

Funeral Insurance

Combined Product Disclosure Statement
and Financial Services Guide

Issue date **24 December 2015**

Look after your
loved ones with
Funeral Insurance

Insuranceline

About this document

This document is designed to help you decide whether to buy Insuranceline Funeral Insurance. The document comprises the combined Product Disclosure Statement and Policy Document (PDS), and Insuranceline Financial Services Guide (FSG). The information contained in this document is general information only and does not take into account your individual objectives or financial situation. Therefore, you should consider how appropriate this insurance is with regard to your objectives, financial situation and needs before making a decision whether to buy this product.

If you take out a Policy, please keep a copy of this document with your Policy Schedule in a safe place as together with your application they form the contract between TAL Life Limited ABN 70 050 109 450 AFSL 237848 (TAL Life Limited) and the Policy Owner. The PDS sets out all of the terms and conditions for the Policy and the Policy Schedule sets out your Policy details and any additional terms and conditions applicable to you. Please read the PDS and the Policy Schedule carefully to understand how your Policy operates and to ensure all of your details in the Policy Schedule are correct. These documents will be required in the event of a claim.

There are risks involved with taking out insurance and you should be aware of these. Please refer to page 34 for more information. From time to time updates about our products which are not materially adverse to you, may be found on the Insuranceline website at insuranceline.com.au. You can call us on 1800 999 804 if you would like a copy to be sent to you.

In this document, some words and expressions have special meaning. They normally begin with capital letters and their meaning is explained in the Glossary on page 39.

Also in this document, references to you and your mean the Life Insured and/or the Policy Owner as the context requires. References to we, us and our mean TAL Life Limited or TAL Direct Pty Limited ABN 39 084 666 017 AFSL 243260 (TAL Direct) as applicable.

The Policy is subject to and governed by the laws of Australia. The singular includes the plural and vice versa. Words of one gender include the other gender. Headings are only for convenience. Apart from the Glossary, headings do not affect the interpretation of the words of the Policy.

About the issuer of the PDS

TAL Life Limited of Level 16, 363 George Street, Sydney NSW 2000 is the issuer of the life insurance Benefits outlined in this document. TAL Life Limited is responsible for the entirety of this PDS.

About the distributor

Insuranceline, a trading name of TAL Direct, promotes and distributes the product outlined in this document. TAL Direct is responsible for the entirety of the FSG. TAL Direct and TAL Life Limited are part of the TAL Dai-ichi Life Australia Pty Limited ABN 97 150 070 483 group of companies (TAL).

If you take out a Policy, please keep a copy of this document with your Policy Schedule in a safe place as together with your application they form your contract of insurance.

Contents

1. Choosing the right Policy	8
Step 1. Choose the amount of Cover	8
Step 2. Choose your payment option.....	8
Step 3. Choose whether you'd like to add Extra Benefits to your Policy.....	11
Step 4. Choose whether to add others to your Funeral Insurance.....	12
Step 5. Choose your billing schedule and date.....	12
2. Taking out Cover.....	14
How can I take out a Funeral Insurance Policy?.....	14
If I change my mind, am I entitled to a refund?.....	14
Worldwide Cover	14
3. Making a claim.....	15
How do my loved ones make a claim if they ever need to?	15
Who receives the claim payout?.....	15
Misstatement of age.....	15
Accidental Death Extra claims.....	16
Fraudulent claims.....	16
4. Benefit terms and conditions.....	17
Funeral Insurance.....	17
Lifetime Protection Benefit.....	18
Accidental Death Extra.....	18
Accidental Injury Extra	19
What isn't Covered?	24
What is Accidental Death?	25
What if I pass away in the Accidental Death Period?.....	26
Can I make alterations to my Policy after it has commenced?.....	26
Increases.....	26

Decreases.....	27
Beneficiary/ies.....	27
Maximum Benefit per life insured.....	27
Children turning 21.....	27
More than one Life Insured.....	28
When does my Policy end?.....	28
5. Premiums.....	29
The premium you have to pay.....	30
How are your premiums calculated?.....	30
When do you have to pay?.....	30
Unpaid Premium and Premium Dishonours.....	31
What happens if I stop paying?.....	31
Will my premiums go up?.....	31
Are my premiums tax deductible?.....	32
Cap Credit and Premium Cap limits.....	32
Reinstatement.....	32
Changing between Payment Plans.....	32
Premium End Date.....	33
6. Important information.....	34
Why Insuranceline?.....	34
Any questions?.....	34
Surrender value.....	34
Statutory fund.....	34
Currency.....	34
Risks.....	34
Dispute resolution process.....	35
Your Privacy.....	36
Direct marketing and opt out.....	38
Contact from us.....	38

