

PLATINUM PLUS - LIFE ASSURANCE COVER

A INTRODUCTION

1. **We** insure the **insured person** as set out below and in the Policy Terms and Conditions.
2. The words shown in bold in the cover have the meaning described in section H of this Life Assurance Cover and section B of the Policy Terms and Conditions.

B WHAT WE COVER

1. **We** will pay **you** the following benefits under this cover:

1.1 Death Benefit

If an **insured person** dies, **we** will pay **you** the **life assurance**. Any Terminal Illness Benefit or Trauma Cover - Accelerated or Trauma Multi Cover –Accelerated or Total and Permanent Disability Benefit - Accelerated paid will reduce the **life assurance**.

1.2 Payment to Nominated Beneficiaries.

By written notice to **us**, **you** may nominate to whom and in what proportions the **life assurance** is to be paid. **You** may revoke or change any such nomination by written notice to **us**.

On change of ownership of the Policy any such existing nomination is automatically revoked.

2. Bereavement Benefit

If an **insured person** dies, **you** may apply for an immediate Bereavement Benefit of \$15,000. If the **life assurance** on the **insured person** is less than \$15,000, **we** will pay the sum assured. The Bereavement Benefit is to assist the bereaved with immediate costs such as travel and accommodation and funeral expenses. This Bereavement Benefit represents an early payment of part of the **life assurance** and the **life assurance** will be reduced by the amount of Bereavement Benefit paid.

3. Terminal Illness Benefit

Where the **insured person** is diagnosed as being terminally ill and death is likely to occur within twelve months, **you** may apply for payment of the **life assurance**. The **medical practitioner** treating the condition will be required to certify the extent of the illness or injury. Another **medical practitioner** nominated by **us** must confirm the diagnosis and prognosis.

4. Child's Funeral Benefit

If a **child** of an **insured person** dies from age 2 and before their 21st birthday, **we** will pay **you** this Child's Funeral Benefit upon receiving written notification of the death of that **child** subject to the following:

4.1 The amount of Child's Funeral Benefit payable for a **child**:

- between the ages of ten and twenty (inclusive) at the date of death of that **child** is \$3,500, and
- under the age of ten years at the date of death of that **child** is \$2,000 less any other amounts payable in respect of the death of that **child** under the terms of the Life Insurance Act 1908.

4.2 We will only pay one Child's Funeral Benefit in total for any one **child** regardless of any other cover under this Life Assurance Cover and any other policy the **parent(s)** may have with **us** with this Child's Funeral Benefit.

4.3 The Child's Funeral Benefit is not deducted from the **parent's life assurance**.

4.4 No benefit is payable under this Child's Funeral Benefit if the death of that **child**:

4.4.1 is as a direct result of:

- a **known congenital condition**, or
- any **child pre-existing condition**,
at the date this Child's Funeral Benefit starts for that **child**, or

4.4.2 occurs within 3 months of the **date of commencement** or reinstatement of their **parent's** Life Assurance Cover.

4.5 This Child's Funeral Benefit starts for a **child** on the later of:

- the **child's** age on the **date of commencement** of their **parent's** Life Assurance Cover in this Policy, or
- age two.

4.6 This Child's Funeral Benefit ends for each **child** on the earliest of:

- their 21st birthday, or
- the date their **parent's** Life Assurance Cover on this Policy ends for any reason.

5. Financial Planning Benefit

When **we** pay a lump sum benefit of at least \$100,000 to a beneficiary under the Policy, **we** will reimburse, up to a maximum of \$2,500, the cost of a fully documented financial plan prepared by an Authorised Financial Adviser for the beneficiary.

Where there is more than one beneficiary the right to the Financial Planning Benefit will be divided equally between those beneficiaries who each receive a benefit of at least \$100,000.

The reimbursement must be claimed within six months of receiving the lump sum benefit and will be payable only once in respect of all policies covering the same **insured person**.

We will require evidence to show that the financial plan has been provided, the qualifications of the financial adviser and the costs charged by an Authorised Financial Adviser.

C SUICIDE EXCLUSION

If an **insured person** whether sane or insane dies by **his** or **her** own hand within thirteen months from the **date of commencement** or the date of reinstatement, then this cover shall be void and any premiums paid shall be forfeited.

