



NEWLY-INSURED MEMBER OFFER

IMPORTANT INFORMATION

This form is for members who hold insurance in the DEFAULT DIVISION. Generally, you're in the Default Division if you joined the Fund on or after 20 May 2024, are eligible for insurance and haven't opted in to the MINING DIVISION.

If you hold insurance in the MINING DIVISION you're covered under different insurance arrangements.

If you currently have insurance, you can find the Division you're part of by logging in to your online account at mine.com.au/login or by calling us on 13 64 63.

Before you start... Fill this form out in BLOCK letters using a black or blue pen. Write 'X' to mark boxes.

Use this form if you are a newly-insured member and would like to apply for:

- an additional unit of Basic Cover - a total of three units of Death and Terminal Illness (DTI) and three units of Total and Permanent Disablement Insurance (TPD) Cover - without providing medical and lifestyle evidence.
- the Income Protection insurance special offer - the minimum monthly benefit is \$1,000 (10 units) per month and the maximum monthly benefit is \$6,000 (60 units) per month.

You must ensure that we receive your completed application form for the extra cover within 60 days of the date of your Insurance Welcome letter.

THE DUTY TO TAKE REASONABLE CARE

If you apply for life insurance, you will be treated as if you are applying for cover under an individual consumer insurance contract. The Insurer will conduct a process called underwriting. It's how it decides whether it can cover you, and if so on what terms and at what cost.

As part of underwriting, the Insurer will ask questions it needs to know the answers to. These will be about your personal circumstances, such as your health and medical history, occupation, income, lifestyle, pastimes, and current and past insurance.

The information you provide in response to those questions will be vital to the Insurer's decision. As such, when applying for life insurance you have a legal duty to take reasonable care not to make a misrepresentation to the Insurer. A misrepresentation is a false answer, an answer that is only partially true, or an answer which does not fairly reflect the truth.

This duty also applies when extending or making changes to existing insurance, and reinstating insurance.

If you do not meet your legal duty, this can have serious impacts on your insurance. Your cover could be avoided (treated as if it never existed), or its terms may be changed.

This may also result in a claim being declined or a benefit being reduced.

Whether the Insurer can exercise one of these remedies depends on a number of factors, including:

- whether reasonable care was taken not to make a misrepresentation. This depends on all of the relevant circumstances.
- what the Insurer would have done if the duty had been met - for example, whether it would have offered cover, and if so, on what terms
- whether the misrepresentation was fraudulent; and
- in some cases, how long it has been since the cover started.

Before any of these remedies are exercised, the Insurer will explain the reasons for its decision, how to respond and provide further information, and what you can do if you disagree.

Turn over to finish filling out this form...

Locked Bag 2020 Newcastle NSW 2300 | T 13 64 63 | E help@mine.com.au | mine.com.au
Insurance is provided by TAL Life Limited ABN 70 050 109 450 AFS licence 237848 under a life insurance policy issued to AUSCOAL Superannuation Pty Ltd (the Trustee) | ABN 70 003 566 989 | AFS licence 246864
MySuper authorisation number 16457520308485, as trustee of Mine Superannuation Fund



1. Your personal details

Mr Ms Mrs Miss Dr Other

Male Female

Member number

Given names

Surname

Date of birth (DD-MM-YYYY)

 - -

Residential address

Suburb

State

Postcode

Postal address. If the same as your residential address, mark 'X' in this box

Suburb

State

Postcode

Mobile phone

Home phone

Work phone

Preferred email

Other email

2. Your employment details

Are you employed

 Yes No

Name of your employer

Date you started as an employee/ contractor

 - -

Address

Suburb

State

Postcode

Daytime telephone

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3. Your Occupation Group

The following questions will help us determine how much insurance cover you will receive and how much that cover costs.

(DD-MM-YYYY)

As of - -

My occupation is:

Main duties performed:

Tell us your Occupation Group and make sure you're not paying too much for insurance

The type of work you do affects the cost of your insurance with us. Until you tell us your Occupation Group, you will be given a Group 1 - High Risk (Undeclared) Occupation Group. It's important you provide an Occupation Group as soon as possible as you could pay more for your insurance than you have to.

Occupation Group (mark 'x' in one box)	You qualify for this Group if...
<input type="checkbox"/> Group 1 - High Risk	• Your occupation is considered dangerous (see below) and you do not meet the definition of Group 2 - Non-manual or Group 3 - Professional.
<input type="checkbox"/> Group 1 - Manual	• Your occupation is not considered dangerous (see below), AND • You do not meet the definition of Group 2 Non-manual or Group 3 Professional.
<input type="checkbox"/> Group 2 - Non manual	• Your occupation is not considered dangerous (see below), AND • You work at least 75% of the time in an office environment and perform only non-manual duties.
<input type="checkbox"/> Group 3 - Professional	• Your occupation is not considered dangerous (see below for a list of occupations), AND • You tell us you work 100% of the time in an office in a sedentary capacity, earn more than \$100,000 a year (or pro-rata if not working full time), and have an accredited higher education qualification or are eligible to belong to a recognised professional body.