7. Glossary.....39

- Insuranceline direct debit service agreement.....43
- How direct debit works.....43
- When we deduct your payments.....43
- Our promise to you.....43
- Your commitment to us.....44
- How to make changes.....44

Financial services guide.....45

- Purpose of this Financial Services Guide.....45
- Our services and who we act for.....45
- Who are our representatives?.....46
- What does general advice mean?.....46
- Dispute resolution process.....46
- Disclosure of remuneration.....46
- PI Insurance.....47

Why Funeral Insurance?

Your funeral is a chance for friends and family to gather and say goodbye. Yet even the most modest funeral can cost over \$6,000. Insuranceline is committed to offering flexible and affordable Funeral Insurance to make sure your loved ones receive the financial assistance they need to Cover your funeral costs and other expenses, so they're not out of pocket after you've gone.

These are the Benefits you can expect:

Premiums remain the same for life – guaranteed

You can choose a payment option that guarantees that the premium you pay when you first take out your Funeral Insurance always stays the same, so you'll always know how much you need to pay, as long as your Cover is current. See pages 8 and 9.

Fast payouts

Your Funeral Insurance claim is paid to your nominated beneficiary fast – generally within 24 hours of us receiving completed claim requirements – and they are free to use the money however they wish. See page 15.

Cover up to \$15,000

You can choose Cover up to \$15,000, which Covers you for Accidental Death straight away, and then for any cause of death after 12 months. Other causes of death, such as cancer or a heart attack, are not Covered immediately but all causes of death are Covered after 12 months of your Policy or any additional Cover being taken out. See page 17.

Our lifetime protection promise

Once you've held and paid for a Funeral Insurance Policy for five years, your Beneficiary/ies will be eligible for a partial payout once you pass away, even if you have cancelled your Cover or stopped paying your premiums. If you choose not to take this Benefit your premiums will be less.

Plus, if you live a long and healthy life, as we hope you do, then we'll continue your full Cover for free after you turn 90. See page 18.

Capped premiums

We'll make sure you don't pay too much by capping, or limiting the total amount you'll pay. Once you've reached your Premium Cap, your Funeral Insurance Cover will continue for free. See pages 10, 29 and 32.

1

Choosing the right policy

Everyone's lifestyle and circumstances are different, and that's why our Funeral Insurance is flexible with two different payment options to choose from.

The cost of your Policy depends on your age, the Funeral Insurance payment option, the amount of Cover you choose, and whether you select the Lifetime Protection Promise option. From here, you can choose the payment option to best suit your needs.

Your Payment Plan option, as selected by you, will be shown on your Policy Schedule.

Step 1. Choose the amount of Cover

We provide Cover for funeral expenses from \$2,000 up to \$15,000 – simply choose the amount that best suits you. You can also add other people to your Policy.

Don't forget that if your circumstances change, you have the flexibility to adjust the Cover amount – just give us a call on 1800 999 804.

Step 2. Choose your payment option

We understand how important it is for your funeral Cover to fit within your budget. We've made our insurance flexible so you can choose your payment option. With both our payment options, your premiums are guaranteed to remain level for life. That means that the premium you pay when you first take out your Funeral Insurance will stay the same throughout the life of your Policy. Your premium will only go up if you later add Extra Benefits or more people to your Policy or increase the Cover amount. If you miss a payment and your Cover lapses and you take out new Cover, your new Cover will be repriced at the time it starts again. Unless you've reached your Premium Cap, you'll pay for your Funeral Insurance until you reach age 90, and after that, your Cover continues for free.

All payments in connection with this Policy must be made in Australian currency.

Payment option 1: Level

Any Australian Resident between the ages of 21-80 can take out a Level payment option.

