

Update your occupational classification



Complete and return this form if you want to apply to have your Occupational Classification for Death, Total and Permanent Disablement (TPD) and Income Protection (IP) insurance cover changed or advise GuildSuper of a change to your employment status.

What you need to do

Complete this form and return it to GuildSuper, GPO Box 1088 Melbourne VIC 3001.

It is important that we have your correct Occupational Classification on record, so you pay the right amount for your insurance cover. If you (or your employer) have not provided us with details of your occupation, you may have been classified as Standard and you may have been paying more for your insurance cover. A change in your employment status may also affect your entitlement to an IP benefit.

To check the Occupational Classification we have on record, you can contact GuildSuper. If you are not correctly classified, GuildSuper's Insurer reserves the right to adjust the level of cover and/or the cost of cover.

About the application

- MetLife will be treating this contract as a 'consumer insurance contract'.
- Please answer all the questions as accurately as possible and provide additional information wherever requested.
- The person to be insured must complete this application and initial any changes.
- As part of your application, you may be required to undergo additional medical tests.
- As part of the overall assessment process MetLife will contact you if further information is required.

Privacy – Use and disclosure of personal information

Your privacy with MetLife Insurance Limited ABN 75 004 274 882 AFSL 238096 ('MetLife' or the 'Insurer')

The personal information you provide in the form is necessary for MetLife to provide you with the products and services you have requested from MetLife. You do not have to provide MetLife with your personal information, but if you do not do so MetLife may not be able to provide you with the products or services. MetLife complies with the Privacy Act 1988 and the

principles laid out in its Privacy Policy which details information about the entities that MetLife usually discloses personal information to (including overseas recipients), how you may access or seek correction of your personal information, how we manage that information and our complaints process.

MetLife's Privacy Policy is readily available and can be viewed at www.metlife.com.au/privacy.

Duty to take reasonable care not to make a misrepresentation - Important information before commencing this application

There is a duty to take reasonable care not to make a misrepresentation when applying for insurance. Before answering the questions in this application form it is important that the person answering the questions carefully reads the 'Duty to take reasonable care not to make a misrepresentation' section on page 3 of this form which explains the duty, the consequences of not complying with the duty, and guidance for answering the questions. If the duty is not complied with, MetLife may be able to avoid or change cover; this means a benefit may not be able to be claimed or the amount we pay may be reduced.



1. Personal details (please complete all sections in block letters)

Member no.	Date of birth	Gender
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Female <input type="checkbox"/> Male
<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss
<input type="checkbox"/> Ms	<input type="checkbox"/> Dr	<input type="checkbox"/> Other: <input type="text"/>
Given name(s)		Surname
<input type="text"/>		<input type="text"/>
Phone no. (home)	Phone no. (work)	Mobile phone no.
<input type="text"/>	<input type="text"/>	<input type="text"/>
Email	Preferred time of contact	
<input type="text"/>	<input type="checkbox"/> Morning (9am-12pm) <input type="checkbox"/> Afternoon (12pm-6pm) <input type="checkbox"/> Any time	
RESIDENTIAL ADDRESS		
Street no.	Street name	
<input type="text"/>	<input type="text"/>	
Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>
POSTAL ADDRESS <small>(if different to residential address)</small>		
Street no./PO Box	Street name	Suburb
<input type="text"/>	<input type="text"/>	<input type="text"/>
		State
		Postcode
		<input type="text"/>
What is your current occupation?		
<input type="text"/>		
<input type="checkbox"/> Tick this box if you work in the Pharmacy industry		

2. Update your Occupational Classification

Answer these questions about your current occupation. Your answers must reflect your new position if you have recently changed your employment status.

- (a) Are the duties of your occupation limited to professional, managerial, administrative, clerical, secretarial or similar 'White Collar' nature tasks which do not involve manual work; and do you spend a minimum of 80% of your working hours in an office environment (excluding travel time from one office environment to another)? Yes No
- (b) Is the income you earn from your occupation greater than \$100,000 per annum? Yes No
- (c) Are you tertiary qualified and a member of a professional institute registered with a government body or an executive with more than 10 years industry experience? Yes No

To qualify for 'White Collar' Occupational Classification requires a 'Yes' answer to question (a).

To qualify for 'Professional' Occupational Classification requires a 'Yes' answer to questions (a), (b) and (c).

If you answer 'No' to question A, then you will have a 'Standard' Occupational Classification.

3. The duty to take reasonable care not to make a misrepresentation

Care must be taken to answer all questions we ask as part of your insurance application honestly and accurately. Otherwise, you may not be able to rely on your insurance when it's needed the most.

When you apply for life insurance, we will ask you a number of questions.

Our questions will be clear and specific. They will be about things such as your health and medical history, occupation, income, lifestyle, pastimes, and other insurance.

