and the calculation of their insurance fee will vary based on their *Occupation Category*.

For example:

Persons who are *Employed* in a *Hazardous Occupation* are not eligible for *Insurance Cover*. If an *Insured Person* with existing *Insurance Cover* moves to a *Hazardous Occupation* at any time during the *life* of their *Insurance Cover*, they will no longer be covered for *Life* (including *Terminal Illness*) and *TPD* cover from the date of the change in Occupation.

If an *Insured Person* moves to an occupation which is classified by *Us* as a *Restricted TPD Category* occupation, their *TPD* definition will be restricted to *TPD (Specific Loss)*, *TPD (Activities of Daily Living)* or *TPD (Significant cognitive impairment)*.

We will continue to collect insurance fees until *We* are notified of a change in occupation. If an *Insured Person* is moving to a *Hazardous Occupation*, *We* will cancel the *Insured Persons' Insurance Cover* and insurance fee as soon as *We* are notified of the change.

1.12 Duration of the Terms and Conditions

These Terms and Conditions come into force on the *Policy Commencement Date* and remain in force until the earliest of:

- *You* terminating the *Policy* by giving *Us* three (3) months written notice in advance of the *Policy Termination Date*; or
- *Our* terminating the *Policy* in accordance with Clause 2.7 or Clause 4.7; or
- the earliest of:
 - the date that the *Insured Fund* is wound up; or
 - the date that the *Insured Fund* ceases to be a complying superannuation fund; or
 - the payment of the final *Benefit* of the last *Insured Person*; or

- *We* terminate the *Policy* in accordance with *Our* legal rights.

1.13 No value on termination

This *Policy* has no value at termination.

1.14 Assignment of policy

This *Policy* can only be assigned in accordance with the Life Insurance Act 1995 (Cth), and with *Our* prior written consent.

If *We* allow the assignment, the assignee will be recorded as the new *Policy Owner* with all rights, powers, duties, obligations and privileges of the original *Policy Owner*.

Section B - Terms and Conditions

Part 2 – Eligibility for Cover

2.1 Who can have cover?

Only *Eligible Persons* may become *Insured Persons* under this *Policy*.

An *Eligible Person*:

- is an *Australian Resident* (or a *Non-Australian Resident* holding a valid *Visa*); and
- has successfully applied for a superannuation account under the *Insured Product*; and
- satisfies the applicable *Benefit* eligibility conditions in 2.1.1 on the date the relevant *Insurance Cover* is applied for.

No *Insurance* is available for TTR or pension accounts.

2.1.1 Benefit eligibility conditions

The *Benefit Eligibility Criteria* are:

a. for *Life* cover

Unless *We* agree otherwise, *Insurance Cover* for *Life* under this *Policy* will only be provided for an *Eligible Person* who is:

- at least fifteen (15) years of age; and
- less than seventy (70) years of age; and
- not *Employed* in a *Hazardous Occupation*.

Unless *We* agree otherwise, an increase in *Insurance Cover* for *Life* under this *Policy* will only be considered for an *Eligible Person* who:

- is at least fifteen (15) years of age; and
- less than sixty five (65) years of age; and
- not *Employed* in a *Hazardous Occupation*.

b. for *Total and Permanent Disablement* cover

Unless *We* agree otherwise, *Insurance Cover* or an increase in *Insurance Cover* for *TPD* under this *Policy* will only be provided for an *Eligible Person* who is:

- at least fifteen (15) years of age; and
- less than sixty five (65) years of age; and
- not *Employed* in a *Hazardous Occupation*.

2.1.2 Total and Permanent Disablement eligibility criteria

The *TPD* definition that will apply at the time of claim will depend on *Your* occupation at the time of *Your* claim. The eligibility criteria for each of the definitions are as follows:

a. for *Total and Permanent Disablement (occupational for any occupation)*

This definition applies to an *Eligible Person* who has been awarded *TPD* cover and meets the following criteria:

- not employed in a *Hazardous Occupation*; and
- *Employed* and working for at least an average of fifteen (15) hours per week for the three (3) consecutive months prior to, up to and including the *Date of Disablement*; and
- Is not in a *Restricted TPD Category* three (3) consecutive months prior to, up to and including the *Date of Disablement*; and
- less than sixty five (65) years of age at the *Date of Disablement*.

b. for *Total and Permanent Disablement (Activities of Daily Living, Significant Cognitive Impairment or Specific Loss)*

This definition applies to an *Eligible Person* who has been awarded *TPD* cover and meets the following criteria:

- at least fifteen (15) years of age; and
- is less than seventy (70) years of age; and
- is not *Employed* in a *Hazardous Occupation*.

