

Funeral Plan

Policy Document

Rewarding experience



This product and policy document are issued by Suncorp Life & Superannuation Limited ABN 87 073 979 530 AFSL 229880 under the brand, Apia.

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1.0. Important Information

When reading this *policy* document, please refer to the Glossary on pages 15 and 16 which shows the meaning of various terms italicised throughout.

For details on How to contact us, please refer to page 13.

This *policy* document, together with the *schedule*, constitutes *your* insurance *policy* and is evidence of *your* insurance with *us*. You should read this document in conjunction with the *schedule* because together they contain important information relating to your *policy*. Please keep this *policy* document and *schedule* in a safe place. We have issued this *policy* to *you* based on the information provided by *you*, to *us* on *your* application for insurance.

This *policy* document and *your schedule* are issued by Suncorp Life & Superannuation Limited ABN 87 073 979 530, AFSL 229880 (Suncorp). Australian Pensioners Insurance Agency Pty Limited ABN 14 099 650 996 (Apia) does not provide any financial product advice in relation to Apia Funeral Plan. Apia does not issue, guarantee or underwrite Apia Funeral Plan or any *policy* issued in relation to it.

Apia Funeral Plan is not a savings plan. The primary purpose is to provide a benefit under the terms and conditions of the *policy* in the event of a claimable event.

If there is only one *insured person* listed on the *schedule*, you are the sole owner of the *policy*. If there are two *insured persons* listed on the *schedule*, both *insured persons* will be joint *policy owners*.

The *insured persons* listed on the *schedule* are covered for the insured events under your *policy* 24 hours a day, 365 days a year anywhere in the world. If *premiums* payable under this *policy* are paid (please refer to Your premium on page 9), *your policy* will continue until your 120th birthday, unless *your policy* stops earlier (please refer to When does cover start and stop? on page 5).

From time to time we may also make improvements to *your policy* with no resulting increase to *your premium*. If we make a change to *your policy* which, in your opinion was adverse to *you*, we will, if *you* make a claim, assess *your* claim on the terms of the *policy* in existence before the change took place.

2.0. Cooling off period

You have 30 days from the *policy commencement date* to check that this insurance meets your needs. This is the cooling off period.

If *you* wish, you can cancel *your policy* during this cooling off period by notifying *us* in writing or verbally. If *you* notify *us* verbally, *you* will need to answer certain questions to confirm *your* identity. Provided *you* have not made a claim, *you* will receive a refund in full of any money *you* have paid.

3.0. When does cover start and stop?

Your *policy* will start on the *policy commencement date* shown on your *schedule*, subject to us having received correct payment details.

Cover for each *insured person* will stop on the *insured person's* 120th birthday. It will also stop on the earlier of the date the Funeral Benefit is paid or the date the *insured person* dies.

If there is more than one *insured person* listed on the *schedule* and cover stops for one of them because they have reached their 120th birthday or they have had a Funeral Benefit paid, the *premium* will be adjusted to cover the remaining *insured person* only.

Cover will also stop under this *policy* on the earlier of the following events:

- you ask us to cancel your *policy* (please note: if there is more than one *policy owner*, each *policy owner* must make the request); and
- the date your *policy* is cancelled due to non-payment of outstanding *premiums*.

We will not consider any claim, unless the event giving rise to the claim occurred while your *policy* was still in force. We may also cancel this *policy* on any grounds permitted under relevant law by telling you in writing.

4.0. Benefits under this policy

This section outlines the benefits payable under *your* Apia Funeral Plan *policy*. You are entitled to all the benefits under Apia Funeral Plan.

Payment of a benefit is subject to *our* acceptance of *your* claim (please refer to Claims on page 11). The most we will pay under this Apia Funeral Plan *policy* is the *sum insured*. The maximum amount we will pay across all Funeral Plan policies issued by *us* for the same *insured person* is \$30,000 (plus indexation – please refer to Automatic Indexation Benefit on page 7).

If *your policy* is jointly owned, any benefits payable under this *policy* will be paid to the surviving *policy owner*. If *you* are the last surviving *policy owner*, any benefit payable on *your* death will be paid to the *legal personal representative* of *your* Estate.

If *your policy* is a single life *policy* any benefits payable on *your* death will be paid to *your nominated beneficiary* (if applicable), otherwise to the *legal personal representative* of *your* Estate.

