

QBE Insurance (Australia) Limited

Mortgage Protection Insurance

Product Disclosure Statement and Policy Wording

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Introduction

In an uncertain world, it's good to know there's someone committed to protecting you. In this booklet you'll find our commitment described in detail. By taking the time to read these pages you'll know exactly what you're covered for, what you can expect from us and what we expect of you.

You'll also learn what to do if you need to make a claim, so we promise it'll be time well spent.

About this booklet

There are two parts to this booklet. The first part is Important Information about this Policy including information about how we'll protect your privacy and how to make a complaint or access our dispute resolution service.

The second part is your Policy Wording which sets out the detailed terms, conditions and exclusions of the Policy.

Because we don't know your own personal circumstances, you should treat any advice in this booklet as purely general in nature. It doesn't consider your objectives, financial situation or needs. You should carefully consider the information provided with regard to your personal circumstances to decide if it's right for you.

The PDS is issued by both QBE Insurance (Australia) Limited (QBE) and Integrity Life Australia Limited (Integrity Life). QBE and Integrity Life take full responsibility for the contents of the whole of this PDS.

The insurer of Disability and Involuntary Unemployment covers: QBE Insurance (Australia) Ltd ABN 78 003 191 035 - AFSL 239545.

The insurer of Life and Trauma covers: Integrity Life Australia Ltd ABN 83 089 981 073 - AFSL 245492 is the insurer of Life and Trauma covers.

Updating our PDS

This booklet is also a Product Disclosure Statement (PDS). Other documents you receive may comprise the PDS. You'll know when this happens because it'll say so in the document.

We may need to update information in this PDS. If we need to do this, we'll either send you a new PDS or a supplementary PDS. You can also get a copy of these simply by calling us.

For more information

Please take the time to read through this booklet and if you have any questions, need more information or to confirm a transaction, please contact:

Your financial services provider; or

QBE Insurance (Australia) Limited PO Box 219 PARRAMATTA NSW 2124

Email: insurancecentre@qbe.com

Phone: 1300 133 024

About QBE Australia

QBE Insurance (Australia) Limited ABN 78 003 191 035 AFSL 239545 is a member of the QBE Insurance Group Limited ABN 28 008 485 014 (ASX: QBE). QBE Insurance Group is Australia's largest international general insurance and reinsurance group, and one of the largest insurers and reinsurers in the world.

QBE Insurance (Australia) Limited is the insurer of Disability and Involuntary Unemployment covers.

About Integrity Life

Integrity Life Australia Limited (Integrity Life) ABN 83 089 981 073 AFSL 245492 aims to reinvigorate life insurance protection for Australians through championing respect, transparency, simplicity and integrity in all our customers and partner interactions and operations.

Integrity Life is the insurer of Life and Trauma covers,

You can contact Integrity Life at;

Integrity Life Australia Limited PO Box R1741 Royal Exchange NSW 1225

Email: hello@integritylife.com.au

Phone: 1300 543 366

Important Information

In this first part of the booklet we explain important information about this Policy including how we'll protect your privacy and how to make a complaint or access our dispute resolution service.

Duty of disclosure

Before you enter into an eligible contract of insurance with us, you have a duty of disclosure under the Insurance Contracts Act 1984 (Cth).

We may ask you questions that are relevant to our decision to insure you and on what terms. If we do, you must tell us anything that you know and that a reasonable person in the circumstances would include in their answer.

You have this duty until we agree to insure you.

If after submitting your application form, but before we've agreed to extend cover, you become aware of any health condition that would be expected to reasonably impact whether or not your Life cover would be accepted or subject to terms, you have a duty to notify your financial services representative and the Life insurer.

If you do not tell us something

If you do not tell us anything you are required to, we may cancel your contract or reduce the amount we will pay you if you make a claim, or both.

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

The General Insurance Code of Practice

QBE Australia is a signatory to the General Insurance Code of Practice.

The General Insurance Code of Practice aims to:

- · Commit us to high standards of service
- Promote better, more informed relations between us and you
- Maintain and promote trust and confidence in the general insurance industry
- Provide fair and effective mechanisms for the resolution of complaints and disputes between us and you
- Promote continuous improvement of the general insurance industry through education and training.

The Life Insurance Code of Practice

Integrity Life is a signatory to the Financial Services Council's Life Insurance Code of Practice. This means that we will comply with all our obligations as outlined within the Life Insurance Code of Practice as we interact with you. For more information, please refer to www.fsc.org.au/policy/life-insurance/code-of-practice/life-code-of-practice.

Privacy

This privacy policy covers both QBE and Integrity Life.

We'll collect personal information when you deal with either of us, our agents, other companies in the QBE Group or other companies in the Integrity Group, or suppliers acting on our behalf. We will also share the information you supply to either of us with each other. We use your personal information so we can do business with you, which includes issuing and administering our products and services and processing claims.

QBE may send your information overseas. Locations can vary but includes, the Philippines, India, Ireland, the UK, the US, China and countries within the European Union.

Each of our privacy policies describes in detail where and from whom we collect personal information, as well as where we store it and the full list of ways we could use it

For further information:

QBE (general insurance provider) – You can view QBE's Privacy Policy at www.qbe.com.au/privacy, or obtain a copy by phoning QBE on 133 723 or request it from our authorised representatives or service providers.

