

Return this completed and signed form to:
Email: crescentinsurance@mercero.com

Need help with your application?

Ph :1300 926 626

Insurance Application (Standard Cover for Personal Division Members)



Application For Insurance Cover

Please complete all sections to apply for Standard Insurance Cover.
Cover will not commence until the Fund's insurer accepts your application for insurance cover.
You can use this form to apply for Standard Cover with Crescent Wealth if you:
a) are a Member of the Personal Division, b) apply within 60 days of joining the Fund, and
c) are less than age 60 at the date you complete this form.

Section 1. Personal Details

Member number	<input type="text"/>	Gender	M <input type="checkbox"/>	F <input type="checkbox"/>	Title	<input type="text"/>
Given name	<input type="text"/>	Surname	<input type="text"/>			
Residential address	<input type="text"/>					
Suburb/town	<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>	
Email address	<input type="text"/>					
Telephone (mobile)	<input type="text"/>	Telephone (work/home)	<input type="text"/>			
Date of birth	<input type="text"/>	(DD/MM/YYYY)				
Smoker <input type="checkbox"/>	Non-Smoker <input type="checkbox"/>	Have you smoked in the past 12 months?	Yes <input type="checkbox"/>	No <input type="checkbox"/>		

Section 2. Employment Details

Are you currently working? Yes No

Current annual salary / remuneration package (gross)

Name of current employer

Employment status:

Self-employed Employee (full-time) Employee (part-time (hours per week)

Not working Domestic duties Casual

Your usual occupation (job title)

Industry of your usual occupation

Outline the duties of your usual occupation:

Section 3. Insurance Options

Please select the insurance options you require. Please refer to Appendix 1 for cover details.

1. **Death Only**
provides a lump sum should you die.
2. **Death & Total and Permanent Disability (TPD)**
provides a lump sum should you die or become totally and permanently disabled.
Sub-scale 1 Sub-scale 2

Please Note: You should read the Insurance Booklet available at <https://www.crescentwealth.com.au/members/super-pds-and-forms> for further details.

All Insurance cover is subject to acceptance by the insurer.

Section 4. Assessment Questions

- a. Are you, due to illness, accident or injury, currently absent from work, or restricted or unable to perform your full and normal duties of your usual occupation, on a full-time basis (for at least 30 hours per week) (even though your actual employment may be full-time, part-time or casual)?
Yes No
- b. Have you been diagnosed with, or do you suffer from, an illness that may cause permanent inability to work or reduces, or likely to reduce your life expectancy to less than 12 months from the date of this application?
Yes No
- c. Have you ever had an application for death, total and permanent disablement, or income protection cover declined?
Yes No
- d. Have you ever been paid or are you eligible to be paid, or have you lodged, or are you entitled to lodge, or in the process of lodging a claim for any injury, or illness through the Fund, Workers' Compensation, other Government benefits (e.g. sickness benefit, invalid pension) or any insurance policy providing total and permanent disablement, terminal illness, or income protection type cover, or accident or sickness cover?
Yes No
- e. Have you been absent from work, due to any illness, accident or injury for a total of four or more weeks in the last 12 months from the date of the application?
Yes No

If you have ticked yes to any of the questions in Section 4, you cannot use this form to apply for Standard Insurance Cover within the Crescent Wealth Superannuation Fund. Please complete an Application for Insurance (including the Personal Health Statement).

Note: Even if your insurance has been accepted by the Funds insurer, a Death or TPD benefit will not be payable for any claim which is directly or indirectly related to a Pre-Existing Condition*.

* A Pre-Existing Condition means an illness, injury or a symptom of a Member which existed at any time in the five years immediately prior to, or at the time, that Member's cover commences under the Policy and:

- a) of which the Member was aware, or a reasonable person in their position should have been aware, at the time of application for cover;
- b) in respect of which the Member should have sought advice or treatment (conventional or alternative) from a Medical Practitioner or other allied health professional (in circumstances where a reasonable person in their position would have sought such advice or treatment) at the time of application for cover; or
- c) in respect of which the Member has had a medical consultation or been prescribed medication or therapy at the time of application for cover.

Insurance is provided by TAL Life Limited ABN 70 050 109 450 AFSL 237848 to Equity Trustees Superannuation Limited ABN 50 055 641 757 AFSL 229757 as the Trustee of Crescent Wealth Superannuation Fund ABN 71 302 958 449.

Crescent Wealth Funds Management (Aust) Ltd. ABN 32 144 560 172 AFSL No: 365260 is the Fund's promoter and is licensed to deal in the Fund. Neither Crescent Wealth nor any of its products is associated or affiliated with Crescent Capital Partners.

Section 5. Duty of Disclosure

Before you enter into a life insurance contract, you have a duty to tell the insurer anything that you know, or could reasonably be expected to know, may affect its decision to insure you and on what terms.

You have this duty until the insurer agrees to insure you.

You have the same duty before you extend, vary or reinstate your insurance cover.

