Bendigo SmartStart Super[®] Insurance Variation Form

Bendigo Superannuation

Use this form to reduce your insurance cover in Bendigo SmartStart Super (the Plan). For more information about available insurance cover refer to the current Bendigo SmartStart Super Insurance Guide. Your request to reduce your cover will be effective from the date we receive your request.

To increase or apply for Tailored Cover you will need to complete the Insurance Application and Personal Health Statement Form available at bendigobank.com.au/super.

Step 1 Member details

Member number					
Title	Sex Female	Male			
Surname					
Given name(s)					
Date of birth / /	(dd/mm/yyyy)				
Email Address					
Postal Address					
Town/Suburb		State	Postcode		
Your preferred contact number					

Step 2 Variation of existing cover

a) Default Cover

Complete this section to reduce Default cover.

I wish to reduce the amount of Default Cover I have in the Plan. I understand that if I reduce my insurance and wish to increase my insurance in the future I will need to go through the full underwriting process and provide the usual evidence of health requirements. I wish to retain the following units of Default cover in the Plan:

Death Only		Or	Death a	nd TPD
	1 unit			1 unit
	2 units			2 units
	3 units			3 units
	4 units			4 units
	5 units			5 units

b) Tailored Cover

Complete this section to *reduce* the amount of Fixed Death Only, Fixed Death and Total and Permanent Disablement (TPD) and/or Income Protection cover you have in the Plan.

I wish to reduce the amount of Tailored Cover I have in the Plan as follows:

Reduce my Death and/or TPD cover to the following amount(s):

Nominated cover					Nominated prem	nium			
Death sum insured	\$,	•	OR	Note: Sum insured will decrease with age; premium remains fix				
TPD sum insured	\$	7	•		Type of cover	Death only		Death and TPD	
					Nominated premiu (e.g. \$2.00 per we	•	\$		
Note: Death and TPD cover must be in multiples of \$1,000. Please note that you must have Death cover to have TPD cover and the									

Note: Death and TPD cover must be in multiples of \$1,000. Please note that you must have Death cover to have TPD cover and the level of TPD cover cannot exceed the level of Death cover.

Reduce my Income Protection cover as follows:	
Retain an Annual benefit (excluding superannuatio	n contribution benefit) of \$,
Reduce my superannuation contribution benefit to	. % (If applicable)
Increase the waiting period from days to	days (Note: this must be an increase i.e. 30 days to 90 days)

I understand that if I reduce my insurance and wish to increase my insurance in the future I will need to go through the full underwriting process and provide the usual evidence of health requirements.

Step 3 Insurance opt-in election

We are required to cancel your insurance cover if no contributions have been received into your account for a period of 16 continuous months (inactive), unless you instruct us otherwise in writing.

I elect to maintain insurance cover held in respect of this account in the event my account becomes inactive.

I understand that insurance premiums for the insurance cover I have elected to retain will continue being charged to my account and I can request to cancel my insurance at any time. My cover will continue to be subject to the existing insurance terms and conditions.

Step 4 Member declaration

- I acknowledge that I have read the current Bendigo SmartStart Super Product Disclosure Statement (PDS) and Bendigo SmartStart Super Insurance Guide.
- I acknowledge and agree that the information contained in the PDS is a summary of the main terms and conditions of the insurance offered under the Plan and I agree that I can access the full terms and conditions governing the insurance arrangements by contacting Bendigo Superannuation's Client Services Team on 1800 033 426.
- I have read and understood Bendigo and Adelaide Bank Group's Privacy Policy which is available at <u>www.bendigobank.com.au/privacy-policy</u> and agree that Bendigo Superannuation Pty Ltd (Bendigo Super) and Bendigo and Adelaide Bank Group may collect, use and disclose my personal information for the purposes of administering my account in accordance with the law.

Date				
	/	/		

Please send completed form to:

Signature

Bendigo SmartStart Super GPO Box 264 Melbourne VIC 3001 or Email: <u>superannuation@bendigobank.com.au</u>

Insurance Variation or Cancellation Form Page 2 of 2 OA636 (11/23)