Integrity Life (Life insurance provider) – You can view Integrity Life's Privacy Policy at www.integritylife.com.au/privacy-policy, or you can obtain a copy by phoning Integrity Life on 1300 LIFENOW (1300 543 366).

To contact the Privacy Officer at:

QBE - call 1300 650 503, email privacy@qbe.com.au, or contact QBE Customer Care - see Contacting QBE Customer Care for details.

Integrity Life - call 1300 543 366, email privacy@integritylife.com.au, or write to:

The Privacy Officer Integrity Life Australia Ltd PO Box R1741 Royal Exchange NSW 1225

It's up to you to decide whether to give us your personal information, but without it we might not be able to do business with you, which includes being able to properly assess and pay a claim.

About consumer credit insurance

This is a Consumer Credit Insurance (CCI) policy designed to meet your loan repayments in the event of a Disability or Involuntary Unemployment. This Policy will also pay you the amount selected for a Trauma event occurring to you or to pay the outstanding balance of your loan, less any rebate of charges and arrears in monthly repayments, in the event of your death.

It is important you read the PDS carefully to understand the extent of cover provided by the Policy, and its limitations.

This insurance is not compulsory and a credit provider cannot insist upon you taking out a CCI Policy as a condition of a loan. You should also be aware that you can effect CCI with the insurer of your choice.

How to apply for this insurance

You can apply for this insurance by completing our application process that is administered by your financial institution.

If we accept your application, you will receive a Policy Schedule that identifies the insured, the insurer, the policy term, the premium, the cover(s) selected including the sum insured for those covers and other important information.

To be eligible for this Policy you must be, at the commencement date of this insurance:

- aged between 18 and 59 years of age at the commencement date;
- in good health and not be suffering from any chronic or serious illness or injury that was previously known to you; and
- a permanent resident of Australia unless you are a member of the Australian Defence Force posted overseas or we agree in writing to insure you.

If you are applying for Disability cover, you must:

• be employed on a permanent, casual, temporary, contract or self-employed basis.

If you are applying for Involuntary Unemployment cover, you must:

- be employed in permanent employment when you apply for the loan (working on a permanent and continuous basis for wages or income for at least 20 hours every week and not in employment of a seasonal, casual, temporary, contract or self-employed nature); and
- not have any prior knowledge your permanent employment is to be terminated or decreased.

You will not be able to apply for Involuntary Unemployment cover without also applying for Disability cover.

Applying for cover

You may apply for this Policy at the time of applying for your loan. Assuming that you meet all eligibility criteria, you will be issued with a Policy Schedule confirming your cover including the following information:

- your name and address;
- the amount of your loan repayment that is covered;
- which cover(s) you have selected;
- premium including taxes and charges.

Significant benefits and features

The following is a summary only and does not form part of the terms of your Policy. We give examples of some of the significant benefits and risks but you need to read the Policy Wording to make sure it matches your expectations.

This Policy is designed to provide you with loan protection cover for the insured events selected as shown on your Policy Schedule, that occur during the period of insurance. You may select combinations of cover for Life, Trauma, Disability and Involuntary Unemployment.

Cover	Benefit	Main conditions
Life cover	In the event of your death, we will pay to your financial institution the outstanding balance of your loan, at the date of death, including up to two months of arrears and less a rebate of charges.	Cover is available up to a maximum of \$500,000.
Trauma cover	Pays you the amount of cover selected by you in the event of positive diagnosis of any of the diseases or disabilities as shown in the Policy Wording.	Automatic cover of \$10,000. You may elect to increase cover in multiples of \$5,000 up to \$50,000 depending on your loan amount.
Disability cover	 For each day of Disability, we'll pay 1/30th of either: (a) the minimum monthly repayment required shown on the loan contract when it was first entered into; or (b) the minimum monthly repayment amount required under the loan contract on the date your Disability first occurred; whichever is the lesser. We'll pay this benefit directly to your financial institution. 	The most we'll pay in total for all Disability claims during the period of insurance is \$200,000.

Summary of benefits

Cover	Benefit	Main conditions
Involuntary unemployment cover	 For each day of Involuntary Unemployment, we'll pay 1/30th of either: (a) the minimum monthly repayment required shown on the loan contract when it was first entered into; or 	The most we'll pay in total for all Involuntary unemployment claims during the period of insurance is \$15,000.
	 (b) the minimum monthly repayment amount required under the loan contract on the date your Involuntary Unemployment first occurred; 	
	whichever is the lesser.	
	We'll pay this benefit directly to your financial institution.	

Significant risks

The following information lists some of the significant risks arising under your Policy. It is important that you take the time to carefully read the policy wording in full before applying for this insurance.

Variation of cover

If you vary any of the terms of your loan contract this policy will be cancelled and if you want cover, you will need to enter into a new policy to cover the varied loan contract.

Where you vary your loan contract and you propose entering into a new policy, all current terms and conditions of the new policy apply as at the date the new policy is issued.

Waiting periods

A waiting period is a period of time for which no benefit is payable. You may be subject to one or more waiting periods under this policy. A full description of all the waiting periods that may apply can be found in the policy wording.