You do not need to tell the insurer anything that:

- o reduces the risk it insures you for; or
- o is common knowledge; or
- o the insurer knows or should know as an insurer; or
- o the insurer waives your duty to tell it about.

If you do not tell the insurer something

In exercising the following rights, the insurer may consider whether different types of cover can constitute separate contracts of life insurance. If they do, the insurer may apply the following rights separately to each type of cover.

If you do not tell the insurer anything you are required to, and the insurer would not have insured you if you had told the insurer, the insurer may avoid the contract within 3 years of entering into it.

If the insurer chooses not to avoid the contract, the insurer may, at any time, reduce the amount you have been insured for. This would be worked out using a formula that takes into account the premium that would have been payable if you had told the insurer everything you should have. However, if the contract has a surrender value, or provides cover on death, the insurer may only exercise this right within 3 years of entering into the contract.

If the insurer chooses not to avoid the contract or reduce the amount you have been insured for, the insurer may, at any time vary the contract in a way that places the insurer in the same position it would have been in if you had told the insurer everything you should have. However, this right does not apply if the contract has a surrender value or provides cover on death.

If your failure to tell the insurer is fraudulent, they may refuse to pay a claim and treat the contract as if it never existed.

Our duty of disclosure

The Trustee has a similar duty to tell the insurer anything that it knows that may affect the insurer's decision to provide you with insurance, and if the Trustee fails to do so, the consequences are comparable.

Section 6. Privacy Statement

The Crescent Wealth Superannuation Fund is administered by us along with our service provider, Mercer Outsourcing (Australia) Pty Ltd. We collect, use and disclose personal information about you in order to manage your superannuation benefits and give you information about your super. We may also use it to supply you with information about the other products and services offered by us and our related companies. If you do not wish to receive marketing material, please contact us on **1300 926 626**.

Our Privacy Policies are available to view at www.crescentwealth.com.au/privacy or you can obtain a copy by contacting us on **1300 926 626**.

If you do not provide the personal information requested, we may not be able to manage your superannuation.

We may sometimes collect information about you from third parties such as your employer, a previous super fund, your financial adviser, our related entities and publicly available sources.

We may disclose your information to various organisations in order to manage your super, including your employer, our professional advisors, insurers, our related companies which provide services or products relevant to the provision of your super, any relevant government authority that requires your personal information to be disclosed, and our other service providers used to assist with managing your super.

In managing your super your personal information will be disclosed to service providers in another country, most likely to Mercer's processing centre in India. Our Privacy Policies list all other relevant offshore locations.

Our Privacy Policies set out in more detail how we deal with your personal information and who you can talk to if you wish to access and seek correction of the information we hold about you. It also provides detail about how you may lodge a complaint about the way we have dealt with your information and how that complaint will be handled.

If you have any other queries in relation to privacy issues, you may contact us on **1300 926 626** or write to our Privacy Officer, **GPO Box 4650 Melbourne VIC 3001**.

Section 7. Declaration and Signature

- I acknowledge that I have read the notice explaining my duty of disclosure in Section 5 of this application and understand that this duty also applies until formal notification of acceptance.
- I have read and checked any answers not completed in my handwriting and to the best of my knowledge and belief, all the answers to the questions in this application and any supplementary application or personal statement which relate to me are true and correct and no information material to the assessment of this insurance has been withheld.
- My application is subject to approval by the insurer and will not commence until I receive written confirmation that my application has been accepted.
- I authorise TAL and the Trustee to contact any relevant authority to obtain confirmation of any information I have provided on this form, and to obtain copies from that authority of relevant documents. A photocopy of this authority is as effective and valid as the original.
- I have read the Privacy Statement in Section 6 of this application, and consent to my personal information (including health and sensitive information) being collected, used and disclosed by the Trustee and TAL or their external service providers/contractors as contemplated in this form, including collecting it from, or disclosing it to, any medical practitioner or third party as required to assess, verify or process this application or any claim I may make. This consent applies to any health and sensitive information that the Trustee or TAL collects on this form or future forms in relation to this insurance.
- If you have provided us with information about another person, we understand you will advise them that:
 - we collect, hold and use the personal information for the purpose set out in the Trustees privacy statement;
 - their personal information may be disclosed to a third party; and
 - they may access or correct any personal information held about them.
- I have read and understood the most current PDS and Insurance Booklet, and understand that if this Application is accepted, my increased cover will be subject to the terms and conditions of the insurance policy.

SIGNATURE _____

DATE

Age Based Cover

Age Next Birthday	Sum Insured Sub-Scale 1 \$	Sum Insured Sub-Scale 2 \$
16-20	75,000	125,000
21-25	100,000	150,000
26-30	150,000	200,000
31-35	200,000	250,000
36-40	250,000	300,000
41-45	250,000	300,000
46-50	200,000	250,000
51-55	150,000	150,000
56-60	90,000	90,000
61-65	60,000	60,000
66-70	Death only cover 30,000	Death only cover 30,000