

# Office Worker occupation declaration

Complete this form in black ink with a ballpoint pen using BLOCK letters | Any request will be invalid if not signed and dated.  
Please mail this form to: Australian Food Super, Locked Bag 5390, Parramatta NSW 2124 | Member Hotline: 1800 808 614



## DUTY TO TAKE REASONABLE CARE - IMPORTANT INFORMATION BEFORE YOU BEGIN THIS APPLICATION

You have a duty to take reasonable care not to make a misrepresentation when applying for insurance. If you do not comply with your duty to take reasonable care, AIA Australia Limited or TAL Life Limited, the insurers, may avoid or vary your cover. This means you may not be able to claim your benefit or the amount you will receive may be reduced. Before answering the questions contained in this application form it is important that you carefully read the Duty to Take Reasonable Care section on page 2 of this form which explains your duty, including the effect if you don't comply.

### 1. MEMBER DETAILS

Australian Food Super member no:

(This information will be used to update our records where necessary.)

Mr/Mrs/Ms/Miss/Other

Surname

Given Names

Date of Birth (ddmmyyyy)

Telephone (daytime)

Mobile

Email

Employer Name

### RESIDENTIAL ADDRESS

Street Number

Street Name

Suburb/Town

State

Postcode

### POSTAL ADDRESS (if different from residential address)

Street Number / PO Box

Street Name

Suburb/Town

State

Postcode

### 2. ELIGIBILITY QUESTIONS

Please complete the questions below to determine if you qualify as an Office Worker. If so, you will receive higher Life insurance and TPD cover at no extra cost and be entitled to a reduced premium for Income Protection.

- a) Are you able to carry out the identifiable duties of your current and normal occupation on a full-time basis without restriction due to illness or injury (even if you are not currently working on a full-time basis)?

☐ Yes☐ No

Full-time basis is considered to be at least 30 hours per week.

- b) Are the duties of your occupation limited to professional, managerial, administrative, clerical, secretarial or similar 'office worker' tasks which do not involve manual work and are undertaken entirely (or at least 75%) within an office environment (excluding travel time from one office environment to another)?

☐ Yes☐ No

If 'Yes' to questions a and b, you qualify as an Office Worker.

Members who do not qualify as Office Workers will maintain their existing level of cover or premium rates.

### 3. DECLARATION AND SIGNATURE

By signing this form I am making the following statements:

- I have fully read and understood this form including the Important information.
- I declare that the answers to the questions in this application are true and correct.
- I have read and understood the Duty to Take Reasonable Care below and I have not withheld any information that may affect the insurer's decision as to whether or not to accept my application for cover.
- I have read the Privacy section below. I understand that Australian Food Super and its insurer may undertake appropriate enquiry and investigation to verify the answers I have provided.
- I understand that the increase in my insurance cover provided per unit will not commence until this declaration has been received and accepted by Australian Food Super.

Signature

Date



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### IMPORTANT INFORMATION

#### YOUR DUTY TO TAKE REASONABLE CARE

When you apply for insurance through Australian Food Super, the insurer conducts a process called underwriting. It's how they decide whether they can cover you, and if so, on what terms and at what cost.

You may be asked questions the insurer 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 these questions is vital to the insurer's decision.

When answering questions as part of your application, 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 applies to initial applications for insurance cover and also applies when increasing or making changes to existing insurance, and to reinstating insurance.

##### If you do not meet your duty

If you do not meet your legal duty, this can have serious impacts on your insurance. There are different remedies that may be available to the insurer. These are set out in the Insurance Contracts Act 1984 (Cth). These are intended to put the insurer in the position they would have been in if the duty had been met. Your cover could be avoided (treated as if it never existed), or its terms may be varied. This may also result in a claim being declined or a benefit being reduced. Please note that there may be circumstances where the insurer later investigates whether the information given to them was true. For example, they may do this when a claim is made. Before the insurer exercises any of these remedies, they will explain their reasons and what you can do if you disagree.

##### Guidance for answering questions

You are responsible for the information provided when you apply for insurance. When answering the questions, please:

- think carefully about each question before you answer. If you are unsure of the meaning of any question, please ask us or the insurer before you respond.
- answer every question.
- answer truthfully, accurately and completely. If you are unsure about whether you should include information, please include it.
- review your application carefully before it is submitted. If someone else helped prepare your application (for example, your adviser), please check every answer (and if necessary, make any corrections) before the application is submitted.

#### Changes before your cover starts

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

##### If you need help

It's important that you understand this information and the questions we and the insurer ask. Ask us, the insurer, or a person you trust, such as your adviser, for help if you have difficulty understanding the process of applying for insurance or answering the questions. If you're having difficulty due to a disability, understanding English or for any other reason, we're here to help and can provide additional support for anyone who might need it.

##### Notifying the insurer

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

#### YOUR PRIVACY

Personal information is protected by the Australian Food Super Privacy Policy. The Australian Food Super Privacy Policy outlines the approach that Australian Meat Industry Superannuation Pty Limited, takes to the personal information which is collected in the course of work. Australian Food Super is bound by the National Privacy Principles contained in the Privacy Act 1988 (and subsequent amendments). For more information, please contact Australian Food Super or obtain a copy of the Privacy Policy from [ausfoodsuper.com.au](http://ausfoodsuper.com.au).

#### CONTACT AUSTRALIAN FOOD SUPER

Telephone: 1800 808 614  
Facsimile: 1300 855 378  
Website: [ausfoodsuper.com.au](http://ausfoodsuper.com.au)

Australian Food Super products are issued by Australian Meat Industry Superannuation Pty Limited (Trustee) ABN:25 002 981 919 RSE Licence: L0000895  
AFSL: 238829 as Trustee for Australian Meat Industry Superannuation Trust (the Fund) ABN: 28 342 064 803 Registration No. R1001778.



**Member Hotline**  
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**ausfoodsuper.com.au**



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**Parramatta NSW 2124**