Interest rates

The amounts we may pay for claims relating to Disability and/or Involuntary Unemployment are calculated by reference to the repayment as shown in your Policy Schedule. If during the period of insurance your actual loan repayments are affected by a change in interest rates, any payments under the policy may not provide total cover

Cover **Risk** All covers This insurance is limited to the period of insurance shown in your Policy Schedule. There is no surrender value on the Policy. You need to be aware that there are limits to each Policy benefit. The extent of these limits are set out in the Policy Wording. If you do not adequately insure yourself you may have to bear the uninsured portion of any loss yourself. If you are unsure whether you are insured for the correct amount, you should seek professional advice. Cover is subject to exclusions detailed in the Policy Wording Cover available up to \$500,000 during the period of insurance. Life cover Your cover starts from the commencement date. If you have joint cover, the maximum payable under this benefit is \$500.000. Trauma cover • You are able to select up to \$50,000 in cover depending on your loan amount. If you have joint cover, the maximum Trauma cover available is \$100,000. There is no cover for a Trauma event occurring within 90 days of the commencement date. Only one claim is allowed during the period of insurance. This cover can only be selected if you've also selected Life cover. **Disability cover** Cover is available up to \$200,000 during the period of insurance. There is no cover for illness occurring within 30 days of the commencement date. Involuntary Cover is available up to \$15,000 during the period of insurance. unemployment We'll pay up to 120 days of benefit for any one claim. cover There is no cover for Involuntary Unemployment occurring within 30 days of the commencement date. This cover can only be selected it you've also selected Disability cover.

Summary of limits to the cover provided

What you are not covered for

There are certain times when this Policy may not provide cover. See 'General exclusions' for full details.

We may also refuse to pay or may reduce the amount we pay under a claim:

- if you do not comply with the Policy conditions (please read the Policy Wording of this document for details of the conditions to make sure you understand your obligations);
- if you do not comply with your duty of disclosure (such as not telling us of a pre-existing illness); or
- if you make a fraudulent claim.

The cost of this Policy

Premium is what you pay us for this Policy and it's made up of the amount we've calculated for the risk and any taxes and government charges.

Factor	Impact
The monthly mortgage repayment	Your premium increases as the amount borrowed increases.
The amount borrowed	Your premium depends on the amount of your loan and increases as the amount borrowed increases.
The period of the loan	Your premium increases as the period of cover increases.
The type of cover you've selected	Your premium depends on the cover type combination you select.
Details relating to any joint borrower	Each person listed on the Policy is priced according to the details provided by you. However, you do receive a discount when you have more than one person insured on the Policy.

When calculating your premium we consider a number of factors, including:

Commission of 20% of the premium is paid to the financial services provider who sold you this Policy. It is not an additional charge to you and it is included in the premium payable.

How to make a claim

Full details of what you must do for us to consider your claim are provided in the 'Claims' section at the end of this booklet.

If you need to make a claim under your Life cover or Trauma cover, please contact Integrity Life at:

Integrity Life Australia Limited PO Box R1741 Royal Exchange NSW 1225

Email: hello@integritylife.com.au

Phone: 1300 543366

If you need to make claim under your Disability cover or Involuntary Unemployment cover, please contact QBE on 1300 133 024.

Cooling-off information

If you change your mind within 30 days of buying your Policy, you can cancel it and receive a full refund. Naturally, this doesn't apply if you've made or are entitled to make a claim. Even after the cooling off period ends, you still have the right to cancel your Policy. However, we may deduct some costs from any refund, as set out in the Policy Wording under 'Cancelling your Policy' on page 32.

To cancel your policy, please contact: insurancecentre@qbe.com

Resolving complaints & disputes

This Policy is made up of products underwritten by two different insurers. If you have a complaint or dispute, you need to contact the insurer for that product.

If your complaint is about the QBE products

At QBE we're committed to providing you with quality products and delivering the highest level of service.

We also do everything we can to safeguard your privacy and the confidentiality of your personal information.

Something not right?

We know sometimes there might be something you're not totally happy about, whether it be about our staff, representatives, products, services or how we've handled your personal information.

Step 1 - Talk to us

If there's something you'd like to talk to us about, or if you'd like to make a complaint, speak to one of our staff. When you make your complaint please provide as much information as possible. They're ready to help resolve your issue.

You can also contact our Customer Care Unit directly to make your complaint. Our aim is to resolve all complaints within 15 business days.

Step 2 - Escalate your complaint

If we haven't responded to your complaint within 15 days, or if you're not happy with how we've tried to resolve it, you can ask for your complaint to be escalated for an Internal Dispute Resolution (IDR) review by a Dispute Resolution Specialist.

The Dispute Resolution Specialist will provide QBE's final decision within 15 business days of your complaint being escalated, unless they've requested and you've agreed to give us more time.

Contacting QBE Customer Care

How to contact QBE Customer Care	
Phone	1300 650 503 (Monday to Friday from 9am to 5pm, Sydney time, except on public holidays).
	Calls from mobiles, public telephones or hotel rooms may attract additional charges.
Email	complaints@qbe.com, to make a complaint.
	 privacy@qbe.com, to contact us about privacy or your personal information.
	 customercare@qbe.com, to give feedback or pay a compliment.
Post	Customer Care, GPO Box 219, Parramatta NSW 2124

If your complaint is about the Integrity Life products

If there's something you'd like to talk to us about, or if you'd like to make a complaint, speak to one of our staff.