2.1.3 Insurance cover subject to underwriting

Any application by the *Eligible Person* to customise their *Insurance Cover* (please refer to Clause 2.3.2 *Customised Cover*), or reinstate *Insurance Cover* after cover has been cancelled, will be subject to *Underwriting*.

Persons who do not meet the *Eligibility Criteria* due to their employment in a *Hazardous Occupation* can apply for *Insurance Cover* if their occupation later changes. The *Eligibility Criteria* will be assessed at the date of the application and the application will be subject to *Underwriting*.

We will advise *You* and the *Eligible Person* of any *Insurance Cover* *We* accept or decline.

2.2 When does cover start?

For *Eligible Persons* who join the *Insured Fund* as an individual rather than through their employer, *Insurance Cover* will start under the *Policy* on the day *You* receive the first contribution to the *Insured Person's* superannuation account.

For *Eligible Persons* who join the *Insured Fund* as part of their employer's super plan, *Insurance Cover* will start under the *Policy* on the later of:

- the day the *Eligible Person* began working for their employer; or
- the day the *Eligible Person's* employer's super plan starts as

long as *You* receive contributions within one hundred and thirty (130) days of the *Eligible Person's* account in the *Insured Product* being opened. All *Insurance Cover* will be deemed never to have started if *You* do not receive contributions within one hundred and thirty (130) days.

For *Eligible Persons* who are applying for *Insurance Cover* due to a change in occupation, the *Insurance Cover* will start under the *Policy* on the day *We* accept their application.

For all *Eligible Persons*, *Insurance Cover* will only start when *We* receive the *Insured Person's* relevant *Personal Details*.

2.3 Insurance cover

Insurance Cover for *Life* and *TPD* is available under the *Policy*. The amount of cover can be:

- provided automatically under *Suncorp Lifestages* cover up to the maximums defined in 2.3.1; or
- nominated by the *Eligible Person* under *Customised Cover* up to a maximum of \$850,000.

2.3.1 Default Cover

Default Cover will be provided automatically when the Eligible Person joins the Insured Fund.

The amount of Life and TPD cover We provide automatically is dependent on the age of the Insured Person. The cover amount will be automatically adjusted by Us at each age band as per the Default Cover table below.

Default Cover	
Age current birthday	Automatic Life and TPD Insurance Cover
15-19	\$75,000
20-24	\$100,000
25-29	\$150,000
30-34	\$200,000
35-39	\$250,000
40-44	\$250,000
45-49	\$200,000
50-54	\$125,000
55-59	\$90,000
60-64	\$50,000
65-69*	\$25,000
70+	Nil

* Insurance Cover for TPD is only available to Insured Persons who have applied for TPD cover prior to age sixty five (65)

2.3.2 Customised cover

Eligible Persons can apply for any amount of Insurance Cover up to the maximum limit by:

- nominating their current Insurance Cover amount so it will not fluctuate or reduce as the Insured Person ages; or
- increasing the amount of their Insurance Cover.

Applications to customise cover are subject to Underwriting, and restrictions as explained in Clauses 2.3.4.

If the application to customise cover is accepted by Us, the Insured Person's cover will be called Customised Cover and the Insurance Cover amount will no longer change with the Insured Person's age. The Insured Persons Pre Existing Condition (PEC) Exclusion will no longer apply.

2.3.3 Reducing cover

The Insured Person can apply to reduce their Insurance Cover at any time. Reducing Your cover can alter the exclusions that apply. The changes to their cover and any applicable exclusions will be effective immediately. The exclusions that can apply to an Insured Person's Insurance Cover are detailed in clause 3.3.

Altering cover type between Default Cover and Customised Cover is subject to Underwriting, and restrictions as explained in Clause 2.3.4.

2.3.4 Restrictions in changing cover

The following restrictions apply to changing Insurance Cover under the Policy:

- Life and TPD cover cannot be increased if the Insured Person is aged sixty five (65) or over.

- TPD cover cannot be higher than the Life cover for an Insured Person.

2.4 Reinstatement of Insurance Cover

Eligible Persons can apply to reinstate their Insurance Cover if they have previously had Insurance Cover under the Policy that was cancelled for any reason.