As with any insurance product, it's possible that you may pay more in premiums than you are Covered for. To make sure you don't pay too much, we've put a limit on the amount you pay in premiums. Now you'll never pay more in Funeral Insurance premiums than twice the value of your insured amount unless you later make changes to your Cover.

Payment option 2: Level advantage

Would you like to pay a little more when you commence your Policy, to know that overall you won't pay more in premiums than you're Covered for?

With our Level Advantage option, your total premiums paid over the life of your Funeral Insurance won't exceed the amount of Cover you have as long as you don't change your level of Cover, add Extra Benefits (see step 3) or add additional people to your Policy.

Any Australian Resident between the ages of 21-70 can take out the Level Advantage payment option.

Compare and choose the right payment option for you:

	Level	Level Advantage
At what age can I take out and increase Cover?	21-80	21-70
How does the cost compare? Based on \$6,000 Cover for a 60 year old, the following weekly premiums will apply:	\$9.44	\$12.45
How do my premiums work? Your premiums will be displayed on your Policy Schedule	Level premiums guaranteed for life – unless you make changes to your Policy*	Level premiums guaranteed for life – unless you make changes to your Policy*
How long will I be paying premiums for my Funeral Insurance?	Until you reach 90 or the amount that you pay in premiums equals twice your Cover amount, provided you don't make changes to your Policy	Until the amount that you pay in premiums equals your Cover amount, provided you don't make changes to your Policy
How do I know which payment option works best for me?	You're aged 80 or under You'd like to pay less in premiums knowing that your premiums will be capped at twice the amount of your chosen Cover amount	You're aged 70 or under You can afford to pay a little more in premiums so that you won't pay more in premiums than your Cover amount

* Changes include:

- Adding people or removing people from your Policy
- Adding Extra Benefits or removing Extra Benefits from your Policy
- Increasing or decreasing your Cover amount
- The weekly premium amounts above include our Lifetime Protection Promise. Lower premiums generally apply if not selected.

You will pay Level Premiums until the Cap Credit reaches the Premium Cap for each Adult Life Insured. Once the Cap Credit reaches the Premium Cap for an Adult Life Insured, no further Premiums for the Funeral Insurance Benefit will be payable in respect of that Life Insured and Cover will continue for that Life Insured's lifetime.

Step 3. Choose whether you'd like to add extra benefits to your Policy

What Extra Benefits can I choose?

Your Funeral Insurance Covers you for Accidental Death straight away and any cause of death after 12 months. However, if you'd like even more protection, you can increase your Cover by adding Extra Benefits such as Extra Accidental Death Cover for a higher payout, and Extra Accidental Injury Cover to protect yourself in the case of serious or permanent injury. If you choose to add Extra Benefits to your Policy, these Extra Benefits will be in place (as long as your premiums are up to date) until you reach age 90. Thereafter, your Funeral Insurance continues for free but you are no longer eligible for these Extra Benefits (and won't be charged for them after that time).

+ Extra Accidental Death Cover

Your Funeral Insurance already Covers you for Accidental Death the minute your application is accepted. In fact, because of the financial impact an Accidental Death can have, in the event of your Accidental Death (while premiums are payable for Funeral Insurance Cover), your loved ones will receive a double payout – your Funeral Insurance Cover and the same amount again as an Accidental Death Benefit.

However, if you'd like to be Covered for even more, you can take out up to \$50,000 Extra Accidental Death Cover. We'll pay out the claim if the resulting death occurs within six months of the accident.

This option is available to all Australian Residents aged 21 to 80 and you will continue to be Covered until the Policy Anniversary after you turn 90, as long as premiums are paid when they are due.

+ Extra Accidental Injury Cover

Extra Accidental Injury Cover gives you added financial support if you're out of action due to an Accidental Injury. You will receive fixed dollar payouts of up to \$50,000, depending on the type of injury. These include common Accidental Injuries such as broken bones, bed care confinement, burns and serious impairments such as paralysis and blindness that are the result of an accident. Your Registered Medical Practitioner will need to confirm the nature of your injury and how it affects you.

Acceptance for Extra Accidental Injury Extra Cover is guaranteed for Australian Residents aged 21 to 80. As long as you keep your premiums up to date, you will continue to be Covered until either the full Cover amount of \$50,000 has been paid out, until you chose to cancel this Cover, or until the Policy Anniversary after you turn 90 (whichever happens first).