Escalate your complaint

If your complaint has not been resolved with 5 days or if you advise us you are unhappy with our response, your complaint will automatically be escalated to the Complaints Officer at Integrity Life.

Integrity Life will provide you with a final decision, and the reasons for that decision, within 45 days.

Contacting Integrity Life

How to contact the Complaints Manager	
Phone	1300 54 33 66
Email	hello@integritylife.com.au
Post	PO Box R1741 Royal Exchange, NSW 1225

Still not resolved?

If you're not happy with the final decision, or if we've taken more than 45 days to respond to you from the date you first made your complaint, you can contact the Australian Financial Complaints Authority (AFCA). AFCA is an ASIC approved external dispute resolution body.

AFCA resolves insurance disputes between consumers and insurers, at no cost to you. QBE and Integrity Life are bound by AFCA decisions - but you're not. You can contact AFCA directly and they'll advise you if your dispute falls within their Rules.

Disputes not covered by the AFCA Rules

If your dispute doesn't fall within the AFCA Rules, and you're not satisfied with our decision then you may wish to seek independent legal advice.

Privacy complaints

If you're not satisfied with our final decision and it relates to your privacy or how we've handled your personal information, you can contact the Office of the Australian Information Commissioner (OAIC).

Contacting AFCA or the OAIC

How to contact AFCA	
Phone	1800 931 678 (free call)
Email	info@afca.org.au
Online	www.afca.org.au
Post	Australian Financial Complaints Authority, GPO Box 3, Melbourne VIC 3001

How to	How to contact the OAIC	
Phone	1300 363 992	
	Calls from mobiles, public telephones or hotel rooms may attract additional charges.	
Email	enquiries@oaic.gov.au	
Online	www.oaic.gov.au	

Financial claims scheme

Your Policy is a protected policy under the Financial Claims Scheme (FCS), which protects certain insureds and claimants in the event of an insurer becoming insolvent. In the unlikely event of QBE becoming insolvent you may be entitled to access the FCS, provided you meet the eligibility criteria.

More information may be obtained from the Australian Prudential Regulation Authority (APRA).

How to contact APRA	
Phone	1300 558 849
	Calls from mobiles, public telephones or hotel rooms may attract additional charges.
Online	www.fcs.gov.au

Policy Wording

Your Policy is made up of covers underwritten by different insurers. Each insurer only accepts liability in respect to the insurance cover of which it insures.

The insurer of Disability and Involuntary Unemployment covers

QBE Insurance (Australia) Limited ABN 78 003 191 035 AFSL 239545 is the insurer of Disability and Involuntary Unemployment covers.

The insurer of Life and Trauma covers

Integrity Life Australia Limited (Integrity Life) ABN 83 089 981 073 AFSL 245492 is the insurer of Life and Trauma covers.

Our agreement with you

Your Policy is an agreement between you and us, made up of:

- This Policy Wording
- Your Policy Schedule, which sets out the cover you've chosen and any terms specific to you.

The cover under this Policy is provided during the period of insurance, once you've paid us your premium. There are also:

- · Conditions and exclusions which apply to specific covers or sections;
- General exclusions, which apply to any claim you make under this Policy;
- General conditions, which set out your responsibilities under this Policy;
- Claims conditions, which set out our rights and your responsibilities when you make a claim; and
- Other terms, which set out how this Policy operates.

Excesses

You must pay any excesses which apply to your claim. The excesses which you have to pay are set out in this Policy Wording or on your Policy Schedule.

How much we'll pay

The most we'll pay for a claim is the sum insured which applies to the cover or section you're claiming under, less any excess.

Types of cover

Section 1. Life cover

Section 2. Trauma cover

Section 3. Disability cover

Section 4. Involuntary unemployment cover

Paying your premium

You may choose to pay the premium for this cover:

- up front by cash, cheque or credit card; or
- by including the premium in your loan amount.

If you include the premium in your loan amount, the premium will be included in the total cost payable by you plus interest for the full length of the finance term.

If you've chosen to pay your premium up front, you must pay it by the due date. If we do not receive your premium by the due date or your payment is dishonoured then this Policy will not operate and there will be no cover under this Policy.

Words with special meanings

The words and terms used throughout this Policy have the special meanings set out below.

Where other words and terms are only used in one section of the Policy, we'll describe their special meaning in that section.

Word or term	Meaning
Cancer*	The presence of one or more malignant tumours (including leukaemia, lymphoma, Hodgkin's disease and colorectal cancer from Dukes Stage A) characterised by the uncontrollable growth and spread of malignant cells and the invasion and destruction of normal tissue.
	The following cancers are excluded:
	 Conditions classified by their clinical features, cytopathology and/or histopathology as tumours showing the malignant changes of 'carcinoma- in-situ' or which are histopathology described as premalignant (carcinoma in situ of the breast is covered if it results directly in the removal of the entire breast. This procedure must be performed specifically to arrest the spread of malignancy and be considered the appropriate and necessary treatment). Uterine cervical intraepithelial lesions, cervical dysplasias and cervical intraepithelial neoplasias, including those classified as CIN 1, CIN 2 and CIN 3 are examples of tumours categorised as either being carcinoma in situ and/or premalignant and are excluded.
	 All hyperkeratosis and basal cell carcinomas, and squamous cell carcinomas of skin unless there has been evidence of metastatic spread.
	 Prostatic cancers which remain histopathologically classified as TNM stage T1a or T1b or are of another equivalent or lower classification and have a Gleason score of six or less, unless major interventionist treatment is required to arrest the spread of malignancy.
	 Melanomas which are less than stage T1bNOMO.
	Chronic Lymphocytic Leukaemia diagnosed as less than RAI Stage 1.

