

AAMI LIFE INSURANCE Product Disclosure Statement



This Product Disclosure Statement (PDS) is issued by Asteron Life & Superannuation Limited ABN 87 073 979 530, AFSL 229880 (Asteron), Asteron is part of the TAL Darichi Life Australia Pty Limited ABN 97 150 070 483 group of companies (TAL). Asteron is authorised to use the AAMI brand. Prepared on: 1 March 2019

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1. Important information

Your AAMI Product Disclosure Statement

This Product Disclosure Statement (PDS) is designed to help you decide whether to buy or continue to hold this Asteron Life & Superannuation Limited ABN 87 073 979 530, AFSL 229880 ("Asteron", "we", "our" or "us") product. This PDS provides important information about the purpose of our product, the key features and benefits available, and the costs, risks and other important aspects of our product. The information contained in this document is general in nature and does not take into account your personal objectives, financial situation or needs. Therefore, before acting on this information, you should consider the appropriateness of our product having regard to those matters and carefully read this PDS before making a decision about our product.

Asteron is related to TAL Life Limited ABN 70 050 109 450, AFSL 237848 (TAL Life) and to the distributor TAL Direct Pty Limited ABN 39 084 666 017, AFSL 243260 (TAL Direct). Asteron, TAL Life and TAL Direct are part of the TAL Dai-ichi Life Australia Pty Limited ABN 97 150 070 483 group of companies (TAL).

Asteron is the issuer of this PDS and has been authorised to issue this PDS under the AAMI brand. AAI Limited ABN 48 005 297 807 a Suncorp Group company, trading as AAMI, is not responsible for this PDS. Asteron takes full responsibility for the whole of this PDS.

Our commitment to you

When you are an AAMI Life Insurance policy owner and you, your nominated beneficiary/ies or legal personal representative need to claim on your policy, our claim team can be contacted by calling 13 22 44 in between 8.30 and 5.30 AEST. A claims pack will be sent out detailing what information is required by us to assess the claim.

Please read this PDS carefully and retain it so you can refer to it if required.

We rely on the accuracy of your information we receive

When we agree to insure you, to renew or vary your policy, or to pay your claim, our decision relies on the accuracy of the information you give us. If that information is not accurate, we can reduce or deny any claim you make or avoid the policy. We never want to have to do that, so you must honestly, correctly and completely answer the questions we ask about:

you;

your health; and

your occupation and pastimes.

Please refer Section 13 Your Duty of Disclosure for more information.

When you receive your schedule, please check carefully the information it shows. If any of that information is incorrect or incomplete, please call us and we will update our records.

We also require you to . . .

observe the conditions contained in your AAMI Life Insurance policy; and

pay or agree to pay us the premium we charge and any loadings that may apply.

Some words in this PDS have definite meanings

This PDS uses words that have definite meanings. To make sure you are aware of these words and their meanings, please read Section 14 What do we mean by that?

Before you buy this insurance, please read this PDS carefully.

See also Section 11 Important general information for you.

Quick facts about AAMI Life Insurance

AAMI Life Insurance is designed to provide an affordable, easy-to-obtain financial safety net for you and your loved ones. It pays a lump sum payment if you die or are diagnosed with a terminal illness – helping your family eliminate debts and protecting their financial security. Here are 10 great reasons to choose AAMI Life Insurance. For full details, please refer to Section 4 What we cover.

- 1. You can apply for up to \$1,000,000 cover without any medical tests.
- 2. Your application can usually be completed in minutes online, or over the phone.
- We reward your loyalty: After you have paid your first 12 months' premium in full, we will waive the premium for your 13th month of cover.
- If you apply for \$200,000 or more of cover, you'll be eligible for a Large Sum Insured Discount and a Family Discount is available if multiple family members each purchase a Life Insurance policy.
- 5. Monthly or annual premiums are available to suit your budget.
- 6. The Financial Planning Benefit can assist you or your beneficiaries to best utilise the benefit payment received from an accepted claim.
- 7. The Lifestyle Increase Benefit can help you increase your level of cover without the need for further health assessment if you are under the age of 60 and certain events occur in your life – like purchasing a home, or an addition to the family.
- You can choose to increase your amount of cover each year to keep up with inflation or freeze your premium at a level you can afford.
- 9. The Funeral Advancement Benefit can help cover the cost of your funeral and other immediate expenses.