Step 4. Choose whether to add others to your Funeral Insurance

We never know what lies ahead for ourselves or our loved ones. Which is why your Policy allows you to add Cover for others – adults under age 80 (age 70 for our Level Advantage option) and children under age 21. Additional Lives insured can have different Cover amounts, if required, so long as the premium for each additional adult is equal to or more than than the multi-life discount given to the first Life Insured.

When you Cover more than one adult, each adult receives a 15% discount off the Funeral Insurance premium (this doesn't apply to Extra Accidental Death Cover and Extra Accidental Injury Cover).

We know every customer has different needs which is why we have Extra Benefits that you can choose to add to your Policy. The diagram below shows you how you can add Extra Benefits or people to your Policy.

Funeral Insurance Policy	Accidental Death Benefit	Extra Accidental Death Cover	Extra Accidental Injury Cover
1 Adult only	Included	Optional Extra	Optional Extra
+ Add Adults on Policy	Included	Optional Extra	Optional Extra
+ Add Children on Policy	Included	Does not apply	Does not apply

Step 5. Choose your billing schedule and date

Not every household budget is the same, which is why we've also made it easier for you to budget Funeral Insurance into your lifestyle, with a choice of billing options.

We offer you the flexibility of paying by direct debit (fortnightly, monthly or annually) or by credit card (monthly).

Plus, if you pay annually, you get one month absolutely free!

Examples of payment options and weekly cost

The table below shows you some examples of the weekly cost based on the Cover amount and payment option chosen.

	Single Policy	Single Policy	Joint Policy	Single Policy
Customer	Norman	Kate	Pete	Phil
Age	72	56	61	65
Payment Option	Level	Level	Level Advantage	Level
Funeral Insurance Cover Amount	\$3,000	\$10,000	\$6,000	\$8,000
Extra Accidental Death Cover Amount	n/a	\$10,000	n/a	\$35,000
Extra Accidental Injury Cover	n/a	n/a	n/a	Yes
Funeral Insurance Weekly Premium	\$9.57	\$13.43	\$11.39	\$16.07
Extra Accidental Death Cover Weekly Premium	n/a	\$0.32	n/a	n/a
Extra Accidental Injury Cover Weekly Premium	n/a	n/a	n/a	\$3.84
Total	\$9.57	\$13.75	\$11.39	\$18.36

Please note: you can add children (under 21) to your policy for \$3 per month for \$10,000 cover. Weekly costs above include our Lifetime Protection Promise.

How can I take out a Funeral Insurance Policy?

If you're an Australian Resident aged 21 to 80 (or 21 to 70 for the Level Advantage option), you can take out Funeral Insurance over the phone or request more information online. Just call 1800 999 804 between 8am and 8pm (AEST), Monday to Friday or go to insuranceline.com.au for more information.

Taking out Funeral Insurance is quick and easy, and you're guaranteed to be accepted in just a few minutes. You're Covered on the spot for Accidental Death (other causes of death are not Covered in the first 12 months).

If I change my mind, am I entitled to a refund?

We offer a full 30 day money back guarantee (Cooling Off Period), giving you time to go over your Policy, and make sure it's the right one for you. There are no hidden catches – cancel your Policy within 30 days and you'll get a full refund.

If you do cancel your Policy after 30 days, you won't receive your money back. Funeral Insurance works just like your car and home insurance – it's not a savings plan and has no cash value.

Worldwide Cover

Cover is available under this Policy 24 hours a day and is not restricted by the geographical location of either the Life Insured or the residence of any Life Insured.

All correspondence from us to you will be mailed to an Australian postal address, even if you are residing in a country other than Australia.

How do my loved ones make a claim if they ever need to?

A Funeral Insurance Policy helps take the financial difficulty out of what can be a very stressful time. That's why, if your loved ones need to make a claim, we've kept the process as straightforward as possible:

Step 1.

Call us on 1800 999 804 and we will send a claim form or go to insuranceline.com.au to download one. The sooner a claim is made, the sooner your loved ones can receive the financial assistance they need.

Step 2.

Either you or your representative must complete the relevant form and return it, together with any requested documents we need to validate the claim. Depending on the claim, we'll let them know what we need when they call us. For example, we may request birth and death certificates or evidence from a Medical Practitioner.