If *you* have made a valid nomination, which we will confirm with *you* in writing, we will pay a benefit payable as a consequence of *your* death in accordance with *your* nomination.

If *you* have made a valid nomination and that nominee cannot be located or they died before *you*, the benefit otherwise payable to them will be payable to the *legal personal representative* of *your* Estate.

If a *nominated beneficiary* is a minor, the payment will be made to the minor's legal guardian, a trust for the benefit of the minor or to any person we are authorised to pay under the relevant law.

If *you* change *your* mind *you* can alter *your* nomination at any stage, however a nomination is not effective until it is confirmed in writing by *us*.

4.1 Funeral Benefit

If *you* die during the first 12 months after *your policy commencement date*, as a result of an *accident* that occurs after cover commences, we will pay *your sum insured* as a lump sum payment. If *your* death occurs after the first 12 months of *your policy*, we will pay *your sum insured* as a lump sum if *you* die as a result of any cause.

If you die during the first 12 months after *your policy commencement date* as a result of:

- an *accident* that occurred prior to the *policy commencement date*;
- a *sickness*; or
- an intentional self-inflicted act

and no benefit is payable, we will refund all *premiums* paid under *your policy*.

We must receive notice of any claim for payment of the Funeral Benefit as soon as reasonably possible.

The Funeral Benefit stops on *your* 120th birthday, unless cover stops earlier (please refer to When does cover start and stop? on page 5).

4.2 Premium Pause Benefit

If you are unable to pay *your premiums*, you can contact us and request *your premium* be paused for up to 3 months over the life of the *policy*. To activate the Premium Pause Benefit, you must have paid *premiums* for the previous 12 consecutive months and *your policy* must have no outstanding *premium* payable at the time of *your* request.

During the period *your premiums* are paused, *your policy* will only cover you in the event you die as a result of an *accident*. After the *premium* pause has ended and you have started paying *your premiums*, *your* Funeral Benefit will again become payable in the event of *your* death as a result of any cause.

The Premium Pause Benefit stops on *your* 120th birthday, unless cover stops earlier (please refer to When does cover start and stop? on page 5).

4.3 Automatic Indexation Benefit

We will automatically increase *your sum insured* on each *policy anniversary* by the *indexation factor* to a maximum of 10%. We will recalculate *your premium* each year to reflect the increase in the *sum insured* in line with the *indexation factor* (and the *insured persons' ages*) and we will advise you of *your new premium* prior to *your policy anniversary* each year.

You can ask us not to apply the *indexation factor* to *your sum insured*. If you request this, *your sum insured* will not change.

The Automatic Indexation Benefit stops on *your* 120th birthday, unless cover stops earlier (please refer to When does cover start and stop? on page 5).

4.4 Premium Freeze Benefit

You can ask us not to increase the cost of *your premium*, in which case *your future premiums* will remain the same as the amount you froze them at resulting in *your sum insured* decreasing as you get older. We will advise you of *your reduced sum insured* prior to each *policy anniversary*. You can ask us to end the *premium freeze* at any time by contacting us.

The Premium Freeze Benefit stops on *your 85th birthday*, unless cover stops earlier (please refer to *When does cover start and stop?* on page 5).

4.5 10% Cash Back Benefit

If you have held this *policy* continuously for 3 years, we will refund 10% of the *premiums* you have paid during the previous 3 years. If you continue to hold the *policy*, we will do this every 3 years after *your policy commencement date*, for example on your 3rd, 6th, 9th etc *policy anniversary*.

For example, if you have paid us \$1,000 in *premiums* in the first 3 years since *your policy commencement date*, we will refund \$100. If you pay \$1,500 in the next 3 years, we will refund \$150 after the 6th anniversary of *your policy commencement date*.

5.0. Your premium

Your premium pays for *your* cover, government fees and charges and administration costs.

The *premium* you pay is determined by multiplying *your sum insured* by the applicable *premium* rate. When you apply, *your premium* rate is based on the following factors: the *insured person's* current age and gender. Premiums payable during the subsequent years will be based on your age at the time of your policy anniversary, your age at the time of policy commencement and gender, multiplied by your sum insured. Discounts may also be applied. The *premium* stated in the *schedule* applies during the first 12 months after *your policy commencement date*.