10. If you experience a period of financial difficulty, you don't have to cancel your cover – the Premium Pause Benefit allows you to cease paying premiums for up to 3 months while still retaining cover for death by accident.

2. The application and your cover

2.1. Who can apply?

You can apply for AAMI Life Insurance if you are aged between 18 and 60 (inclusive), you are an Australian or New Zealand citizen or permanent resident and residing in Australia at the time of application, and you received this PDS in Australia.

Your application

We consider many factors (such as your health, lifestyle and occupational duties) when making a decision about whether to accept your application for insurance. No medical tests are required when you apply. We will use the information provided by you in your application to assess whether or not we can provide you with cover or whether we can offer cover subject to special conditions that apply to your policy.

2.2. When you are covered

Once you apply and your application is accepted, you will be covered for the benefits outlined (in Section 4 What we cover) 24 hours a day, 365 days a year. We guarantee to renew your policy every year until your 99th birthday, unless your cover stops earlier, please refer to Section 2.4. When cover stops.

2.3. When cover starts

As long as you satisfy the eligibility requirements (please refer to Section 2.1. Who can apply?) full cover under your AAMI Life Insurance policy will commence when we have accepted your application and received correct payment details.

If we accept your application for cover under AAMI Life Insurance, we will send you a schedule and policy document confirming our acceptance. These documents, together, set out the full terms and conditions of your insurance with us. Please read these documents carefully and store them in a safe place.

2.4. When cover stops

Once you reach your 99th birthday your cover will stop. Cover will also stop under this policy on the earliest of the following events:

you ask us to cancel the policy;

the date your policy is cancelled due to the nonpayment of outstanding premiums;

the date the Terminal Illness Benefit is paid; or

the date you die.

If cover stops we will not consider any claim, unless the event giving rise to the claim occurred before cover stopped.

3. Your cooling off period

You have 30 days from the policy commencement date to check that this insurance meets your needs. This is the cooling off period.

If you wish, you can cancel your policy during the cooling off period by contacting us and, provided you have not made a claim, you will receive a refund in full of any money you have paid.

3.1 Cancelling your policy after the cooling off period

You may cancel your policy at any time after the cooling off period. If you pay premiums monthly, your cover will continue up until the date the policy is paid up to.

If you pay premiums annually and your request is to cancel prior to your next policy anniversary (example, you cancel mid-year), you will be refunded any unused premium. We will confirm, your policy has been cancelled from the date of your request.

You may wish to discuss other financial options by contacting us.

4. What we cover

AAMI Life Insurance is a single life policy only. As the sole owner of the policy, you will also be the only insured person.

Depending on the level of cover you think you need, you can apply for as little as \$100,000 or as much as \$1,000,000, in increments of \$100,000.

The most we will pay under your AAMI Life Insurance policy is the sum insured. The maximum amount payable under all yearly renewable term life insurance policies issued by us since May 2010 for the same insured person is \$1,000,000 (plus indexation, please refer to section 5.1 Automatic Indexation Benefit).

You are entitled to the following benefits under your policy:

4.1. Death Benefit

If you die during the life of this policy, we will pay the sum insured for your policy as a lump sum to your nominated beneficiaries (if applicable), otherwise to your estate.

4.2. Terminal Illness Benefit

If you are diagnosed with a terminal illness by a registered doctor during the life of this policy, we will advance your full Death Benefit, helping you arrange your financial affairs the way you want.

4.3. Funeral Advancement Benefit

To help with the costs of your funeral or other similar expenses, we will advance \$10,000 of your Death Benefit if you die. We will pay this Funeral Advancement Benefit to your primary nominated beneficiary usually within 24 hours of receiving your death certificate and completed claim form. If you have not nominated a primary beneficiary, we will pay this benefit to your estate. The Funeral Advancement Benefit is an advancement of your Death Benefit and will therefore reduce your total Death Benefit payable by \$10,000. Please note that the payment of this benefit does not mean that the remaining Death Benefit will be paid.