The application will be subject to Underwriting. There are no restrictions on the number of times an Eligible Person can apply for Insurance Cover after cancellation, or the duration of time between cancellation and application for reinstatement. Insurance cover that is reinstated will be subject to the exclusions as outlined in clause 3.3

2.5 Going overseas

Subject to payment of insurance fees, We will continue to provide Insurance Cover for the Insured Person in any country subject to the following restrictions:

- If the Insured Person is not an Australian Resident, Insurance Cover under the Policy will cease on the date of their departure from Australia, unless the overseas trip is for three (3) months or less.
- If the Insured Person leaves Australia permanently, Insurance Cover under the Policy stops from the date they permanently leave Australia, regardless of their residency status.

2.6 If the insured person leaves their employer or goes on Approved Leave

For Life cover:

- Subject to Clause 2.1 and the continued payment of insurance fees, Insurance Cover will continue to be provided for the Insured Person if they leave their employer or go on Approved Leave.

For TPD cover:

- Subject to Clause 2.1 and the continued payment of insurance fees, Insurance Cover will continue to be provided for the Insured Person if they leave their employer or go on Approved Leave. If you are on Approved Leave, the definition of TPD will be that which applied on the date the Insured Person was last at work.

In the event of a TPD claim, other than whilst on Approved Leave, the TPD definition will be restricted to TPD (Specific Loss), TPD (Activities of Daily Living) or TPD (Significant cognitive impairment), where the Insured Person has not been Employed and working for at least an average of fifteen (15) hours per week for the three (3) consecutive months prior to, up to and including the Date of Disablement.

2.7 When cover ceases

An *Insured Person's Cover* will cease under this *Policy* upon the earliest of the following dates:

- The *Insured Person* reaches age seventy (70); or
- The *Insured Person* receives a payment for *TPD*; or
- The *Insured Person* receives a payment for *Terminal Illness*; or
- The *Insured Person* dies; or
- *Insurance Cover* for an *Insured Person* will cease because the insurance fee owing in respect of that *Insurance Cover* has not been received by *Us* within thirty (30) days of the *Due Date*; or
- The *Insured Person* changes to a *Hazardous Occupation*; or
- The *Insured Person* cancels their *Life* and *TPD* cover; or
- The *Insured Person* closes their Everyday Super account; or
- The *Insured Person* leaves Australia for more than three (3) months and they are not an *Australian Resident*; or
- The *Insured Person* moves overseas permanently; or
- The *Insured Person* is a *Non-Australian Resident* and their valid *Visa* expires: or
- The day before the *Insured Person* joins the armed forces of any country or international organisation (this does not include routine activities with the Reserve Forces of the Australian Army or the Royal Australian Air Force or the Royal Australian Navy, however, it does include deployment on active service as a permanent member of these Armed Services).

* The *Insured Person's Life* cover will be reduced by the amount of their *TPD* payment (which means if their *Life* cover is the same amount as their *TPD* cover, the *Life* cover will be cancelled) and the *TPD* payment will be made.

Section B - Terms and Conditions

Part 3 – Benefits

In **Part 3**, We set out details of the *Benefits of Insured Persons*, the limitations on those *Benefits* and the management of claims.

We will only pay a *Benefit* under this *Policy*:

- in accordance with these Terms and Conditions; and
- subject to *Our* right to require an *Insured Person* who submits a claim for *TPD* or a *Terminal Illness Benefit*, while overseas to return to Australia for assessment of the claim.

Insurance Cover other than *Default Cover* is subject to application, and *Our* written acceptance of any *Insurance Cover* subject to *Underwriting* and any applicable *Benefit* limitations.

3.1 Life cover

We will provide a lump sum payment if the *Insured Person* dies while their *Insurance Cover* is active.

The payment will be the amount of *Life* cover that the *Insured Person* has at the time of death.

Where a *Benefit* is payable in the event of the death of the *Insured Person*, the *Insurance Cover* for *TPD* for the *Insured Person* will cease.

3.1.1 Terminal Illness benefit

We will make an early payment of the *Life* cover *Benefit* if the *Insured Person* becomes *Terminally Ill*.

The *Terminal Illness Benefit* is an early payment of the *Life* cover *Benefit* and the payment will be the amount of *Life* cover the *Insured Person* has at the time they became *Terminally Ill*.

Where a *Benefit* is payable for *Terminal Illness*, the *Insurance Cover* for *TPD* will cease.

3.2 TPD cover

We will provide a lump sum payment if as a result of *Illness and Injury*, the *Insured Person* becomes *Totally and Permanently Disabled*.

The definition of *Totally and Permanently Disabled* that We apply to the *TPD* cover at claim will be based on the *TPD* eligibility criteria as set out in 2.1.2.

The payment will be the amount of *TPD* cover the *Insured Person* has at the *Date of Disablement*.