Your premium rate is guaranteed not to change for 12 months from *your policy commencement date*. After this period, *your premium* will generally increase each year with age and increases in the *sum insured*, for example as a result of the Automatic Indexation Benefit (explained on page 7). We will send you a notice prior to each *policy anniversary* confirming *your premium*. We can also change the *premium* rate for all *policies* of the same kind at any time. In the event we apply an increase to *policies* of the same kind, we will provide you with at least 30 days' notice and you will be charged the new *premium* from *your next policy anniversary*.

Premiums received are paid into our No. 1 statutory fund. A *policy* issued in relation to Apia Funeral Plan is not eligible to participate in any surplus arising in our statutory fund.

5.1 Paying your premium

Your premiums are payable from the bank account or credit card you nominate. *Your premium* and the frequency (fortnightly, monthly or annually) you have chosen to pay *your premium* are detailed on *your schedule*.

You have up to 14 days (or 30 days if you pay monthly) from the date each *premium* is due to pay *your premiums*. This period is called the days of grace. If you are entitled to claim within the days of grace, we will pay the benefit if otherwise payable on the terms explained in this *policy* document, less the amount of any unpaid *premium*.

If *your premium* remains unpaid during the days of grace, we will send a notice to you specifying the date we will cancel the *policy* without any refund of *premium*. If the *premium* remains unpaid,

we will also provide written notice of cancellation to *you* at the address last advised to *us*. We will not be liable for any claims after the date of cancellation.

If we cancel *your policy* due to non-payment of *premiums*, *you* can complete an Application for Reinstatement and return it to *us* for consideration within 3 months of the *policy's* cancellation date. In order for *us* to process *your* Application for Reinstatement, all outstanding *premiums* must be paid by *you*. If we accept your reinstatement, the same conditions will apply to *your policy* that are explained under Funeral Benefit (please refer to section 4.1).

6.0. Claims

If entitled to make a claim, the surviving *policy owner, nominated beneficiary or legal personal representative* can contact us on 1800 608 549 and we will then send a claim pack that needs to be completed to *our* satisfaction and returned to us.

If *you* have made a valid nomination, which we will confirm with *you* in writing, we will pay any benefit payable as a consequence of *your* death in accordance with *your* nomination.

We can ask for information we might reasonably need and obtain medical and other records to ensure that the terms and conditions of the *policy* as set out in this *policy* document are satisfied.

To make a claim under the Funeral Benefit, the surviving *policy owner, nominated beneficiary or legal personal representative* is required to notify *us* as soon as reasonably possible after the date of *your* death. The following information will be required:

- claim form completed by the surviving *policy owner, legal personal representative or nominated beneficiary*;
- certified copy of the death certificate or other satisfactory evidence;
- certified proof of identity (birth certificate, drivers licence or passport); and
- if there is no joint *policy owner* and *you* did not make a valid beneficiary nomination, a certified copy of *your* Will.

Payment of a benefit under this *policy* will be subject to relevant legislative requirements being adhered to and depending upon individual circumstances, additional information may be required by *us*.

The surviving *policy owner, nominated beneficiary or legal personal representative* will be required to pay for the cost of satisfying these claim requirements, unless we notify *you* otherwise.

To assess *your* claim promptly, we need to ensure the information provided to *us* at the time of application is correct, for example *your* age. If we have received any false information, we may refuse the claim, adjust the *premiums* paid by *you* or the benefit payable by *us*.

We may refuse the claim if we are disadvantaged by any delay in notifying *us* of a claim.

All payments are made as a lump sum in Australian currency.

We will not consider any claim, unless the event giving rise to the claim occurred while *your* policy was still in force.

7.0. How to contact us

7.1 Administration queries and changes

If *you* have any questions about *your policy* or *you* would like to make any changes to *your policy*, including a change to *your* address or to *your* payment type, please contact us (please refer to the back page for contact details). A change to this *policy* will only apply if we confirm the change in writing. *You* can apply to increase or decrease *your sum insured* on an existing *policy* by contacting us. *You* can apply to increase *your* cover up to the age of 75.

During the life of this *policy*, *you* cannot assign ownership of this *policy* to any other person or party. However, if it is a joint *policy*, *you* can convert to single life *policies* and each *insured person* will be the *policy owner*. If *you* need to do this, please contact us.