4.4. Lifestyle Increase Benefit

We understand life is always changing. To help keep your insurance in line with your changing lifestyle, you can increase your sum insured each year by \$100,000 without having to provide any medical information if you are under the age of 60 and you:

get married;

or your partner give birth to or adopt a child;

have a child starting high school for the first time;

purchase a home (owner occupied); or

suffer the death of your partner.

You can also increase your sum insured under this benefit on your second policy anniversary.

How to apply for this benefit

Simply contact us for a Lifestyle Increase Benefit Application Form or download the form from www. aami.com.au/life-insurance. This benefit stops on your 60th birthday, unless cover stops earlier, please refer to Section 2.4. When cover stops.

Subject to the maximum sum insured limits that apply, please refer to Section 4 What we cover, you can 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 under this benefit by a further \$400,000.

When to apply for this benefit

Increases to your sum insured using this benefit must occur within 30 days of your policy anniversary following the event and will be offered on the same terms as your original insurance with us. Once we accept your application, we will confirm your increased sum insured and advise you of your new premium. Only one increase can occur each policy anniversary. Please note the 13 months intentional self-inflicted act exclusion will apply to the increased portion from the date we accept your increase, please refer to Section 7 What we do not cover.

4.5. Premium Pause Benefit

If you are unable to pay your premiums, for example due to financial hardship, you can contact us and request your premium be paused for up to 3 months over the life of the policy.

When you can activate this benefit

To activate your Premium Pause Benefit, you must have paid premiums for the previous 12 consecutive months and your policy must have no outstanding premium payable at the time of your request.

What is covered during the premium pause

During the period your premiums are paused, your AAMI Life Insurance policy will only cover you in the event you die as a result of an accident. After the premium pause has ended and you have started paying your premiums, you will be eligible for all the benefits under your policy subject to their terms.

5. Managing your cover

To ensure your policy continues to meet your changing circumstances, we offer you the following ways to help you maintain affordable cover.

5.1. Automatic Indexation Benefit

We will automatically increase your sum insured each year on your policy anniversary, by the greater of the indexation factor or 5%, to help keep your insurance in line with inflation. Unless you contact us to decline the increase, we will recalculate your premium to reflect the increase in your sum insured as a result of the indexation factor (and your age) and we will advise you of your new premium prior to your policy anniversary.

5.2. Premium Freeze Benefit

You can ask us not to increase the cost of your premium, in which case your future premiums will remain the same as the amount you froze them at, resulting in your sum insured decreasing as you get older. We will advise you of your reduced sum insured prior to each policy anniversary. The Automatic Indexation Benefit will not apply while your premiums are frozen. You can ask us to end the premium freeze at any time by contacting us.

6. AAMI Rewards

Your 13th month free!

After you have paid your first 12 months' premium in full, we will waive the premium for your 13th month of cover. This means after your first policy anniversary:

if you pay your premiums monthly, your account will not be debited for your 13th month of cover; or

if you pay your premiums annually, your first renewal notice will show a reduced annual premium, representing 11 months' premium.

Full cover continues during the time that your premium is waived. Your policy and premium payment will continue as normal thereafter.

Financial Planning Benefit

If you have continuously held your policy for 3 years, your policy will be automatically upgraded to include the Financial Planning Benefit at your 3rd policy anniversary. Under this benefit, we will reimburse up to \$2,000 for financial planning advice received from a licensed financial planner within 12 months of an accepted claim payment for either the Death Benefit or the Terminal Illness Benefit. This will allow you or your beneficiaries to best utilise the proceeds received. This benefit is only payable once per policy.

7. What we do not cover

We will not pay any benefit or refund any premiums if the event giving rise to the claim, directly or indirectly, is as a result of an intentional self-inflicted act within 13 months of your policy commencement date, or reinstatement date. Please note that if we accept an increase to your sum insured, the 13 months intentional self-inflicted act exclusion will apply for the increased portion only.

8. Your premium

Your premium pays for your cover, government fees and charges and administration costs.