If **you** increase the sum assured and the **insured person** whether sane or insane dies by **his** or **her** own hand within thirteen months from the date of that increase, then that increase amount shall be void and any premiums paid for that increase shall be forfeited.

This clause shall not be applied to defeat any interest in this Policy acquired by a third party in good faith and for valuable consideration.

If an **insured person** had similar cover with another insurance company and this cover replaced that cover, then this exclusion does not apply to the sum assured under the replaced cover provided the previous policy had been in force for at least thirteen months.

D CPI OPTION

If this CPI Option is included in this Life Assurance Cover, the **schedule** will show which **insured person** it applies to.

We will automatically increase that **insured person's life assurance** on each **policy anniversary** by the greater of:

- 2%, or
- an amount **we** determine each year based on the percentage increase in the **consumer price index**,

regardless of any change in **his** or **her** health, occupation or pastimes.

The premium will increase on the **policy anniversary** to reflect the increase in the **life assurance** as a result of the CPI Option being applied, including any additional premium rate loading(s) for medical, occupation or pastime reasons, when **you** took out the cover on which the CPI Option is being applied. **We** will advise **you** of the new premium and new **life assurance** prior to each **policy anniversary**.

We will automatically apply the increase in the **life assurance** at each **policy anniversary** until this CPI Option ends, unless **you** advise **us** otherwise. **You** must advise **us** before each **policy anniversary** if **you** do not require that increase. If **you** decline an increase on a **policy anniversary**, it will not affect future CPI Option increases. Increases in the **life assurance** which **you** decline are not carried forward to future **policy anniversaries**.

Where **you** increase the **life assurance** within six months before a **policy anniversary**, the first time **we** will apply the CPI Option to that increase will be on the second **policy anniversary** after that increase.

The last increase under this CPI Option for an **insured person** will be applied on the **policy anniversary** before **he** or **she** reaches age 65.

E FUTURE INSURABILITY OPTIONS

1. Personal Events

You can increase the **insured person's life assurance** in this Policy in the circumstances shown below regardless of **his** or **her** state of health.

- a) **You** can increase that **insured person's life assurance** by up to 25% of **his** or **her** original **life assurance** with a maximum of \$250,000 if any one of the following specified events apply to **him** or **her**:
 - (i) Marriage or civil union or divorce or being subject to a separation agreement or order,
 - (ii) Birth or adoption of a **child**,
 - (iii) Dependent **child** starting secondary school,
 - (iv) Attainment of ages 25, 30, 35, 40 and 45,
 - (v) Death of a spouse, defacto partner, **child** or civil union partner,
 - (vi) the **insured person** permanently stops work to provide full time physical care for the first time after the **date of commencement** of a dependant relative who is the father, mother, brother, sister, son, daughter, father-in-law, mother-in-law, grandfather, grandmother, grandchild, spouse, defacto partner or civil union partner of the **insured person** who did not require full time physical care prior to the **date of commencement** of this Life Assurance Cover.
- b) If the **insured person** takes out or increases a mortgage on **his** or **her** own home, **his** or **her life assurance** can be increased by up to the lesser of:
 - (i) 50% of **his** or **her** original **life assurance**; or
 - (ii) the increase in the value of the existing mortgage or a new mortgage; or
 - (iii) \$250,000.

Conditions

- a) **You** must inform **us** of the intention to exercise this Future Insurability Option for Personal Events within one month of the specified event.
- b) **You** must exercise this Future Insurability Option for Personal Events within the six months following the specified event set out in E1a) and b).
- c) This Future Insurability Option for Personal Events is not available if the original cover was issued with a premium loading greater than 100% due to health, occupation or pastimes and/or existing cover must not be as a result of applying a reinstatement option.
- d) Any special terms and loadings that applied to the original **life assurance** will also apply to the increase in **life assurance**.
- e) The maximum increase for all events is the lesser of the **insured person's** original **life assurance** and \$1,000,000.
- f) **Your** premiums will increase in line with the increased Life Assurance Cover. Refer to section D1 of the Policy Terms and Conditions for how **we** calculate **your** premium. **We** will advise **you** of the increased premium amount before the increase is applied. The increased Life Assurance Cover applies from the date **we** confirm the new Life Assurance Cover sum assured to **you**, subject to payment of the additional premium.
- g) **You** cannot exercise this Future Insurability Option for Personal Events where a claim has been paid (other than the Child's Funeral Benefit) or where **you** are entitled to be paid (other than the Child's Funeral Benefit) under this Life Assurance Cover or where **you** have not made a claim for a benefit under this Life Assurance Cover where **you** would be entitled to make a claim.
- h) This Future Insurability Option for Personal Events for an **insured person** can be exercised for one of the specific events above in a 12 month period.
- i) This Future Insurability Option for Personal Events ends for an **insured person** on **his** or **her** 55th birthday.