The answers given in response to our questions are very important. We use them to decide if we can provide cover to you and, if we can, the terms of the cover and the premium we will charge.

The duty to take reasonable care

When applying for insurance, there is a duty to take reasonable care not to make a misrepresentation.

A misrepresentation could be made if an answer is given that is false, only partially true, or that does not fairly reflect the truth. This means when answering our questions, you should respond fully, honestly and accurately.

The duty to take reasonable care not to make a misrepresentation applies any time you answer our questions as part of an initial application for insurance, an application to extend or make changes to existing insurance, or an application to reinstate insurance.

You are responsible for all answers given, even if someone assists you with your application.

We may later investigate the answers given in your application, including at the time of a claim.

Consequences of not complying with the duty

If there is a failure to comply with the duty to take reasonable care not to make a misrepresentation, it can have serious consequences for your insurance, such as those explained below:

Potential consequences	Additional explanation	Impact on claims
Your cover being avoided	This means your cover will be treated as if it never existed	Any claim that has been made will not be payable
The amount of your cover being changed	Your cover level could be reduced	If a claim has been made, a lower benefit may be payable
The terms of your cover being changed	We could, for example, add an exclusion to your cover meaning claims for certain events will not be payable	If a claim has been made for an event that is now excluded, it will not be payable

If we believe there has been a breach of the duty to take reasonable care not to make a misrepresentation, we will let you know our reasons and the information we rely on and give you an opportunity to provide an explanation.

In determining if there has been a breach of the duty, we will consider all relevant circumstances.

The rights we have if there has been a failure to comply with the duty will depend on factors such as what we would have done had a misrepresentation not been made during your application process and whether or not the misrepresentation was fraudulently made.

If we decide to take some action on your cover, we will advise you of our decision and the process to have this reviewed or make a complaint if you disagree with our decision.

Guidance for answering our questions

When answering our questions, please:

- Think carefully about each question before you answer. If you are unsure of the meaning of any question, please ask us before you respond.
- Answer every question that we ask you.
- Do not assume that we will contact your doctor for any medical information.
- Answer truthfully, accurately and completely. If you are unsure about whether you should include information, please include it or check with us.
- Review your application carefully. If someone else helped prepare your application (for example, your adviser), please check every answer (and make corrections if needed) before the application is submitted.

Other important information

Your application for cover will be treated as if you are applying for an individual 'consumer insurance contract'. For this reason, the duty to take reasonable care not to make a misrepresentation applies.

Before your cover starts, we may ask about any changes that mean you would now answer our questions differently. As any changes might require further assessment or investigation, it could save time if you let us know about any changes when they happen.

If after the cover starts, you think you may not have met your duty, please contact us immediately and we'll let you know whether it has any impact on the cover.

It's important that you understand this information and the questions we ask, so if you have any queries please contact us on **1300 361 477**.

4. Declaration

I declare the following:

- I have read and understand the Duty to take reasonable care on page 3 and understand that this duty applies any time I answer MetLife's questions as part of an application for insurance.
- My answers to the questions are true, and I have not deliberately withheld any information or material to the proposed insurance.
- I agree to be bound by the terms and conditions set out in the MetLife Group Insurance Policy.
- I have read and understood the Privacy Disclosure Statement entitled 'Privacy - Use and Disclosure of personal information'.
- I consent to the collection, use and disclosure of my personal (including sensitive) information in accordance with the terms of these documents.
- I understand that cover under a policy does not begin until acceptance by the insurer, of which I will be notified in writing.
- I have read the insurance section of the current *Product Disclosure Statement*.

Furthermore, I acknowledge that:

- I hereby declare that to the best of my knowledge all information provided on this form is true and correct and no information has been withheld.
- I understand that my requested change(s) are subject to acceptance by the Insurer (MetLife Insurance Limited ABN 75 004 274 882 AFS Licence No. 238096 (MetLife)) and that MetLife reserves the right to adjust the level of cover and/or the cost of cover, as applicable.
- I have read and acknowledged the statements as to my duty of disclosure in accordance with the Insurance Contracts Act 1984 in the *Insurance Guide* (which is part of the GuildSuper *Product Disclosure Statement (PDS)*) and understand that my duty to disclose continues after I have completed this form.
- I agree to be bound by the insurance policies between MetLife and the Trustee, which govern the terms of the insurance.
- I have read and understood the *PDS* and the *Insurance Guide*.
- I understand that my Occupational Classification affects the amount of the premium for my cover (as detailed in the *Insurance Guide*).

Signature

X

Date

Next steps

Send completed form to:
GuildSuper, GPO Box 1088, Melbourne, VIC 3001

Need help?

Please call GuildSuper on **1300 361 477** from 9am to 6pm (AEST) Monday to Friday.