Premium payment options

You can choose to pay your premium monthly or annually from the financial institution account or credit card you nominate. You have up to 30 days for monthly payments and 14 days for Annual payments from the date each premium is due to pay your premium.

What happens if your premium is not paid

If you do not pay a premium within this period, we will send a notice to you at the address last advised to us specifying the date we will cancel the policy without any refund of premium. We will not be liable for any claims after the date of cancellation.

If we cancel your policy due to non-payment of premiums, you can ask us to reinstate your policy up to 12 months after the date of cancellation. In order for us to process your application for reinstatement, we can ask for information relating to (but not limited to) your health and all outstanding premiums must be paid by you. If we accept your reinstatement, the 13 month intentional self-inflicted act exclusion will apply to your policy from the date of reinstatement, please refer to Section 7 What we do not cover.

Premium guarantee

Your premium is guaranteed not to change for 12 months from your policy commencement date. After this period, your premium will generally increase with age and as a result of the Automatic Indexation Benefit, explained in Section 5.1. We can also change the premium rate for all policies of the same kind by providing you with at least 30 days' written notice. You will be charged the new premium from your next policy anniversary.

Premiums received are paid into in our No. 1 statutory fund. A policy issued in relation to AAMI Life Insurance does not participate in any surplus arising in our statutory funds.

9. Are you eligible for a discount?

There are two types of discounts available under AAMI Life Insurance: the Large Sum Insured and Family Discounts. You may be eligible for one or both of them.

Large Sum Insured Discount

The higher the sum insured you choose, the larger the discount that applies to your policy. The following table shows how the discounts will be applied:

| Sum Insured | Discount | | |
|-------------------|----------|--|--|
| \$100,000 | Nil | | |
| \$200,000 | 10% | | |
| \$300,000 or more | 20% | | |

Family Discount

Should an immediate family member also purchase an AAMI Life Insurance policy, both you and your immediate family member will enjoy a 10% discount. The discount will apply to the premium payable under both policies (please refer to Section 10 How to calculate your premium).

For example, if you and your partner each purchase a policy with a sum insured of \$600,000, you will both be eligible for a Large Sum Insured Discount (20%) and a Family Discount (10%), totaling a 30% reduction to your premium.

This is for illustrative purposes only. The level of discount you may be eligible for may differ depending on your circumstances.

10. How to calculate your premium

Your premium is based on the applicable premium rate multiplied by your sum insured. Your premium rate is based on your age, gender and smoking status. Depending on your health, a loading may also apply to your premium from the policy commencement date.

The following tables provide you with a sample of monthly premiums only and include the Large Sum Insured Discount explained above. For a personalised quote, please contact us on 13 22 44 or go to www.aami.com.au/life-insurance.

Sample premiums for males

| Sum Insured | \$200,000 | | \$400,000 | | \$600,000 | |
|-------------|-----------|------------|-----------|------------|-----------|------------|
| Age | Smoker | Non-Smoker | Smoker | Non-Smoker | Smoker | Non-Smoker |
| 25 | \$32.40 | \$22.09 | \$57.59 | \$39.27 | \$86.39 | \$58.90 |
| 35 | \$41.21 | \$21.63 | \$73.26 | \$38.45 | \$109.89 | \$57.67 |
| 45 | \$88.20 | \$39.60 | \$156.80 | \$70.40 | \$235.20 | \$105.60 |

Sample premiums for females

| Sum Insured | \$200,000 | | \$400,000 | | \$600,000 | |
|-------------|-----------|------------|-----------|------------|-----------|------------|
| Age | Smoker | Non-Smoker | Smoker | Non-Smoker | Smoker | Non-Smoker |
| 25 | \$28.41 | \$15.25 | \$50.51 | \$27.11 | \$75.76 | \$40.67 |
| 35 | \$31.67 | \$18.38 | \$56.30 | \$32.67 | \$84.45 | \$49.01 |
| 45 | \$60.05 | \$31.69 | \$106.76 | \$56.34 | \$160.15 | \$84.50 |

The premiums in these tables are samples only as not all ages or levels of cover are represented. They do not take into account any Family Discount which you may be entitled to or any loading that may apply to your premium. The premium which applies to you may differ depending on your own circumstances. These tables do not include any renewal premiums.