If *you* wish to apply for an increase to *your* existing *sum insured*, the maximum *sum insured* limits will apply (please refer to Benefits under this *policy* on page 6). With respect to any increased amount, if *you* die as a result of:

- an *accident* that occurs prior to the increase;
- a *sickness*; or
- an intentional self-inflicted act

during the first 12 months after we accept *your* application for increase, no benefit will be payable, however we will refund all *premiums* paid with respect to the increased amount.

You will receive an updated *schedule* showing *your* updated *policy* information.

7.2 Complaints

If *you* have a complaint about this product or *our* services, *you* can contact us (please refer to the back page for contact details)

If *you* are dissatisfied with *our* decision or the way we handled *your* complaint, *you* can also contact the Financial Ombudsman Service Limited (ABN 67 131 124 448) (FOS). FOS is an external dispute resolution scheme that provides free services to customers, and is a totally independent and impartial body who will deal with *your* complaint directly, or follow up the matter on *your* behalf in accordance with its terms of reference.

You can contact FOS by:

- phoning 1300 780 808 (for the cost of a local call*) or 03 9613 7366
- faxing 03 9613 6399
- emailing info@fos.org.au
- writing to
Financial Ombudsman Service Limited
GPO Box 3
MELBOURNE VIC 3001
- visiting www.fos.org.au

*A higher charge may apply for public telephones and mobile phones.

8.0. Glossary

Where any words appear in this *policy* document, whether the first letter is in upper or lower case, their meanings are listed below.

Where applicable, with respect to the definitions, singular includes the plural and vice versa.

accident: means an event which solely and directly causes *injury* as a result of violent, external and visible means.

expiry date: means the date *your policy* ends as stated on the *schedule*.

immediate family members: means *your partner*, parents, siblings or children.

indexation factor: means the percentage change in the consumer price index (CPI) which is the weighted average of the 8 Australian capital cities combined as published by the Australian Bureau of Statistics or any body which succeeds it and in respect of the 12 month period finishing on 30 September. The *indexation factor* will be applied from 1 March the following year. If the CPI is not published by this date, the *indexation factor* will be calculated upon a retail price index which we consider most nearly replaces it. If the percentage change in CPI, or any substitute for it, is negative, the *indexation factor* will be taken as zero.

injury: means physical damage to *your* body which occurs while cover for the applicable benefit was in force under this *policy*.

insured person: means the person(s) who has been accepted by *us* and is listed on the *schedule* as the *insured person(s)* under this *policy*.

legal personal representative: means the executor or administrator of *your* Estate or any other person(s) who is authorised by law to administer and distribute *your* Estate.

nominated beneficiary: means the person *you* nominate to receive the Funeral Benefit under *your policy* that *we* confirm in writing.

partner: means *your* spouse or a person living with *you* as *your* spouse on a domestic basis in good faith. He or she can be the same sex as *you*.

policy: means *your* Apia Funeral Plan insurance, which consists of this *policy* document, the *schedule* and information provided in *your* application.

policy anniversary: means anniversary of *your policy* commencement date.

policy commencement date: means the date we accept *your* application for cover as shown on the *schedule*.

policy owner: means the person(s) listed on the *schedule* as the owner(s) of this *policy*.

premium: means amount *you* pay *us* for the insurance.

schedule: means a document issued by *us*, which shows important information about *your policy*, including *your policy* number, *premiums* and *policy commencement date*.

sickness: means an illness or disease *you* suffer while cover for the applicable benefit was in force under this *policy*.

sum insured: means the amount *you* apply for and we accept as varied (for example if you apply for a decrease or through increases under the Automatic Indexation Benefit) by agreement.

we, us and our: means Suncorp Life & Superannuation Limited, ABN 87 073 979 530 AFSL 229880.

you and **your:** means the *policy owner(s)* who is also the *insured person(s)* who has been accepted by *us* and is shown on the *schedule*.

Notes

How to contact us

Call us on **1800 608 549**

Fax us on **1300 850 387**

Email us on **apialife@apia.com.au**

Find us on the web at **www.apia.com.au/funeralplan**

Write to us at **Apia Life Customer Service**
GPO Box 3950
Sydney NSW 2001

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