

Pay-by-the-month insurance

Application form



Pay-by-the-month insurance

Select your payment method

With GIO pay-by-the-month you can smooth out your business' cash flow by paying over 12 months, direct through your bank, building society or credit union account or credit card.

Instead of budgeting separately for your insurance, we can now provide you with a simple monthly payment plan for one or all of your business insurance policies.

Of course, you can still pay your premiums annually.

How monthly payments work

Your policy is an annual contract that will be paid by monthly instalments from your nominated account. Your first payment will be charged to your account approximately 2 days after you have authorised payment. Two payments may be charged in the first month depending on your payment date. Subsequent payments will be charged on the same payment date each month.

A fee of \$2.75 (including GST) per month per policy applies to monthly instalments. No discounts apply to this fee.

Annual renewal process

You will be sent a renewal notice prior to the expiry date of your policy. At that time, you do not have to do anything. Your policy will automatically renew for another 12 months and monthly instalments will continue to be debited from your nominated account as agreed. Any increases or changes to your monthly instalment will be shown on your renewal notice. If you need to make changes to your pay-by-the-month arrangements with GIO at renewal time, please contact us.

Important information

Paying by monthly instalments will affect you in a number of important ways.

If an instalment remains unpaid for a period of at least 14 days we may refuse to pay a claim.

If an instalment remains unpaid for a period of at least one month we may cancel your policy.

If you become entitled to be paid the total sum insured in respect of a claim, we will deduct any remaining instalments from the claim settlement so that your annual premium is paid in full.

Your Financial Institution may charge a fee if there are insufficient funds in your account to cover any debits or may apply other terms and conditions to your nominated account. If further information is required, please contact your Financial Institution.

Your record of account details

Name of account

Type of account

BSB number

Account number

Complete the direct debit request or credit card authority and mail or fax to:

Reply Paid 1387
Commercial Insurance Sales Support
GPO Box 1387
Melbourne Vic 8060

Fax: 1300 558 823

Direct debit request or credit card authority

Complete this section **and** option 1 **or** option 2 if you would like to have monthly premiums automatically debited from your Financial Institution (Bank, Building Society, Credit Union or credit card account).

Name	<input type="text"/>	Phone No.	<input type="text"/>
Mailing address	<input type="text"/>		
Suburb	<input type="text"/>	State	<input type="text"/>
		Postcode	<input type="text"/>
Policy No.(s)	<input type="text"/>	<input type="text"/>	<input type="text"/>
I/We have read and understood all of the conditions set out in this leaflet and agree that these conditions form part of my policy(ies).			
Signature(s)	<input type="text"/>	<input type="text"/>	Date <input type="text"/>

Option 1 – Bank, Building Society or Credit Union direct debit request

Name of Financial Institution where your account is held	<input type="text"/>	Address of Financial Institution where your account is held	<input type="text"/>
Account holder's name	<input type="text"/>		
BSB Number	<input type="text"/> <input type="text"/> <input type="text"/> — <input type="text"/> <input type="text"/> <input type="text"/>	Account number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
I/We Surname(s) (or company name)	<input type="text"/>		
Given name(s) (or ACN/ABN)	<input type="text"/>		

I/We authorise and request GIO (User ID Number 045105) to debit my/our account (details provided above) through the Bulk Electronic Clearing System* with any payments that may from time to time become payable for my/our insurance contract. I/We understand and acknowledge that this Direct Debit arrangement operates under the terms of the Bulk Electronic Clearing System and the Direct Debit Service Agreement provided by GIO.

Customer signature	<input type="text"/>	If joint account all signatures may be required	<input type="text"/>	Date	<input type="text"/>
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*Further information on the Bulk Electronic Clearing System can be obtained from the Australian Payments Clearing Association.

Option 2 – Credit card direct debit authority

Visa	<input type="checkbox"/>	MasterCard	<input type="checkbox"/>	American Express	<input type="checkbox"/>
Account number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Expiry date (month/year)	<input type="text"/>	<input type="text"/>	
Cardholder's name(s)	<input type="text"/>				

I/We authorise and request GIO (User ID Number 045105) to debit my/our credit card (details provided above) with any payments that may from time to time become payable for my/our insurance contract.

Signature(s)	<input type="text"/>
	<input type="text"/>
Date	<input type="text"/>



Direct debit request service agreement

You have requested that AAI Limited ABN 48 005 297 807 trading as GIO (User ID Number 045105) (we/us) debit, through the Bulk Electronic Clearing System (BECS), amounts that may from time to time become due in respect of your business insurance policy/policies from the account nominated in your Direct Debit Request.

We advise you:

- (a) that direct debiting through BECS may not be available on all accounts and additional charges may be applied by your Financial Institution for direct debits;
- (b) to confirm the account details by checking a recent statement from your Financial Institution; and
- (c) that your request must be signed in the same way as the account signing instruction held by your Financial Institution.

If you are uncertain about any of these items please check with your Financial Institution before completing your Direct Debit Request.

You are responsible for ensuring that the account you nominated has sufficient cleared funds available to pay each debit when it becomes due. You must tell us if you close or change the account you nominated.

Where the due date falls on a non-business day in Sydney and Melbourne we will draw the amount on the next business day. If you are uncertain as to when the debit will be processed to your account you should contact your Financial Institution directly.

You may cancel your Direct Debit Request, stop or defer an individual debit or request a change to the debit amount by contacting your GIO Business Insurance Specialist. Alternatively, you may request a stop or cancellation by contacting your Financial Institution. An alternative form of payment may be required. We must receive your notification at least 10 business days prior to the next due date to process your request in time.

If you believe that a debit has not been correctly processed you should contact your GIO Business Insurance Specialist or contact us on 13 10 10 immediately. Alternatively, you may dispute a Direct Debit Request transaction by contacting your Financial Institution.

If debits are returned unpaid by your Financial Institution we will either attempt to debit from your nominated account again or we will contact you to arrange another way of paying. If an instalment of the premium remains unpaid for a period of at least one month we may cancel your unpaid policy/policies. If an instalment of the premium remains unpaid for a period of at least 14 days we may refuse to pay a claim. We reserve the right to cancel the direct debit arrangement if one or more debits are returned unpaid by your Financial Institution.

We will keep all information relating to your account private and confidential. You consent to us using or releasing your account information to investigate any claim for possible incorrect debits.

If the Insured has been fully indemnified for any insured property, the premium for the full period of insurance for that property remains payable, subject to the Insured's rights of cancellation under the terms of the policy.

You fully indemnify us against any losses, costs, damages and liability that we suffer as a result of you giving us incorrect or false information in your Direct Debit Request. Your indemnity continues after this Agreement is ended.

These arrangements are subject to change. We will provide 14 days notice of any changes.