11. Important general information for you

You can apply for AAMI Life Insurance by:

calling 13 22 44 and talk to one of our Customer Value Specialists

visiting www.aami.com.au/life-insurance and completing an online application.

However you choose to complete your application for AAMI Life Insurance, you won't be required to undergo any blood tests or medical examinations - instead we will assess the health and lifestyle information you provide us in your application.

11.1. Nominating beneficiaries

The distribution of your estate on your death can take time and could be delayed depending on the circumstances. To help avoid any potential delay in the payment of your Death Benefit, you can nominate up to 5 beneficiaries (for example your partner or children) to receive the proceeds of your policy.

11.2. How to make changes to your policy

If you would like to make any changes to your policy, for example to adjust your sum insured, change your address or your payment type, please contact us. Please note that if you request an increase in the sum insured, the 13 month intentional self-inflicted act exclusion will apply from the date we accept your increase for the increased portion. We will confirm in writing any changes to your policy, including any impact the change may have to your premium.

11.3. Risks

You should be aware of the risks involved before buying any life insurance policy. Some of the risks associated with holding this life insurance policy include:

your policy may not suit your needs;

your level of cover may be insufficient; or

a benefit may not be paid if in the event of a claim, an exclusion applies.

It's important that the policy meets your needs both now and in the future. You may need to seek assistance from an adviser if the terms are not consistent with your needs or do not suit your personal circumstances.

11.4. Taxation

Usually premiums are not tax deductible and any benefit payments are not assessable for tax purposes. These comments are a guide only and do not take into account changes in taxation laws or your particular circumstances. Please ask your tax adviser or the Australian Taxation Office about your own circumstances.

11.5. Making a claim

You, your nominated beneficiary/ies or legal personal representative will need to contact us as soon as possible after the event giving rise to the claim. A claims pack will be sent out detailing what information is required by us to assess the claim.

11.6. Complaints resolution

If you have a complaint about this product or our services, we have established a complaints resolution process and are committed to working with you to resolve your concerns. You can call us on 13 22 44 or contact the Customer Relations team at lifecustomerrelations@suncorp.com.au.

If an issue has not been resolved to your satisfaction, you can lodge a complaint with the Australian Financial Complaints Authority (AFCA). AFCA provides fair and independent financial services complaint resolution that is free to consumers.

You can contact AFCA via the following:

Website: www.afca.org.au

Email: info@afca.org.au

Telephone: 1800 931 678 (free call)

In writing to: Australian Financial Complaints Authority, GPO Box 3, Melbourne VIC 3001.

11.7 Keeping you up to date

We may change any information in this PDS. If the change is a material or significant one, we will notify you within 3 months of the change occurring. We may also make improvements to your policy without any increase to your premium. If we make a change to your policy which in your opinion was adverse to you, we will, if you make a claim, assess your claim on the terms of the policy before the change took place.

All the information contained in this PDS is current at the time of issue. We may change or update information from time to time. If the change is not materially adverse, we may notify you about that change by

preparing an update on the website www.aami.com. au/life-insurance. You can also obtain a printed copy of this free of charge by contacting us (refer to back page for details).

12. Your privacy and our information handling practices

We understand that the privacy of your information is important to you and we respect the confidentiality of the information that you provide to us.

In this Privacy section, all references to "We/Us/Our" means Asteron and its related bodies corporate.

The way in which we collect, use and disclose your personal and sensitive information (together 'personal information') is explained in our Australian Privacy Principle Privacy Policy (APP Privacy Policy) available using this link https://www.tal.com.au/privacy-policy. Alternatively, we would be pleased to provide a copy of this free of charge on request.

Our APP Privacy Policy contains details about the following:

the kinds of personal information that we collect and hold;

how we collect and hold personal information (including sensitive information such as health and lifestyle information);

the purposes for which we collect, hold, use and disclose personal information (including sensitive information);

how our customers may access personal information about them which is held by us and how they can correct that information; our approach to direct marketing and how you can opt out of receiving direct marketing communications; and

how we deal with any complaints that our customers may have regarding privacy issues.