2. Business Events

You can increase an **insured person's life assurance** in the circumstances shown below regardless of **his** or **her** state of health.

The maximum Life Assurance Cover increase for each business event is the lesser of 25% of the **insured person's** original **life assurance** or \$250,000 or the amount calculated below:

- (i) Where the **insured person** is a key person in a business, **you** can increase **his** or **her life assurance** by the same proportion as the increase in **his** or **her** value to the business averaged over the previous three years, or
- (ii) Where the **insured person** is a partner in a firm or a shareholder in a company, **you** can increase **his** or **her life assurance** by the same proportion as the increase in the value of the **his** or **her** financial interest averaged over the previous three years, or
- (iii) Where **you** have effected cover for the **insured person** for loan guarantees, **you** can increase **his** or **her life assurance** by the same proportion as the increase in the loan relating to the funding of the business.

Conditions

- a) **You** must inform **us** of the intention to exercise this Future Insurability Option for Business Events within one month of the specified event.
- b) **You** must exercise this Future Insurability Option for Business Events within the six months following the specified event set out in E2(i), (ii) and (iii).
- c) The maximum increase for all events is the lesser of the **insured person's** original **life assurance** and \$1,000,000.
- d) This Future Insurability Option for Business Events is not available if the original cover was issued with a premium loading that is greater than 100% due to health, occupation or pastimes and/or existing cover must not be as a result of applying a reinstatement option.
- e) **You** can increase the **insured person's life assurance** subject to the need for cover being established by financial underwriting of the **insured person** based on such financial evidence as **we** request.
- f) The method chosen to value the business or the **insured person** will be in accordance with industry established valuation methods or the method of valuation used at application time. The method of valuation and the valuer must be satisfactory to **us**.
The valuer cannot be a family member, business partner, employee or employer of **you** or the **insured person**.
- g) The business means the entity on which the underwriting was based on at the time of the original application.
- h) **We** reserve the right to decline an application for an increase if **we** are not satisfied that there is financial justification for the additional cover. This is based on the financial evidence **you** provide to **us**.
- i) **Your** premiums will increase in line with the increased cover. Refer to section D1 of the Policy Terms and Conditions for how **we** calculate **your** premium. **We** will advise **you** of the increased premium amount before the increase is applied. The increased cover applies from the date **we** confirm the new sum assured to **you**, subject to payment of the additional premium.
- j) Any special terms and premium loadings that applied to the original **life assurance** will also apply to the increase in **life assurance**.
- k) **You** cannot exercise this Future Insurability Option for Business Events at a time a claim has been made or is entitled to be made.
- l) **You** cannot exercise this Future Insurability Option for Business Events where a claim has been paid (other than the Child's Funeral Benefit) or **you** are entitled to be paid (other than the Child's Funeral Benefit) under this Life Assurance Cover or where **you** have not made a claim for a benefit under this Life Assurance Cover where **you** would be entitled to make a claim.
- m) This Future Insurability Option for Business Events for an **insured person** can be exercised for one of the specific events above in a 12 month period.
- n) This Future Insurability Option for Business Events ends for an **insured person** on **his** or **her** 55th birthday.

3. Business Future Insurability Option

If this Business Future Insurability Option is included in the **schedule** for an **insured person**, **you** can increase **his** or **her life assurance** in the circumstances shown below regardless of **his** or **her** state of health.

- (i) Where the **insured person** is a key person in a business, **you** can increase **his** or **her life assurance** by the same proportion as the increase in **his** or **her** value to the business averaged over the previous three years, or
- (ii) Where the **insured person** is a partner in a firm or a shareholder in a company, **you** can increase **his** or **her life assurance** by the same proportion as the increase in the value of the **his** or **her** financial interest averaged over the previous three years, or
- (iii) Where **you** have effected cover for the **insured person** for loan guarantees, **you** can increase **his** or **her life assurance** by the same proportion as the increase in the loan relating to the funding of the business.