Word or term	Meaning
Commencement date	the inception date of the period of insurance stated on the Policy Schedule you received from us in connection with this Policy, or the date the loan funds are advanced to you, whichever is the later.
Coronary artery by-pass surgery*	The undergoing of coronary artery bypass surgery with the use of bypass graft to one or more coronary arteries for treatment of coronary artery disease. All non-surgical procedures such as laser, angioplasty or other intra- arterial techniques are excluded.
Disability	an Illness or Injury:
	certified by a medical practitioner,
	 that prevents you from performing or engaging in your usual occupation, or any occupation within your education, training and experience.
Drugs	any illegal substance or non-prescribed drug which, when used, impairs the person's faculties, or a prescribed drug used contrary to medical or manufacturer's advice.
End-stage kidney disease*	End stage renal failure, which presents chronic irreversible failure of both kidneys to function, as a result of which regular renal dialysis is initiated or renal transplant is carried out.
Financial institution	the financier with whom you have obtained the loan and is stated in your loan contract.
Financial services provider	the person who sold you this Policy.
Heart attack*	The death of a portion of the heart muscle because of inadequate blood supply to the relevant area.
	The diagnosis must be supported by diagnostic rise and/or fall of cardiac biomarkers with at least one value above the 99th percentile of the upper reference limit and at least one of the following:
	Signs and symptoms of ischaemia consistent with myocardial infarction;
	 ECG changes indicative of new ischaemia (new ST-T changes or new left bundle branch block [LBBB]);
	 Development of pathological Q waves in the ECG; or
	 Imaging evidence of new loss of viable myocardium or new regional wall motion abnormality.
	We will consider other appropriate and medically recognised tests where the above evidence is inconclusive or superseded by technological advances.
	A rise in biological markers because of an elective percutaneous procedure for coronary artery disease is excluded. Also excluded are other acute coronary syndromes including but not limited to angina pectoris.

Word or term	Meaning				
Incident	an event, neither expected or intended from your standpoint, which results in a claim on this Policy.				
Illness	sickness, illness or disease which manifests itself during the period of insurance.				
Injury	bodily injury caused solely by violent, accidental, external and visible means as a result of an accident occurring during the period of insurance.				
Insured	the person(s) named in the Policy Schedule as covered by the Policy.				
Involuntary unemployment	you become unemployed through no choice or fault of your own, because of factors you can't control and				
	 you've registered with an Australian government approved job-placement agency or licenced recruitment agency 				
	you're actively seeking employment				
Loan contract	the loan contract between you and your financial institution.				
Major organ transplant*	Undergoing, or being placed on an official Australian waiting list approved by us for, a transplant from a human donor for bone marrow or one of the following organs:				
	• Heart;				
	• Kidney;				
	• Liver;				
	Lungs; or				
	Small bowel.				
Medical consultation	any activity to detect, treat or manage a medical condition. This includes (but isn't limited to) using prescribed medication, and conventional or alternative therapy.				
Medical practitioner	a legally qualified and independent medical practitioner, physician or surgeon (other than you or a member of your family or your business partner) who is registered and practicing medicine in Australia.				
Outstanding balance	the amount outstanding in relation to you're the loan contract at the Incident. This amount excludes any arrears in loan repayments.				
Period of insurance	the period shown on the Policy Schedule unless ending earlier in accordance with section 'When the Policy ends'.				
Permanent employment	 working on a permanent and continuous basis for wages or income for an average of at least 20 hours every week 				
	 but not employment of a seasonal, casual, temporary, contract or self- employed nature. 				
Permanent resident of Australia	an Australian or New Zealand citizen or holder of an Australian Permanent Residency Visa and not living outside of Australia for more than twelve (12) months at a time, unless you are a member of the Australian Defence Force posted overseas.				