In the event of a *TPD* cover payment, the *Insured Person's Life* cover will be reduced by the amount of the payment and the *TPD* cover will be cancelled.

3.3 When we won't pay

In the event of claim, a *Benefit* will not be paid if the event that is causing the claim is directly or indirectly related to one of the following exclusions:

i. *Pre Existing Condition* (PEC) Exclusion

This exclusion applies only to *Suncorp Lifestages Insurance Cover*. However, the exclusion will not apply if an *Insured Person* returns to *Suncorp Lifestages Insurance Cover* after having *Customised Cover* or where an *Insured Person's Suncorp Lifestages Insurance Cover* is reinstated in accordance with clause 2.4.

A *Benefit* will not be paid if the event that is causing the claim is directly or indirectly related to a *Pre Existing Condition* (PEC).

ii. Self Inflicted Act Exclusion

A *Benefit* will not be paid if the event that is causing the claim:

1. is directly or indirectly related to an *Intentional Self- Inflicted Act*; and
2. occurs within the first thirteen (13) months of:
 - a. the date *Suncorp Lifestages Insurance Cover* commences for the *Insured Person*; or
 - b. the date an increase in *Your* insurance cover is applied for under 2.3.2 and We advise that it has been accepted. For clarity, this exclusion will only apply for the increased amount.
 - c. the date We advise that cover has been reinstated under clause 2.4.

iii. *Hazardous Pursuits* Exclusion

This exclusion applies only to *Customised Cover*. For the avoidance of doubt, this exclusion does not apply to any reinstatement of cover where the amount of *Insurance Cover* after reinstatement is the *Default Cover*.

For such cover, a *Benefit* will not be paid if the event that is causing the claim is directly or indirectly related to *Hazardous Pursuits*.

3.4 Misstatement of age and/or, occupation

If the age or, occupation of an *Insured Person* has been misstated, the *Benefit* in respect of that *Insured Person* will be re-calculated to reflect the *Benefit* that the insurance fee paid would have purchased if it had been calculated using the correct age and/or occupation.

If the recalculated *Benefit*:

- is less than the *Benefit* which applied before the re-calculation, the *Benefit* will be reduced; or
- if the recalculated *Benefit* is greater than the *Benefit* which applied before the re-calculation, the *Benefit* will remain the same, but any overpaid insurance fees due to a misstatement of age or occupation will be refunded; or
- if when the *Benefit* is recalculated due to a misstatement of occupation and the *Insured Person* was not eligible for any *Benefit* under this policy due to being *Employed* in a *Hazardous Occupation*, the *Benefit* will be calculated as zero (0) and any overpaid insurance fees will be refunded. The refund will only be effective from the date the *Insured Person* notifies us that they are working in a *Hazardous Occupation*.

3.5 Claims

3.5.1 Payment of a claim

Payment of a claim will be made subject to *Us* admitting liability, satisfaction of *Our* claim requirements and adherence to relevant legislative requirements. *Benefit* payments will be made to *You* in respect of the *Insured Person*.

3.5.2 Claim notification

You must notify *Us* in writing of a claim or a potential claim as soon as is reasonably practicable. In respect of a *TPD* claim, this should be no later than twelve (12) months from the *Date of Disablement* as applicable. If *Our* interests are prejudiced due to delay in notification of a claim or potential claim, *We* may reduce the *Benefit* or not pay the claim.

3.5.3 Our requirements

It is a condition of payment of any *Benefit* that *You* and the *Insured Person* (or the *Insured Person's* Legal Personal Representative or beneficiary), provide *Us* with such evidence to substantiate the claim as *We* may reasonably require. This may include a medical report provided by a *Medical Practitioner*, the cost of which must be paid by *You*, or the *Insured Person*. Satisfactory proof of age will be required prior to any *Benefit* payment.

In respect of a *TPD Benefit*, the *Insured Person* may be required to submit to a medical examination(s) conducted by the *Medical Practitioner(s)* appointed by *Us* at *Our* expense (other than medical costs incurred overseas). If the *Insured Person* fails to attend any pre-arranged medical consultations, the *Insured Person* may be liable to pay any fees incurred as a result.

In respect of a *Terminal Illness Benefit*, the *Insured Person* must, at their own expense, provide *Us* with medical information from a specialist *Medical Practitioner* in support of their claim. In addition, *We* may require an opinion from one of *Our* approved specialist *Medical Practitioners* which *We* will do at *Our* expense.

Any costs associated with the provision of evidence initiated by the *Insured Person* or some other person in the course of a claim assessment or dispute of an assessment will be payable by the *Insured Person* or that other person.