Our information handling practices are based on relevant privacy laws and regulations, including, but not limited to the Privacy Act 1988 (Cth) and the 13 Australian Privacy Principles.

Additional information about relevant privacy laws and regulations and your privacy rights can be found at the website of the Australian Privacy Commissioner at http://www.oaic.gov.au including how to make a privacy related complaint and sensible steps that you can take to protect your information when dealing with organisations and when using modern technology.

If you would like a copy of our APP Privacy Policy or if you have any questions about the way in which we manage your information, or wish to make privacy related complaint, please contact us using the details below:

Telephone: 1300 209 088

Email: customerservice@tal.com.au

Post: GPO Box 5380 Sydney NSW 2001

Collection, use and disclosure of information when providing our products and services

Your personal information will be collected, used and disclosed to enable us to provide or arrange for the provision of our insurance products and services. Examples of why your personal information will be collected, used and disclosed include, but are not limited to, the following:

to confirm your identification, for example when making payments and changes to your policy;

to process new insurance policies, including underwriting and claims assessments;

to carry out administrative and processing functions including pre-sales, sales and ongoing customer service and support;

to assess claims against the policy terms;

to meet legal and regulatory requirements; and

to review and develop our products and services, including research and surveys to meet ongoing customer expectations.

We may collect your information from and disclose your information to (and receive information from) third parties (including related bodies corporate) such as:

affiliated product and service providers, or distributors of our products or services, including other businesses with whom we have a business, distribution or branding arrangement, or where otherwise permitted or authorised by law; and

organisations that are involved in a corporate reorganisation or are involved in a transfer of all or part of the assets or business of their organisation and/or a TAL organisation.

Typically, in providing our products and services to you we may collect and disclose information using online and paper forms, electronic transmission of data, telephone and other available technologies. We obtain your consent for the collection, use and disclosure of information including, but not limited to, your consent to liaise with relevant healthcare providers, financial advisers and professionals such as your accountant and doctors.

If you do not supply the required information, we may not be able to provide the requested product or service or pay a claim.

Your personal information will be managed and held securely and we have measures in place to protect your information. In processing and administering our products and services (including at the time of underwriting and claims assessment) we may need to disclose your personal information to other organisations and individuals. Examples of why your personal information will be disclosed include, but are not limited to, the following:

to organisations assisting us in providing our products and services such as those providing mailing and information technology services;

to organisations assisting us in promoting, marketing and distributing our products and obtaining feedback such as surveys and research;

to our related bodies corporate and organisations with which we have a business alliance or contractual arrangement;

in response to enquiries, complaints and litigation, for example, disclosure to external complaints resolution bodies and lawyers;

to meet our legal and regulatory requirements; and

to respond to a request from a government agency or law enforcement body.

We may also disclose your personal information to other bodies such as reinsurers, your financial adviser, healthcare and rehabilitation providers and claims investigators. In administering your insurance benefits and in operating this product, your personal information may be disclosed to service providers in another country.

Our Privacy Policies provide information regarding relevant offshore locations where we have service providers.

Generally, we do not use or disclose any customer information for a purpose other than providing our products and services unless:

our customer consents to the use or disclosure of the customer information; or

the use or disclosure is required or authorised under an Australian law or a court/tribunal order; or

the purpose is related to improving our products and services and seeking customer input such as market research; or

the use or disclosure of the information is reasonably necessary for one or more enforcement related activities conducted by, or on behalf of, a law enforcement body e.g. the police.

Your personal information and our marketing practices

Every now and then, we, or, our related bodies corporate, or organisations with which we have a business arrangement may wish to contact you to provide you with information about special offers and information about products and services that we think will be of interest to you. These direct marketing communications may be through any available technologies including mail, email, SMS, telephone and online. Detailed information about our marketing practices, including data matching and analytics, is available in our APP Privacy Policy referenced above. We will engage in marketing unless you tell us otherwise. If you prefer not to receive direct marketing communications from us, you can contact us at any time using the contact details above. When you contact us to opt out of receiving direct marketing communications going forward, you will be given a choice of ongoing marketing preferences.

Accuracy of information and access to information we hold

We rely on the accuracy of the information you provide. If you think that we hold information about you that is incorrect, incomplete or out of date, please let us know using the communication methods above.