Once we've received the completed claim information acceptable to us to determine that the claim should be paid, your loved ones will receive the money fast; we generally pay out Funeral Insurance within 24 hours of receiving completed claim requirements. Some Accidental Death and Accidental Injury claims will take longer to assess, but we'll make sure we keep them informed throughout the process.

Who receives the claim payout?

You can nominate one or more Beneficiaries over the age of 18 to receive the claim payout if you were to pass away. If you do not nominate a Beneficiary, the claim will be paid to the Policy Owner or the Policy Owner's estate.

Misstatement of age

Proof of age must be provided using a birth certificate, passport or drivers licence. If the age of the Life Insured has been understated on the application for this Policy, then the Benefit payable in respect of a Life Insured will be recalculated based on the Benefit that the premium would have purchased if the correct age had been provided. If the age of the Life Insured has been overstated we will refund any excess premium paid. Where the terms and conditions of a Benefit vary by the age of the Life Insured or the Insured Child, the correct age of the Life Insured or the Insured Child, if applicable, will be used to determine whether a Benefit is payable.

Accidental Death Extra Claims

For Accidental Death Extra claims, we will require proof of the accidental nature of the death of the Life Insured for which the claim is being made, evidenced by a certified copy of the Death Certificate, Medical Attendant's Certificate or Coroner's report as required by us. We will require proof of the injury sustained by the Life Insured for which the claim is being made, evidenced by (and not limited to):

- (a) appropriate evidence from a Medical Practitioner, including confirmatory investigations such as clinical, radiological, histological and laboratory evidence, and
- (b) if the condition requires a surgical procedure to be performed, the procedure must be the usual treatment for the condition and be medically necessary.

Fraudulent claims

We will refer any suspected fraudulent claims or illegal activity to the relevant law enforcement authorities and will, to the extent permissible by law, seek to recover any monies paid, expenses or damages incurred in obtaining such evidence as may be required to protect our rights. We are able to cancel your Policy and no claim will be payable if you make a fraudulent claim.

With Insuranceline, there's no small print or nasty surprises. We encourage our customers to make sure they understand all aspects of their Funeral Insurance, so here are a few things you need to know before you take out your Cover.

Funeral Insurance

Funeral Insurance provides for an amount to be payable on the death of the Life Insured.

If a Life Insured dies as a result of Accidental Death, on proof satisfactory to TAL whilst the Funeral Insurance Benefit is Active, we will pay the Funeral Insurance Benefit Amount in respect of that Life Insured.

If, within the Accidental Death Period, a Life Insured dies as a result of anything other than an Accidental Death, on proof satisfactory to us, the Benefit Amount will not be paid. We will however, pay an amount equal to all Funeral Insurance premiums paid to the date of death in respect of that Life Insured.

If, after the Accidental Death Period, a Life Insured dies for any reason, on proof satisfactory to us, we will pay the Benefit Amount in respect of that Life Insured.

The maximum Benefit Amount available for a Life Insured is \$15,000. The Benefit Amount cannot be increased to more than \$15,000 for any Life Insured.

Cover under the Funeral Insurance Benefit for a Life Insured ceases on the earliest of the following Policy events, subject to the Lifetime Protection Benefit applying:

- your Policy being cancelled;
- the Benefit Amount being paid in full for the Life Insured;
- an amount being paid for that Life Insured in accordance with a refund of premiums because the Life Insured died within the first 12 months as a result of anything other than an Accidental Death; or
- the cancellation of all Adult Lives Insured on the Policy.

Lifetime Protection Benefit

If Lifetime Protection has been selected and the Funeral Insurance Benefit for a Life Insured has been Active continuously on a Policy for five years or more, the Lifetime Protection Benefit applies for that Life Insured.

This means that once you've been Covered for five years, even if you cancel, a portion of your Funeral Insurance Cover can still be paid at the time of a claim, even if you are no longer paying. The proportion that will be payable is based on how long your Funeral Insurance was current: Cover for 5–9 years receives a 25% payout; Cover for 10–14 years will get a 50% payout; and Cover for 15 years plus is a 75% payout of the average Funeral Insurance Cover amount at the time of your death. If you wish to obtain full Cover again, please contact us about taking out a new Policy. Please note that if you have opted out of our Lifetime Protection Promise, no portion will be payable if your Cover is cancelled at any time.

