GIO LIFE PROTECT

LIFESTYLE INCREASE BENEFIT APPLICATION FORM

This Lifestyle Increase Benefit application form allows you, as the policy owner, to increase the sum insured of your GIO Life Protect policy by \$100,000 without providing any medical information. You can apply for an increase if you are under the age of 60 and:

- this is your 2nd policy anniversary; or
- one of the following lifestyle events occurred between your current policy anniversary and your last policy anniversary.

Lifestyle events are:

- you married
- you or your partner gave birth to or adopted a child
- you purchased a home
- your spouse passed away
- your child started high school for the first time

Your application must be made within 30 days of your policy anniversary immediately following the lifestyle event and will be offered on the same terms as your original insurance with us.

To increase your GIO Life Protect sum insured by \$100,000 under the Lifestyle Increase Benefit, please complete the following.

Policy owner details

Policy number

Title	Surname		
Given name(s)			
Address			
Suburb		State	Postcode

About this application

The duty to take reasonable care

When applying for insurance, there is a legal duty to take reasonable care not to make a misrepresentation to the insurer before the contract of insurance is entered into.

A misrepresentation is a false answer, an answer that is only partially true, or an answer which does not fairly reflect the truth.

This duty also applies when extending or making changes to existing insurance.

If the duty is not met

If the duty is not met, this can have serious impacts on your insurance. Your cover could be avoided (treated as if it never existed), or its terms may be changed. This may also result in a claim being declined or a benefit being reduced.

Please note that there may be circumstances where the insurer later investigates whether the information given to them was true. For example, they may do this when a claim is made.



Your lifestyle event

Please indicate which event has occurred:

☐ My second policy ann	iversary
I married	
Date of marriage	Spouse's full name
/ /	
My partner or I gave b	irth to or adopted a child
Child's date of birth	/ / / If adopted- the date of adoption / / / school for the first time
High school that this child	l is attending
Date that this child comm I purchased a home Property settlement date	
Address of purchased pro	,perty
Suburb	State Postcode
My spouse passed aw Full name of deceased sp	
Date of birth of deceased	
once we accept your app	ication, we will confirm your increased sum insured in writing and we will advise you of your new premium.

Please note:

- You can only increase your sum insured using this benefit up to the value of your original sum insured. For example, if your original sum insured was \$400,000, you can increase your sum insured using the Lifestyle Increase Benefit by an additional \$400,000 over the life of your policy.
- The maximum we will pay across all Life Protect policies issued by us for the same insured person is \$1,000,000 (plus indexation). This means that if your current sum insured is \$1,000,000 or more, you have reached the maximum sum insured and any application for increase will not be accepted.
- If your application is accepted, your policy will be treated as if it were a consumer insurance contract to the extent of the variation.

Declaration

I have understood all the questions in this form and declare that the statements made in this Statement are true and complete and agree that they shall form part of the application for insurance and shall be relied upon by TAL Life Limited in deciding whether to issue a policy including the premiums and terms to offer.

To the extent that if the answers are not in my own handwriting they have been checked by me and I certify that they are correct to the best of my knowledge.

I understand there is a duty to take reasonable care not to make a misrepresentation to the insurer before entering into a contract of insurance, extending or making changes to existing insurance, and reinstating insurance. I also understand that if this duty is not met it can have serious impacts on my insurance.

l understand:

- the information requested is required to enable the insurer to assess my entitlement for the Lifestyle Increase Benefit under my policy;
- that if I do not give the information requested in this form, my increase may not be accepted;
- that in the event of a claim being made, further evidence of my lifestyle event may be required;
- that the increase will not become effective until my application is accepted by the insurer in writing.

Your signature

Print full name	Date		
		/	/