Where *We* have agreed to provide *Insurance Cover* for an *Eligible Person* who is:

- temporarily *Employed* overseas; or
- travelling overseas during paid leave or on *Approved Leave*, and

the *Insured Person* makes a claim for *TPD* or a *Terminal Illness Benefit*, *We* may require the *Insured Person* to return to Australia for medical assessment. Medical costs incurred overseas, as well as any costs incurred in returning to Australia, will be at the expense of the *Insured Person*.

3.5.4 Insurance fees paid if a Benefit has been paid.

Any insurance fees received for *Insurance Cover* after the date of death or *Date of Disablement* (as applicable) will be refunded.

Section B - Terms and Conditions

Part 4– Insurance fees

In **Part 4**, We set out details of what the *Insurance Cover* will cost and how insurance fees will be paid.

4.1 What will the insurance cover cost?

The insurance fee in respect of each *Insured Person* is calculated from a number of factors including the *Insured Person's*:

- current age, and
- gender, and
- *Occupation Category*, and
- type of *Insurance Cover*, and
- amount of *Insurance Cover*.

The same insurance fee calculation applies for *Suncorp Lifestages* and *Customised Cover*.

4.2 When will insurance fees be calculated and paid?

4.2.1 When will insurance fees be paid?

Insurance fees are payable directly to *Us* in full and shall be calculated for each *Insured Person* from their *Commencement Date*.

4.2.2 Payment period

Insurance fees are payable on a monthly basis and are deducted from an *Insured Person's* superannuation account balance. Insurance fees are payable in arrears.

Insurance fees are payable directly to *Us* in full and shall be calculated for each *Insured Person* at the end of each month up to and including the last day of the same month.

Adjustment insurance fees will apply each payment period as follows:

- Where the *Commencement Date* for a new *Insured Person* precedes the first day of the payment period in which the first insurance fee is determined for the new *Insured Person*, an additional insurance fee amount will be determined for the period from the new *Insured Person's Commencement Date* up to and including the last day of the previous payment period; and
- Where the cover for an *Insured Person* ceased prior to the start of the payment period, an insurance fee refund amount will be determined for the period from the day after cover ceased for the *Insured Person* up to and including the last day of the previous payment period.

Adjustments will be prorated against the monthly insurance fee due in arrears and the adjusted amount will be debited or credited accordingly.

4.2.3 Review of cover and insurance fee

We will review the insurance fee and *Insurance Cover* for each *Insured Person* each time *Personal Details* change.

If the *Insured Person* has *Suncorp Lifestages* cover, We will update the amount of their *Life* and *TPD* cover and insurance fees, effective on their birthday. For example, if the *Insured Person* was born on May 6 in any particular year, when they move from one *Default Cover* insurance band to the next, changes to their *Insurance Cover* and insurance fees will be effective on the same date.

For *Insured Persons* for whom *Suncorp Lifestages* cover has been fixed below the level of *Default Cover*, *Insurance Cover* will only change as described in clause 2.3.3.

If the *Insured Person* has *Customised Cover*, We will only update their insurance fees when they move into the next *Insurance Fee Rates* age band.

4.2.4 Policy termination date

Insurance fees are payable directly to *Us* in full up to and including the *Policy Termination Date* (or such earlier *Insurance Cover Cessation Date* for an *Insured Person*).

4.3 Rates guarantee and variation of rates

We can vary the *Insurance Fee Rates* by giving *You* at least three (3) months written notice.

4.4 Government taxes and charges

We will pass onto *You* any government taxes and charges (such as stamp duty) which We incur in relation to the *Policy* and which are not included in the insurance fee rates.

4.5 Variation of insurance fee due to changes in government charges

We reserve the right to increase *Insurance Fee Rates* under this *Policy* in respect of any or all *Insured Persons* in the event of any change in the past, existing or future Government charges relating to this *Policy*. Any such increases shall apply from the date of commencement of the change in the Government charges, even if such date is before the date of the written notification to *You*.

4.6 Variation of insurance fees due to war

We reserve the right to increase *Insurance Fee Rates* under the *Policy* in respect of any or all *Insured Persons* upon written notification to *You* in the event of any *War* that involves Australia, New Zealand, or the country of residence of any *Insured Person*. Any such increase in insurance fees will be effective sixty (60) days from the date of *Our* written notice to *You*.

Should that right be exercised and *You* fail to pay the required increase in insurance fee, We reserve the right to reduce the *Benefit* to reflect the *Benefit* that would have been payable if the insurance fee adjustment due to *War* had not been paid.