Dangerous occupations

To understand if your occupation is considered dangerous, please refer to the Occupation Group descriptions above together with the following broad occupation categories:

- Automotive and Engineering Trades Workers
- Construction and Mining Labourers
- Construction Trades Workers
- Design, Engineering, Science and Transport Professionals
- Electrotechnology and Telecommunications Trades Workers
- Factory Process Workers
- Health and Welfare Support Workers
- Machinery and Stationary Plant Operators
- Mobile Plant Operators
- Other Labourers
- Protective Service Workers
- Road and Rail Drivers
- Store persons

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4. Additional unit of Basic DTI and TPD Cover

I confirm that I am employed and wish to increase my insurance cover (including two units each of existing Basic DTI Cover and TPD Cover) as follows (please tick one box only):

Three units of Basic DTI Cover and three units of TPD Cover, ie. you'll increase your existing Basic DTI Cover and Basic TPD Cover by one unit each.

OR

Three units of Basic DTI Cover and two units of TPD Cover, ie. you'll only be increasing your Basic DTI Cover by one unit.

Note: You are unable to hold more TPD units than DTI units. If you increase your cover, the additional unit/s of cover is subject to New Events Cover, meaning you will only be covered for new illnesses or injuries until you have been in Active Employment for 30 consecutive days after the date insurance cover starts. For the full terms and conditions for New Events Cover and Active Employment, please refer to the Product Disclosure Statement (PDS) and **Insurance Guide - Default Division** available on our website.

5. Income Protection insurance

You can apply for Income Protection insurance up to a maximum monthly benefit of \$6,000. The cover you receive will be New Events Cover, meaning you are only covered for new illnesses or injuries that occur after the date cover commences. If this application is accepted, New Events Cover will apply from the date cover commences for the Income Protection insurance that is provided under this Income Protection offer and will end on the earliest of the day:

- the insurer agrees to remove the New Events Cover after you have gone through underwriting, or
- after you have been in Active Employment for 30 consecutive days after the cover that commences for Income Protection insurance has remained continuously in force for 12 months. For the full terms and conditions for New Events Cover and Active Employment, please refer to the Product Disclosure Statement (PDS) and **Insurance Guide - Default Division** available on our website.

The monthly benefit I would like to be covered for is: \$, 0 0 (choose from \$1,000 up to \$6,000 rounded to the nearest \$100). If you'd like to apply for an amount greater than \$6,000, completed the **Application for Voluntary Cover** form.

Note: Subject to meeting claim requirements, the maximum monthly benefit is the lower of 86.5% of your pre-disability income or your accepted monthly benefit amount.

Waiting period (tick one box only): 30 days 60 days 90 days

Read the following questions and tick either Yes or No

You must answer all of the following questions by ticking either Yes or No:	YES	NO
1. Are you: <ul style="list-style-type: none">• unemployed; or• unable to do all the duties of your usual occupation without any limitation on a full-time basis (at least 35 hours per week), even if you are working full-time, part-time or casually?	<input type="checkbox"/>	<input type="checkbox"/>
2. Have you: <ul style="list-style-type: none">• in the last 12 months, been away from work for more than 10 working days in a row because you were ill or injured; or• been advised by or discussed with your medical practitioner that because of an illness or injury you'll need to take at least 10 working days in a row off work (regardless if diagnosed) in the next 12 months?	<input type="checkbox"/>	<input type="checkbox"/>
3. Have you been diagnosed with an illness or injury that reduces your life expectancy to less than 24 months?	<input type="checkbox"/>	<input type="checkbox"/>
4. Have you ever been declined DTI, TPD or Income Protection insurance, offered insurance cover on non-standard terms (e.g. premium loading and/or exclusion) whether accepted by you or not, or been excluded from insurance cover for a specific medical condition or injury?:	<input type="checkbox"/>	<input type="checkbox"/>
5. Have you ever made or satisfied the requirements to make a claim for an injury or illness either in Australia or overseas through: <ul style="list-style-type: none">• Mine Super or another super fund;• Workers' Compensation;• Government benefits (such as sickness benefit, invalid pension); or• an insurance policy that provides Terminal Illness, Total and Permanent Disablement cover, or Income Protection (including accident or illness) insurance?	<input type="checkbox"/>	<input type="checkbox"/>

* Note: If you answered 'Yes' to any of these questions you are not eligible to apply for Income Protection insurance using this form under the newly-insured member offer. You may still apply for cover or increase your existing cover by applying for Voluntary Cover, which will be subject to underwriting and acceptance by our insurer. For more information go to mine.com.au/insurance.

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6. Your declaration

I declare that I:

- have read and understand my duty to take reasonable care and I am aware of the consequences of non-disclosure.
- have read and carefully considered the questions in this form and all the answers provided are true and correct.
- am aware the acceptance of this cover is subject to this form being received within 60 days of the date of my Insurance Welcome letter confirming the commencement of my insurance cover with the Fund.
- am aware of the terms and conditions for insurance cover (including defined terms) as summarised in this form and the Fund's Product Disclosure Statement (PDS) and **Insurance Guide – Default Division** and acknowledge that the terms and conditions apply to me.
- consent to the collection, use and disclosure of my personal information in accordance with the Mine Super privacy policy outlined in the Mine Super PDS and our insurer's privacy policy at tal.com.au/privacy-policy or available on request.
- Legislation requires all members, except those in the Group 1 - High Risk or Group 1- High Risk (Undeclared) Occupation Groups, to elect for insurance cover when their account balance is below \$6,000 and/or they are aged under 25. By choosing to proceed with this application, you are electing to:
 - retain your existing insurance cover (if you already have cover); or
 - be provided the insurance cover specified in this application (if you don't already have cover), where your account balance is below \$6,000 and/or you are aged under 25.

Your signature

Date (DD-MM-YYYY)

 - - 

When complete return this form to us by:

Post Mine Super
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