Under current privacy laws and regulations, you are generally entitled to access the personal information we hold about you. To access that information, simply make a request in writing. This process enables us to confirm your identity for security reasons and to protect your personal information from being sought by a person other than yourself. There are some limited exemptions where we would be unable to provide the personal information that we hold about you in response to your request.

If, for any reason, we decline your request to access and/or update your information, we will provide you with details of the reasons and where appropriate, a list of the documents that are not being provided directly to you. In some circumstances it may be appropriate to provide you with access to information that you've requested via an intermediary, such as providing medical information to a treating GP rather than directly to yourself. If this is the case, we will let you know.

13. Your Duty of Disclosure

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

Your duty, however, does not require disclosure of a matter:

that diminishes the risk to be undertaken by us;

that is of common knowledge;

that we know, or in the ordinary course of our business, ought to know; or

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 we would not have entered into the contract if the failure had not occurred, we may avoid the contract within 3 years of entering into it. If your non-disclosure is fraudulent, the insurer may avoid the contract at any time.

We may elect not to avoid your contract 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 contract are available to us while the contract remains in force.

Where your contract provides death cover, we may only apply (i) above and must do so within 3 years of you entering the contract with us.

Your duty of disclosure continues to apply until the contract is entered into. It also applies when you extend, vary or reinstate a contract of life insurance.

14. What do we mean by that?

Where any of the following words appear in this PDS, whether the first letter is in upper or lower case, their meanings are listed below.

Where applicable, with respect to the definitions, singular includes the plural and vice versa.

accident means an event which solely and directly causes injury as a result of violent, external and visible means.

Asteron, **we**, **us** and **our** means Asteron Life & Superannuation Limited, ABN 87 073 979 530 AFSL 229880.

expiry date means the date your policy ends as stated on the schedule.

immediate family members means your partner, parents, siblings or children.

indexation factor means the percentage change in the consumer price index which is the weighted average of the 8 Australian capital cities combined as published by the Australian Bureau of Statistics or any body which succeeds it and in respect of the 12 month period finishing on 30 September. The indexation factor will be applied from 1 March the following year. If the CPI is not published by this date, the indexation factor will be calculated upon a retail price index which we consider most nearly replaces it. **injury** means physical damage to your body which occurs as a result of violent, external and visible means while this policy is active.

insured person means the person who has been accepted by us and is listed on the schedule as the insured person under the policy.

legal personal representative means the executor or administrator of your estate, or any other person(s) who is authorised to administer and distribute your estate.

nominated beneficiary/ies means the person(s) you nominate using the Nomination of Beneficiaries form to receive the Death Benefit and Funeral Advancement Benefit under your policy.

partner means your spouse or a person living with you as your spouse on a domestic basis in good faith. He or she can be the same sex as you.

policy means your AAMI Life Insurance, which consists of the policy document, schedule and information provided in your application.

policy anniversary means the anniversary of the policy commencement date.

policy commencement date means the date we accept your application for full cover under your AAMI Life Insurance policy as shown on the schedule.

policy owner means the person listed on the schedule as the owner of this policy.

premium means the amount you pay us for the insurance.

primary nominated beneficiary means the person you list first on your Nomination of Beneficiaries form.

registered doctor means a doctor who is legally qualified and a properly registered medical specialist. The doctor cannot be yourself or a member of your family. If practising outside Australia, the doctor must have qualifications equivalent to Australian Standards.

schedule means a document issued by us which shows important information about your policy, including your policy number, premiums, sum insured, special conditions (if applicable) and policy commencement date.

sickness means an illness or disease you suffer while cover for the applicable benefit was in force under this policy.

sum insured means the amount you apply for and we accept as varied (for example if you apply for a decrease or through increases under the Automatic Indexation Benefit) by agreement.

terminal illness means a sickness which you have been diagnosed with, that in our opinion, having considered any evidence we may require, means that your life expectancy is not greater than 12 months, regardless of any available treatment.

you and **your** means the policy owner who is also the insured person who has been accepted by us and is shown on the schedule.

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We're here to help you



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