Conditions

- a) **You** can increase the **insured person's life assurance** subject to the need for cover being established by financial underwriting of the **insured person** based on such financial evidence as **we** request.
- b) The first Business Future Insurability Option date is the first **policy anniversary**. The last Business Future Insurability Option date is the **policy anniversary** prior to the **insured person's** 60th birthday.
- c) **You** must inform **us** of the intention to exercise this Business Future Insurability Option within one month of the specified event.
- d) **You** must exercise this Business Future Insurability Option in writing within the six months following the Business Future Insurability Option date set out in E3(i), (ii) and (iii).
- e) This Business Future Insurability Option is not available if the original cover was issued with a premium loading greater than 100% due to health, occupation or pastimes and/or existing cover must not be as a result of applying a reinstatement option.
- f) The method chosen to value the business or the **insured person** will be in accordance with industry established valuation methods or the method of valuation used at application time. The method of valuation and the valuer must be satisfactory to **us**.
The valuer cannot be a family member, business partner, employee or employer of **you** or the **insured person**.
- g) The business means the entity on which the underwriting was based on at the time of the original application.
- h) **We** reserve the right to decline an application for an increase if **we** are not satisfied that there is financial justification for the additional cover. This is based on the financial evidence **you** provide to **us**.
- i) **Your** premiums will increase in line with the increased cover. Refer to section D1 of the Policy Terms and Conditions for how **we** calculate **your** premium. **We** will advise **you** of the increased premium amount before the increase is applied. The increased cover applies from the date **we** confirm the new sum assured to **you**, subject to payment of the additional premium.
- j) Any special terms and premium loadings that applied to the original **life assurance** will also apply to the increase in **life assurance**.
- k) **You** cannot exercise this Business Future Insurability Option where a claim has been paid (other than the Child's Funeral Benefit) or **you** are entitled to be paid (other than the Child's Funeral Benefit) under this Life Assurance Cover or where **you** have not made a claim for a benefit under this Life Assurance Cover where **you** would be entitled to make a claim.
- l) **You** cannot exercise this Business Future Insurability Option if this Life Assurance Cover has been reinstated under a Buy-Back option.
The maximum Business Future Insurability Option sum assured available is \$5,000,000.

F PREMIUM HOLIDAY OPTION

This cover can be reinstated without evidence of health within one year from the date upon which the last premium was due subject to the following conditions:

- a) Within the days of grace, **you** can exercise this Premium Holiday Option by writing to **us** advising the reason why premium payments have stopped and by doing so acknowledge that reinstatement of this Life Assurance Cover within the stated period is **your** sole responsibility.
- b) Valid reasons for this Premium Holiday Option are; redundancy, bankruptcy, tertiary studies or overseas travel.
- c) **We** will acknowledge the request, cancel this Life Assurance Cover and confirm that the Premium Holiday Option has been activated if a valid reason is given.
- d) The maximum sum assured under this Premium Holiday Option is \$500,000.
- e) This Premium Holiday Option may be exercised once only.
- f) From the date of reinstatement, premiums will be payable based on the age(s) attained of the **insured person/s** and the premium rates applicable at that time.

G CONVERSION OPTION

You can convert this Life Assurance Cover for an **insured person** to another policy on the terms applying at the time provided that:

- a) This Life Assurance Cover is in force in its original form; and
- b) All premiums have been paid; and
- c) The maximum cover without medical evidence under the new policy is the Life Assurance Cover sum assured shown in the **schedule**.

H DEFINITIONS

The definitions shown below apply to all derivatives of the words defined.

Definition	Meaning
child pre-existing condition	means any illness, sickness, disease, injury or medical condition existing that: <ul style="list-style-type: none"> • the parent or child was aware of, or • the child had signs or symptoms of; or • the child had investigations or sought medical advice for, or • a reasonable person or parent in the circumstances would seek diagnosis, care or treatment for, on or before the date the Children's Funeral Cover starts for a child .
known congenital condition	means a health anomaly, medical condition or defect which is present at birth which is known by the parent or child at the date the Child's Funeral Benefit starts for a child .