Number of years continuously active from Cover commencement	% average Funeral Insurance Cover paid on death
Less than 5	0%
5-9	25%
10-14	50%
15+	75%

Accidental Death Extra

If a Life Insured is Covered for the Accidental Death Extra Benefit, it will be shown in the Policy Schedule. The Accidental Death Extra Benefit, if selected and shown on your Policy Schedule, is payable if the Life Insured dies as a result of an Accidental Death, or within six months of the physical injury leading to the Life Insured's death on proof satisfactory to us. The Accidental Death Extra Benefit for a Life Insured starts on the date that Policy Schedule is issued and stops at the earliest of:

- the cancellation of the Accidental Death Extra Benefit for that Life Insured;
- your Policy being cancelled;
- the Accidental Death Extra Benefit Amount being paid in full for that Life Insured;
- the cancellation of the Funeral Insurance Benefit for that Life Insured; or
- the Policy Anniversary following the Life Insured turning 90.

Accidental Injury Extra

If a Life Insured is Covered for the Accidental Injury Extra Benefit, it will be shown on the Policy Schedule. The Accidental Injury Extra Benefit is payable in the amount specified if the Life Insured suffers an Accidental Injury event as listed in this Document, on proof satisfactory to us. The maximum cumulative Benefit Amount is \$50,000 for all Accidental Injury Extras paid for a Life Insured under the Policy, for example, you make a claim for a Life Insured's fractured hip and receive a payout of \$2,500. Your future claimable Benefit Amount is now \$47,500.

The Accidental Injury Extra Benefit for a Life Insured starts on the date the Policy Schedule is issued and stops at the earliest of:

- the cancellation of the Accidental Injury Extra Benefit for that Life Insured;
- the maximum cumulative Benefit of \$50,000 being paid in respect of that Life Insured;
- your Policy being cancelled;
- the death of the Life Insured;
- the cancellation of the Funeral Insurance Benefit for that Life Insured; or
- the Policy Anniversary following the Life Insured turning 90.

Only one Accidental Injury claim will be paid at a time. If the Life Insured suffers two or more injuries, as listed in this Policy, as a result of the same event, for any resulting claim, only the higher Benefit Amount will be paid.

Only one Accidental Injury claim is payable per event per year.

Here's a list of the Accidental Injury payouts you could receive:

Fracture of the:	Definition	Amount Payable
Leg (below the knee), knee cap, upper arm, shoulder bone or jaw, forearm (above the wrist), collarbone or heel, foot other than toe, ankle, hand other than finger or thumb, elbow or wrist	Fracture of the leg below the knee (tibia or fibula), knee cap, upper arm (humerus), shoulder bone (scapula) or jaw; Fracture of the forearm (radius or ulna), collarbone (clavicle) or heel; Fracture of the foot (other than toe), ankle, hand (other than finger or thumb); Fracture of the elbow or wrist as a direct result of an accident requiring fixation, immobilisation or plaster/fibreglass cast treatment by a Medical Practitioner for the affected area within 48 hours of the Accident.	\$1,000
Hip, thigh (leg above the knee), pelvis, skull or spine	Fracture (either femoral neck or intertrochanteric), dislocation or subluxation of the hip; Fracture of the leg above the knee (femur) or pelvis; Fracture of the skull or spine as a direct result of an Accident requiring fixation, immobilisation or plaster/ fibreglass cast treatment by a Medical Practitioner for the affected area within 48 hours of the Accident.	\$2,500
Bed Confinement		
Any injury requiring the Insured to be confined to bed for at least 120 hours	As a direct result of an Injury, the Life Insured is confined to bed for a period of at least 120 consecutive hours (5 days) or longer as advised by a Medical Practitioner.	\$2,500