Word or term	Meaning				
Policy	this insurance contract, including the application, this PDS and the Policy Schedule.				
Policy Schedule	the schedule of insurance, or any future renewal schedule, or endorsement schedule.				
Pre-existing	an injury, illness, condition or related symptom:				
condition	that you were aware of; or				
	that a reasonable person in your position should be aware of.				
	For Life cover and Trauma cover, a pre-existing condition is a condition that existed at the time you applied for this insurance				
Premium	What you pay us to insure you. It's the cost of this Policy.				
Stroke*	A neurological event caused by a cerebrovascular accident or incident.				
	The stroke must be evidenced by neuro-imaging.				
	Transient ischaemic attacks, cerebral events due to reversible neurological deficits, migraines, hypoxaemia or trauma and vascular disease affecting the eye, optic nerve or vestibular functions are excluded.				
Sum insured	the amount that you have insured your loan repayments for as shown on the Policy Schedule. We will pay no more than this amount.				
Terrorism	any act of any person acting on their own or in connection with an organisation or foreign government, which can involve the use of, or threat of, force or violence, where the purpose, by its nature or context, is to put the public or a section of the public in fear, to resist or influence a government or, to further an ideological, religious, ethnic or similar aim.				
Usual occupation	your main paid occupation suitable to your education, training and experience for which you receive a financial reward.				
We, our, us	The insurer of Disability and Involuntary Unemployment covers: QBE Insurance (Australia) Ltd ABN 78 003 191 035 AFSL 239545.				
	The insurer of Life and Trauma covers: Integrity Life Australia Limited ABN 83 089 981 073 AFSL 245492				
	Each insurer only accepts liability in respect to the insurance cover of which they are the insurer.				
You, your	The person(s) named in your Policy Schedule as the insured.				

*These special meanings are only relevant if you have selected Trauma Cover.

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Section 1: Life cover

This cover only applies in the event of your death during the period of insurance.

Benefit payable

If you die during the period of insurance, we will pay your financial institution the current insured loan contract amount stated in the Policy Schedule to a maximum of \$500,000.

If you die (other than by suicide), during the period of time between the date your loan is approved and when the funds are advanced, we will pay the death cover provided that:

- you have applied for death cover, and
- you meet the eligibility criteria, and
- your death occurs within one hundred and twenty (120) days after your financial institution approves your loan.

If, at the date of your death, your financial institution has any form of insurance for the repayment of the loan contract, or provided any form of debt waiver as a benefit of the loan contract, the outstanding balance is to be reduced by the benefit provided or by any payment received by your financial institution from the insurance.

Joint cover

If the loan contract is in joint names, only one (1) death claim will be paid regardless of whether one (1) or both of you claim at the same time.

Section 2: Trauma cover

You can only choose Trauma cover if you've also chosen Life cover

This cover applies in the event of the positive diagnosis and certification of one of the following Trauma events occurring after 90 days from the commencement date:

- Cancer
- Coronary artery by-pass surgery
- End-stage kidney disease
- Heart attack
- Major organ transplant
- Stroke.

We will only cover these diseases and disabilities if they satisfy the conditions specified in each individual definition under 'Words with special meanings'.

We require the diagnosis and certification of a Trauma condition:

- · by a medical practitioner or specialist medical practitioner; and
- agreed to by our medical adviser.

A minimum Trauma cover of \$10,000 automatically applies when you select this cover.

You may elect to increase the cover provided, in multiples of \$5,000 up to a maximum of \$50,000. However, if you have joint cover the maximum combined cover you may select cannot exceed \$100,000.

Benefit payable

If you experience a positive diagnosis of a disease or Disability included in the Trauma cover part of this Policy, we will pay you the level of Trauma cover that you have selected as shown on the Policy Schedule.

You may only have one (1) Trauma claim during the period of insurance.

Joint cover

If you have joint cover the maximum that we will pay is the amount stated under 'Benefit payable' for Trauma cover, regardless of whether one (1) or both of you claim at the same time.

Section 3: Disability cover

This cover applies if:

- you have an Illness or Injury and
- a Medical practitioner certifies that you are unable to perform:
 - your usual occupation for up to 12 months; and
 - any occupation within your education, training and experience after the first 12 months of any claim.

There is no cover for illness occurring within 30 days from the commencement date of the Policy.

Benefit payable

We'll only pay a benefit under this cover for an Illness or Injury that occurs during the period of insurance.

For each day of Disability we'll pay 1/30th of either:

- (a) the minimum monthly repayment required shown on the loan contract when it was first entered into; or
- (b) the minimum monthly repayment amount required under the loan contract on the date your Disability first occurred;

whichever is the lesser.

We'll pay this benefit directly to your financial institution.

If the minimum monthly repayments required have increased, the benefit payable under (a) may be increased by up to 10%. This won't apply if the minimum repayments have increased because of default and won't apply to the monthly benefit payable under (b).

For any claim we'll only pay a benefit where you're unable to perform:

- your usual occupation for up to 12 months; and
- any occupation for which you are reasonably qualified by your education, training or experience (as certified by a Medical practitioner) after the first 12 months of any claim.

The maximum amount that we'll pay under this benefit is \$200,000, regardless of the number of claims during the period of insurance.

We'll only pay a benefit if:

- you can provide us with evidence from a Medical practitioner for the Illness or Injury you've sustained and
- you're following the advice of the Medical practitioner for your rehabilitation.

Joint cover

If you have joint cover the maximum that we'll pay is the amount stated under 'Benefit payable' for Disability cover, regardless of whether one or both of you claim at the same time.

Section 4: Involuntary unemployment cover

You can only choose this cover if you've also chosen Disability cover as set out in Section 3.

This cover applies if you become unemployed through no choice or fault of your own, because of factors you can't control, for example through involuntary redundancy or involuntary dismissal.

If you've made a claim for Involuntary unemployment, you must return to permanent employment for at least another 30 consecutive days before another claim can be made.

There is no cover for Involuntary unemployment occurring within 30 days from the commencement date.

Benefit payable

We'll only pay a benefit under this cover for Involuntary unemployment that occurs during the period of insurance.