4.7 Unpaid insurance fees

If an *Insured Person* does not have sufficient funds in their superannuation account balance to pay insurance fees as they fall due, *You* undertake to notify the *Insured Person* within thirty (30) days. The *Insured Person* will then have thirty (30) days from the date of *Your* letter to contribute an amount sufficient to pay the outstanding insurance fee and an additional one month's insurance fee. If these insurance fees remain outstanding at the end of the thirty (30) day period, cover for the *Insured Person* will cease.

If insurance fees are not paid within thirty (30) days of the date they are collected, We will provide *You* with thirty (30) days written notice that We will terminate the *Policy* if the insurance fees continue to remain unpaid.

Section B - Terms and Conditions

Part 5 – Definitions

Approved Leave means the *Insured Person* is on unpaid leave (for up to 12 months) with approval from their employer, including whilst on a career break or maternity leave, with the intention to return to work with the same employer on a set date in the future.

Australian Resident means a citizen or permanent resident of Australia or a citizen of New Zealand living in Australia.

Benefit means *Life* and/or *TPD* cover, whichever is applicable to the *Insured Person's Insurance Cover*.

Commencement Date means the date an *Insured Person's Insurance Cover* (or, when the context requires, increase in *Insurance Cover*) commences in accordance with the Terms and Conditions of this *Policy*.

Customised Cover means the *Life* and *TPD* (if applicable) cover provided to an *Eligible Person* when they apply to customise their *Insurance Cover* and We accept the nominated level of *Insurance Cover*.

Date of Disablement means the date from which a *Medical Practitioner* certifies that the *Insured Person* is no longer able to work and they are *Totally and Permanently Disabled*.

Default Cover means the *Life* and *TPD Insurance Cover* automatically provided to an *Eligible Person* when they join the *Insured Fund*. The amount of *Life* and *TPD Insurance Cover* is dependent on the age of the *Insured Person* and will be automatically adjusted at each age band as per below.

Default Cover	
Age current birthday	Automatic Life and TPD Insurance Cover
15-19	\$75,000
20-24	\$100,000
25-29	\$150,000
30-34	\$200,000
35-39	\$250,000
40-44	\$250,000
45-49	\$200,000
50- 54	\$125,000
55- 59	\$90,000
60- 64	\$50,000
65-69*	\$25,000
70+	Nil

* *Insurance Cover* for *TPD* is only available to *Insured Persons* who have applied for *TPD* cover prior to age sixty five (65)

Due Date means the date a letter is generated by the Trustee when the *Insured Persons* account balance does not contain sufficient funds to pay the insurance fee owing.

Eligible Person is a person who satisfies the conditions specified in Clause 2.1 and 2.1.1.

Eligibility Criteria means conditions for eligibility for *Insurance Cover* specified in Clause 2.1 and 2.1.1.

Employed means the *Insured Person* is working in an occupation in which they are:

- an employee, working for salary, wages or commission;
- or

- self-employed, working in a business or professional practice in a way that is capable of generating income for the business or professional practice.

Endorsement is any written amendment to these Terms and Conditions agreed between *You* and *Us* and issued to *You* by *Us*.

Hazardous Occupation means workers involved in hazardous or very heavy manual work and/or who present special underwriting difficulties, e.g. underground miner, deep-sea abalone diver or if the *Insured Person* works with explosives.

Includes but are not limited to occupations in the following industries and roles, or which involve the following duties:

Industries

- Aviation – flying personnel other than those working for a licensed commercial airliner
- Entertainment – circus or stunt person
- Fishing – persons working off shore
- Mining – underground workers
- Oil & Gas – off shore workers
- Security – armed
- Horse Racing – Jockey

Roles

- Bomb disposal, fireworks or explosive handlers
- Forester
- Fireman
- Police
- Prisoners
- Professional sports person

Duties

- Working with asbestos
- Working at heights over 10 meters
- Demolition/building wrecking
- Diving

Hazardous Pursuits means the participation in or preparation for or practice of selected hazardous pursuits, including:

- motor racing over land or water, or
- scuba diving (below 40 metres, pot-holing, caving, in or around wrecks), or
- aviation (other than as a fare paying passenger on a licensed public service), or
- Mountaineering and/or rock climbing, parachuting or skydiving.

Illness means a sickness or disease suffered by the *Insured Person*, while the *Insurance Cover* is active.

Injury means physical damage to the body caused solely and directly by violent accidental, external and visible means and which is not an *Illness* while the *Insurance Cover* is active.

