

# Changing your insurance cover



## AVOID PROCESSING DELAYS

We make important changes to our forms at times. Check you're using the latest version by comparing the issue date at the bottom of this page with the version at [unisuper.com.au/forms](http://unisuper.com.au/forms).

### When to use this form

Use this form to cancel or to decrease your:

- ❖ Death and/or Total & Permanent Disablement (TPD) cover
- ❖ Income Protection (IP) cover.

You can also use this form to:

- ❖ increase your IP waiting period
- ❖ decrease your IP benefit period
- ❖ opt out of the six-monthly IP automatic updates (Accumulation 2 only)
- ❖ opt out of receiving default Death and TPD cover in the future.

### Important information

If you cancel or decrease your insurance cover and later choose to purchase additional insurance cover, your application will be subject to acceptance by our Insurer. Our Insurer has the ability to accept, decline or impose restrictions, exclusions and/or loadings on the insurance premiums.

Income Protection cover is only available to Accumulation 1, Accumulation 2 and Personal Account members.

## SECTION 1 — Your details

 Please use **BLACK** or **BLUE BALLPOINT PEN** and print in **CAPITAL LETTERS**. Cross where required **X**

UniSuper member number

If you're unsure of your member number, refer to your most recent UniSuper correspondence or call us on **1800 331 685**.

Title Mr  Mrs  Ms  Dr  Professor

Other

Surname

Given name(s)

Date of birth (DDMMYYYY)

Contact number

Email address

Residential address, number and street (*not PO Box*)

Suburb/Town

State  Postcode

Country (*if not Australia*)

form continues >



- To cancel cover, complete SECTION 2.
- To opt out of automatically receiving default death and TPD cover in the future, complete SECTION 3.
- To decrease your death and/or TPD cover, complete SECTION 4.
- To change your IP cover, complete SECTION 5.

## SECTION 2 — Cancelling your cover

Please **cancel** my:

- > Death cover
- > TPD cover
- > IP cover

Your insurance cover will cease on the day we receive your request.

**Note:** If you have Death and TPD cover, and cancel only the Death cover, then you will have TPD-only cover. If you cancel only the TPD cover, then you will have Death-only cover.

## SECTION 3 — Opt out of cover

Do you want to opt out of ever receiving default Death and TPD cover in the future, even if your account closes and opens again at a later date (provided your member number doesn't change)?

- > No
- > Yes

## SECTION 4 — Decreasing Death and/or TPD cover

Please refer to your online account, your most recent Benefit statement, or call us if you need assistance in completing this section.

Do you have **unitised** cover that you want to decrease?

- > No.
- > Yes. Please decrease my:

> Death cover to   units

> TPD cover to   units

Do you have **fixed** cover that you want to decrease? (This must be in multiples of \$1,000)

- > No.
- > Yes. Please decrease my:

> Death cover to  
\$   ,   ,

> TPD cover to  
\$   ,   ,

## SECTION 5 — Change Income Protection cover

Do you wish to **decrease** the amount of IP cover you have?

- > No
- > Yes. How many units of IP cover would you like to **decrease to**?  
  units of cover  
(\$433 per month or \$100 per week sum insured)

Your insurance cover will cease or decrease on the day we receive your request.

Do you want to increase your Income Protection (IP) waiting period?

- > No
- > Yes. I currently have a 30-day or 60-day IP waiting period and wish to increase my IP waiting period to:  
 > 60 days  
 > 90 days

Do you want to decrease your IP benefit period? This is the period during which you receive IP payments.

- > No
- > Yes. I want to decrease my IP benefit period:  
 > to a five-year benefit period\*  
 > to a two-year benefit period

\* If you're a Personal Account member with an occupation rating of Heavy manual or Special risk, you will receive a two-year benefit period.

Do you want to opt out of the six-monthly Income Protection (IP) cover automatic updates? (Accumulation 2 only)

- > No. Go to SECTION 5
- > Yes. Your IP cover will remain fixed.

**If you opt out of this automatic update, you cannot opt back in.**

## SECTION 6 — Declaration



Please read this declaration before you sign and date your form.

- I declare that the information I have given on this form is true and correct.
- I acknowledge that I have received, read and understood the information in my UniSuper membership PDS and in the relevant *Insurance in your super* booklet and I understand that:
  - If I cancel cover and I want to re-apply for cover at a later date, I will need to apply for underwriting and my application will be subject to the Insurer's acceptance.
  - If I opt out of ever receiving default cover in the future, this election will cease if my member number changes.
- I understand that all insurance cover is subject to the terms and conditions of the policy.
- I acknowledge that if I fail to provide all or part of the information required or consent to the Insurer obtaining such information, as required, this application will not be assessed and processed.
- I acknowledge that I have read my *duty to take reasonable care* and understand my obligations under the *Insurance Contracts Act 1984* as explained in the PDS relevant to my membership category and *Insurance in your super* booklet.
- I acknowledge that I have read and understood the privacy information contained in the PDS relevant to my UniSuper membership category and consent to my personal information being used in accordance with UniSuper's Privacy Policy.
- I understand that if I am a Personal Account member with an occupation rating of Heavy manual or Special risk and my Income Protection benefit period is 'to age 65', I am only eligible to decrease my benefit period to a two-year benefit period.

Signature

Date (DDMMYYYY)



### RETURN YOUR FORM AND ANY ADDITIONAL DOCUMENTATION:

Via email: [enquiry@unisuper.com.au](mailto:enquiry@unisuper.com.au)

Via Post: UniSuper  
Level 1, 385 Bourke Street  
Melbourne VIC 300



### NEED HELP?

For more information:

- email [enquiry@unisuper.com.au](mailto:enquiry@unisuper.com.au), or
- call **1800 331 685**.

### Privacy statement

UniSuper is committed to protecting your personal information and the confidentiality of your information in accordance with privacy law obligations. The information that you provide on this form is collected and used in accordance with our Privacy Statement and Privacy Policy which can be found online at [unisuper.com.au/privacy](https://www.unisuper.com.au/privacy). If you have any privacy related questions, call **1800 331 685**.

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