For each day of Involuntary Unemployment, we'll pay 1/30th of either:

- (a) the minimum monthly repayment required shown on the loan contract when it was first entered into; or
- (b) the minimum monthly repayment amount required under the loan contract on the date your Involuntary unemployment first occurred;

whichever is the lesser.

We'll pay this benefit directly to your financial institution.

If the minimum monthly repayments required have increased, the benefit payable under (a) may be increased by up to 10%. This won't apply if the minimum repayments have increased because of default and won't apply to the monthly benefit payable under (b). The most we'll pay for any one claim, is 120 days of benefit, or until you return to employment, whichever occurs first.

The maximum amount that we'll pay under this benefit is \$15,000, regardless of the number of claims during the period of insurance.

We'll only pay a benefit if you:

- have registered with an Australian government approved job-placement agency or licenced recruitment policy; and
- are actively seeking employment.

Joint cover

If you have joint cover the maximum that we'll pay is the amount stated under 'Benefit payable' for Involuntary unemployment cover, regardless of whether one or both of you claim at the same time.

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General exclusions

These general exclusions apply to all sections of this Policy.

Additional exclusions

We will not provide cover for Events or circumstance listed in the first column of the Table, where there is an "X" marked under the particular cover selected. For full particulars of all these exclusions, you must take the time to read this in detail.

Event or circumstance	Life	Trauma	Disability	Involuntary unemployment
War or warlike activities (excluding peace time manoeuvres).		Х	х	х
Acts of terrorism where such acts are directly or indirectly caused by, contributed to by, resulting from, or arising out of, or in connection with biological, chemical, or nuclear weapons, pollution or contamination.		Х	Х	х
Death within 30 days of a Trauma event occurring.		х		
More than one claim during the period of insurance.		х		
A pre-existing medical condition occurring in the six months before the commencement date.			Х	х
A pre-existing medical condition)		х		
Any Illness sustained or manifested within 30 days of the commencement date.			Х	
Involuntary unemployment occurring within 30 days of the commencement date.				х
Any Trauma condition which is diagnosed or its symptoms become apparent within 90 days from the commencement date.		Х		
Failure to seek medical attention and/or treatment and/or failure to follow medical advice.		х	х	
Unreasonable refusal to attend an independent examination by a Medical practitioner requested and paid for by us.		Х	Х	
The natural end of a fixed term contract, apprenticeship or seasonal employment.				х
Where you're self-employed, or where you or your family have control over the employing company				х
Where you weren't in paid employment for an average of 20 hours a week immediately before or on the commencement date of the Policy.				Х

Event or circumstance	Life	Trauma	Disability	Involuntary unemployment
Where you weren't in paid employment for an average of 20 hours a week over the month immediately before you became unemployed.				х
Before you bought the Policy you suspected, or a reasonable person ought to have suspected, that your employment would be terminated				x
Your unemployment is voluntary.				Х
Disability and Involuntary unemployment claim simultaneously.				Х
Alcoholism, drug addiction or the influence of intoxicating liquor or drugs (except where your Disability is a result of a drug administered by, or taken in accordance with, the advice of a medical practitioner or rehabilitation specialist).		Х	Х	X
An intentionally self-inflicted illness or injury whilst sane or insane (including suicide within thirteen (13) months following the commencement date of the Policy).	х	х	Х	Х
Engaging in a criminal act.	Х	Х	Х	Х
Taking part in lockouts, riots, civil commotion, strikes.			Х	х
Engaging in professional racing of any kind except foot racing.			Х	х
Flying or taking part in aerial activity except as a fare paying passenger in a motor propelled aircraft owned and/or operated by a recognised airline or licensed charter company.			Х	Х

Sanctions limitation and exclusion clause

You're not insured under any section of this Policy where a claim payment breaches any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of Australia, the European Union, United Kingdom or United States of America, or any local autonomous sanctions.

General conditions

There are conditions set out in this 'General conditions' section, in the Claims section and under each particular cover and section. If any of these conditions aren't met, we may refuse a claim, reduce the amount we pay or in some circumstances we may cancel your Policy. When making a claim, you must have met and then continue to comply with the conditions of your Policy. Any person covered by your Policy, or claiming under it, must also comply with these conditions.

If you, or someone covered under your Policy, don't meet these conditions or make a fraudulent claim we may:

- Refuse to pay your claim or reduce what we pay for your claim
- Cancel your Policy.

Changes to your circumstances

You must tell us as soon as possible if circumstances occur, or if changes or alterations are intended or made which increase the risk of loss, damage or injury.

Examples include:

• Your occupation changing.

Assistance and co-operation

At all times when you deal with us you must:

- Provide us with all reasonable assistance we may need
- Be truthful and frank
- Not behave in a way that's abusive, dangerous, hostile, improper or threatening
- Co-operate fully with us, even after we've paid a claim.

Claims

This section describes what you must do, as well as conditions that apply when you make a claim.

What you must do

You must advise us as soon as possible of an incident which could lead to a claim on this Policy.