Insurance Fee Rates means the *Insurance Fee Rates* specified in the Suncorp Everyday Super Product Guide.

Insurance Cover means the *Benefits We* have agreed to provide in accordance with these Terms and Conditions.

Insured Fund means Suncorp Master Trust.

Insured Product means Suncorp Everyday Super.

Insured Person means any *Eligible Person(s)* for whom *Insurance Cover* is to be provided under the *Policy*.

Life means the amount of *Insurance Cover* payable in respect of an *Insured Person* in the event of their death or *Terminal Illness*.

Medical Practitioner means a medical practitioner who is legally qualified and registered to the equivalent Australian standards (and includes an appropriate specialist) who is not employed by *You*, and is not the *Insured Person*, their spouse, relative or a business associate.

Nominated Heavy Blue Collar Worker means an Everyday Super account holder who is in an *Occupation category excluding Hazardous Occupations* considered to be *Heavy Blue Collar* by *Us*, and rated by *Us* accordingly for *Underwriting* purposes as notified to *You*.

Non-Australian Resident means a person residing in Australia and holding a supporting *Visa* and who is not an *Australian Resident*.

Occupation Category excluding Hazardous Occupations means for an *Insured Person*, the occupation category which applies to them using the following rule

Professional / White collar

Workers where the work is of wholly a sedentary nature, in an office environment and does not involve manual work or supervision of manual workers. It also includes some indoor occupations which require tertiary qualifications and involve light physical work, e.g. osteopath, acupuncturist.

Grey / Skilled Blue Collar

Includes most customer facing occupations, e.g. salespersons, shopkeepers and occupations which involve light manual work in non-hazardous industries, e.g. jewellers, computer technicians, café/coffee shop proprietors etc. Also includes supervisors of blue collar workers and fully qualified tradespeople in non-hazardous industries.

Heavy Blue Collar

Includes occupations involved in heavy manual work performed by semi-skilled or unskilled workers. It also includes light manual work performed by semi-skilled workers.

Includes, but is not limited to, *Nominated Heavy Blue Collar Workers*.

Personal Details means title, last name, given name, residential address, employment commencement date, date of birth, gender, and occupation.

Policy means this *Policy*, its schedules and includes any *Endorsements* or any other written agreement issued by *Us* to *You* from time to time.

Policy Commencement Date means 1 December 2012.

Policy Owner means Suncorp Portfolio Services Limited ABN 61 063 427 958, in its capacity as trustee of Suncorp Master Trust ABN 98 350 952 022, RSE Fund Registration No. R1056655.

Policy Termination Date means the date *You* or *We* terminate the *Policy*.

Pre-Existing Condition (PEC) means any *Injury*, sickness, *Illness* or symptom that existed in the (2) years prior to or at the time the *Insured Person's Suncorp Lifestages Insurance Cover* commenced and that the *Insured Person*:

- was aware of, or a reasonable person in their position should have been aware of; or
- should have sought advice or treatment (conventional or alternative) from a *Medical Practitioner* or other health professional for (in circumstances where a reasonable person in their position would have sought advice or treatment); or
- Had a medical consultation for or were prescribed medication or therapy for.

Restricted TPD Category means the *Insured Person* falls into one of the following categories:

- House worker; or
- *Nominated Heavy Blue Collar Worker*; or
- *Unemployed* person; or
- Has been on leave without pay from their employer for more than twelve (12) months.

Self-Inflicted Act means an intentional *injury* or *Illness* inflicted by the *Insured Person* on themselves.

Suncorp Lifestages Insurance Cover means the *Insurance Cover* provided to an *Eligible Person* that is *Default Cover* or the *Insurance Cover* we agree to provide to an *Insured Person* after *Underwriting*, when they apply to move from *Customised Cover* to *Suncorp Lifestages Insurance Cover*.

Terminal Illness and Terminally Ill means two *Medical Practitioners* have certified, jointly or separately, that the *Insured Person's life expectancy* is, due to *Illness* or *Injury*, likely to result in their death within 12 months of the date of the certification, and:

- at least one of the *Medical Practitioners* is a specialist in an area related to the *Illness* or *Injury*; and
- the period of certification for each of the certificates has not ended.

Total and Permanent Disablement, Totally and Permanently Disabled and TPD means one of the following (depending on the *Insured Person's* situation at the time of claim):

Definition A:
TPD (Occupational for any occupation)

Definition B:
TPD (Specific loss)

Definition C:
TPD (Activities of daily living)

Definition D:
TPD (Significant cognitive impairment)

A. *TPD* (Occupational for any occupation)

This definition only applies if the *Insured Person* was:

1. *Employed* and working for at least an average of fifteen (15)

hours per week for the three (3) consecutive months prior to, up to and including the *Date of Disablement*; and

2. Not in a *Restricted TPD Category* for the three (3) consecutive months prior to, up to and including the *Date of Disablement*; and
3. Less than sixty (65) years of age at the *Date of Disablement*.