When you, or your Estate, make a claim you must:

- contact us by phone as soon as practicable and be ready to provide details of the incident;
- return the completed claim form, that we provide you, promptly together with all letters, documents, medical certificates or other documentation and evidence that you have been asked to provide, otherwise we cannot process your claim;
- attend an independent examination by a medical practitioner if requested and paid for by us;
- provide written statements under oath if we require it;
- be interviewed about the circumstances of the claim if we require this.

If a claim is not admissible under this Policy due to the terms and conditions, you may be able to claim under a previous Policy issued by us, which has been replaced by this Policy.

If you need to make a claim under your Life cover or Trauma cover, please contact Integrity Life at:

Integrity Life Australia Limited PO Box R1741 Royal Exchange NSW 1225

Email: hello@integritylife.com.au

Phone: 1300 543366

If you need to make claim under your Disability cover or Involuntary Unemployment cover, please contact QBE on 1300 133 024.

You must assist us

Before we will pay anything under this Policy, you must have complied with all the requirements of this section and provided us with all information and assistance that we have requested.

What you must not do

False or misleading information

We may deny part or all of your claim if you are not truthful and frank in any statement you make in connection with a claim, or if the claim is fraudulent or false in any respect.

What we do

We may take over and conduct the defence or settlement of any claim or issue legal proceedings for damages. If we do this we will do it in your name. We have full discretion in the conduct of any legal proceedings and in the settlement of any claim. You must co-operate by giving us any statements, documents or assistance we require. This may include giving evidence in any legal proceedings.

What can affect a claim

We may refuse to pay a claim if you are in breach of your duty of disclosure or any of the conditions of this Policy, including any endorsements noted on or attached to the Policy Schedule.

We may be entitled to refuse to pay or to reduce the amount of a claim if:

- it is in any way fraudulent; or
- any fraudulent means or devices are used by you or anyone acting on your behalf to obtain any benefits under this Policy.

GST

If you're a business you must tell us if you're registered, or you are required to be registered, for GST. When you do this, we need you to give us:

- Your Australian Business Number (ABN)
- The percentage of any input tax credit you will claim, or will be entitled to claim, on your premium.

When we pay a claim, your GST status will determine the amount we pay you. Your claim settlement amount will be adjusted to allow for any ITC entitlement.

Unless we say otherwise, all amounts in your Policy are inclusive of GST. There may be other taxation implications affecting you, depending upon your own circumstances. We recommend you seek professional advice.

How claim administration and legal proceedings are undertaken

When a claim is admitted under this Policy we have the right, at our discretion, to exercise all of your legal rights relating to the incident and to do so in your name.

We will take full control of the administration, conduct or settlement of the claim.

Providing proof

You must be able to prove to us you've suffered a claimable event covered by your Policy before we'll pay you for it. We may ask you for this proof if you make a claim under your Policy. So your claim can be assessed quickly, make sure you keep the following:

- Medical reports
- Proof of income

Other documentation specific to your type of claim (e.g. Death certificate if the claim is for your death, proof of termination if your claim is due to your unemployment).

Other terms

These other terms apply to how your Policy operates.

Cancelling your Policy

You can cancel your Policy at any time by telling us. If there are other people named as insured on your Policy, we only need a request to cancel it from one of you.

We may cancel your Policy in any of the circumstances permitted by law (e.g. failure to pay the premium by the due date) by informing you in writing.

We'll give you notice in person or send it to your address (including an electronic address) last known to us.

If you've paid your premium in advance, we'll refund you the proportion of the premium for the remaining period of insurance, less any administration fees.

Changing your Policy

Changes to this Policy only become effective when we agree to them and send you a new Policy Schedule detailing the change.

Joint and co-insureds

If more than one person is insured under your Policy, we'll treat a statement, act, omission, claim, request or direction by that person as having been made by all insured.

We only need a request from one person insured to cancel or change your Policy.

Notices

Any notice we give you will be in writing and will be effective once it's delivered to you personally or to your last known address (including when it's an electronic one).

It's important for you to tell us of any change of address as soon as possible.

Continuity of cover (replacement policies)

If this Policy replaces an existing Policy with us, as a result of you re-financing or varying your loan, and you're not covered under the terms of this replacement policy, then you may be able to claim under the terms and conditions of your previous policy. For this benefit to apply, the commencement date of this replacement policy must be within ninety (90) days of the cancellation date of the previous policy.

If your claim would have been payable under the previous policy, then this replacement Policy will respond to your claim at the levels and limits that were applicable under the previous policy. Where such a claim is for Disability, Life or Trauma then the amount payable will be the lesser of the amount payable under the previous policy and this replacement Policy.

Where a claim would have been payable under the terms and conditions of your previous policy with us, however your claim occurs after the original expiry date of the period of insurance of the previous policy, then no claim will be payable under this replacement policy.

When the Policy ends

The Policy ends, and we stop paying benefits on the earliest of any of the following:

- the expiry date shown on the Policy Schedule;
- the date of your 65th birthday;
- the date the loan is discharged, re-financed, foreclosed or terminated;
- the date we receive a written request from you to end the insurance;
- the date given when we provide you with written notice to end the insurance in accordance with relevant legislation;
- the date upon which the total benefit for Disability is paid;
- the date you are no longer a permanent resident of Australia (unless otherwise agreed in writing by us);
- the date of your death.

Benefits being paid by this Policy during the period of insurance will continue to be paid up to the end of the relevant benefit period.

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