As a result of *Illness or Injury*, the *Insured Person* has been absent from and totally unable to engage in gainful employment for a period of six (6) consecutive months from the *Date of Disablement*; and in *Our* opinion, after consideration of medical and other evidence, *We* consider the *Insured Person* unlikely to be able to ever engage in any *Occupation* for which they are reasonably suited by education, training or experience.

B. *TPD* (Specific loss)

This definition applies if the *Insured Person* suffers total and permanent loss of use of:

1. Two limbs; or
2. Sight of both eyes; or
3. One limb and sight of one eye.

Where 'limb' is defined as whole hand or whole foot, and 'loss of sight' is defined as:

1. Visual acuity less than 6/60 in both eyes after correction; or
2. A field of vision constricted to 20 degrees or less of arc; or
3. A combination of visual defects resulting in the same degree of visual impairment as that occurring in either of the above.

Or

C. *TPD* (Activities of daily living)

In *Our* opinion, after consideration of medical and other evidence, the *Insured Person* is constantly and permanently unable to perform at least two (2) of the activities of daily living without the physical assistance of another person (if the *Insured Person* is able to perform that activity on their own by using special equipment *We* will consider them being able to perform that activity).

The activities of daily living are:

1. Bathing and showering; or
2. Dressing and undressing; or
3. Eating and drinking; or
4. Maintaining continence with a reasonable level of personal hygiene; or
5. Getting in and out of bed, a chair or wheelchair, or moving from place to place by walking, wheelchair or walking aids.

Or

D. *TPD* (Significant cognitive impairment)

In *Our* opinion, after consideration of medical and other evidence, the *Insured Person* suffers permanent deterioration or loss of intellectual capacity that requires the *Insured Person* to be under continual care and supervision by someone else.

In addition to satisfying one of the above definitions a. Total and Permanent Disablement (Occupational), b. Total and Permanent Disablement (Specific Loss), c. Total and Permanent Disablement (Activities of daily living), or d. Total and Permanent Disablement (significant cognitive Impairment) (whichever applies), *We* must have also determined that after consideration of medical and any other evidence, *We* are reasonably satisfied that the *Insured Person's* ill health (whether physical or mental) makes it unlikely that they will engage in gainful employment for which they are reasonably qualified by education, training or experience.

Underwriting means the assessment conducted by *Us* of any person applying for Insurance Cover prior to *Our* acceptance of the risk

Unemployed means the *Insured Person* is not:

- in regular employment for salary, wages or commission; or
- self-employed, working in a business or professional practice in a way that is capable of generating income for the business or professional practice.

If the *Insured Person* is on approved maternity, paternity or sabbatical leave, this is not considered unemployment.

Visa means a current and valid *Visa* issued in accordance with the Migration Act 1958 (Cth) or any amending or replacing Act. It can be a:

- Subclass 457 working *Visa*; or
- Subclass 457 working *Visa* (with a 8107 condition); or
- Spouse *Visa* (spouse of a permanent *Australian Resident* on a two year temporary stay *Visa*) without a 'no work' condition.

War means any act of war (whether declared or not), revolution, invasion, rebellion or participation in an action to defend a country or region from civil disturbance or insurrection, or in an effort to maintain peace in a country or region.

We, Our, Us means Suncorp Life & Superannuation Limited (SLSL) ABN: 87 073 979 530 AFSL No.229880, whose principal office is at:

Level 28, Brisbane Square,
266 George Street,
Brisbane QLD 4000

and includes any of *Our* properly appointed delegates.

You, Your means the *Policy Owner*.

Executed as an Agreement

EXECUTED on behalf of **Suncorp Life & Superannuation Limited**)
ABN 87 073 979 530 by its duly authorised officer)

Signature of authorised officer

Name of authorised officer

Date

EXECUTED on behalf of **Suncorp Portfolio Services Limited**)
ABN 61 063 427 958 in accordance with section 127(1) of the)
Corporations Act 2001 (Cth) by authority of its directors:)

Signature of director

Name of director

Date

Signature of director

Name of director

Date

to contact us



Suncorp Everyday Super
GPO Box 2585
Brisbane QLD 4001



1800 191 517 between 8am and 6pm



1300 172 693



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