Temporary Incapacity due to accident										
<p>If the Life Insured is seriously incapacitated for longer than 30 consecutive days due to an Accidental Injury and is unable to perform at least two of the Regular Daily Activities listed in the definition without the physical assistance of another person</p>	<p>Regular Daily Activities means:</p> <ul style="list-style-type: none"> - Bathing - the ability to shower and bathe; - Dressing - the ability to put on and take off clothing; - Toileting - the ability to get on and off, and use, the toilet; - Mobility - the ability to get in and out of bed and a chair; - Feeding - the ability to get food from a plate into the mouth. 	<p>\$2,500</p>								
Burns										
<p>If the Life Insured suffers 3rd degree burns to at least 2.5% of the body surface</p>	<p>Means tissue injury caused as a direct result of an Accident by thermal, electrical or chemical agents resulting in 3rd degree burns to at least the following percentages of the body surface as measured by Lund & Browder body surface chart.</p>	<table border="0"> <tr> <td>2.5%</td> <td>\$2,500</td> </tr> <tr> <td>5%</td> <td>\$5,000</td> </tr> <tr> <td>10%</td> <td>\$20,000</td> </tr> <tr> <td>≥20%</td> <td>\$50,000</td> </tr> </table>	2.5%	\$2,500	5%	\$5,000	10%	\$20,000	≥20%	\$50,000
2.5%	\$2,500									
5%	\$5,000									
10%	\$20,000									
≥20%	\$50,000									

Loss of Use of:	Definition	Amount Payable
One leg or arm	Means the total and irrecoverable loss of use of one leg or one arm as a direct result of an Accident.	\$25,000
One foot or hand or sight in one eye	Means the total and irrecoverable loss of any one of the following – foot, hand and sight in one eye as a direct result of an Accident. 'Loss' in this instance means the total and permanent loss of: <ul style="list-style-type: none"> - the use of the foot or hand from the ankle or wrist joints; or - sight to the extent that visual acuity in either eye, on a Snellen Scale after the correction by a suitable lens, is less than 6/60. 	\$25,000
Both feet or hands or sight in both eyes	Means the total and irrecoverable loss of both feet or hands or sight in both eyes as a direct result of an Accident. 'Loss' in this instance means the total and permanent loss of: <ul style="list-style-type: none"> - the use of both feet or hands from the ankle or wrist joints; or - sight to the extent that visual acuity in both eyes, on a Snellen Scale after the correction by a suitable lens, is less than 6/60. 	\$50,000
Any combination of two of a hand, a foot and sight in one eye	Means the total and irrecoverable loss of any two of the following: hand, foot and sight in one eye as a direct result of an Accident. 'Loss' in this instance means the total and permanent loss of: <ul style="list-style-type: none"> - the use of the hand or foot from the ankle or wrist joints; or - sight to the extent that visual acuity in either eye, on a Snellen Scale after the correction by a suitable lens, is less than 6/60. 	\$50,000

Serious Impairments		
Paralysis	Means the total and permanent loss of function of two or more limbs as a direct result of an Accident causing permanent damage to the nervous system.	\$50,000
Major Head Trauma	Means an accidental head injury resulting in neurological deficit causing at least a permanent 25% impairment of Whole Person Function as diagnosed by a Medical Practitioner who is a specialist in the relevant field as approved by us.	\$50,000
Blindness	Means the total and irrecoverable loss of sight (whether aided or unaided) in both eyes to the extent that visual acuity in both eyes, on a Snellen Scale less than 6/60, as a result of an Accident.	\$50,000
Deafness	Means the total and irrecoverable loss of hearing, in both ears as a direct result of an Accident – 91 db HL or greater.	\$50,000

What isn't covered?

Funeral Insurance

For the first 12 months of your Funeral Insurance Policy, the Life Insured is Covered for Accidental Death only. After that, you're Covered for any cause of death – with no exceptions.

Extra Accidental Death Cover

If you choose to add the Extra Accidental Death Cover, please be aware that the Life Insured is not Covered for that Extra Accidental Death Cover in any of the following circumstances:

- actual or attempted intentional self-injury or suicide.
- participation in any criminal or unlawful activity;
- being under the influence of alcohol (over the prescribed legal limit for driving a motor vehicle according to the relevant state or territory limit) or any drug not prescribed by a Medical Practitioner and taken in the correct dosage;
- war, hostilities or war-like operations (whether war is declared or not), civil commotion, civil war or rebellion, but not terrorism, outside of Australia or New Zealand;
- undertaking a dangerous occupation. Dangerous occupations are those occupations that would ordinarily be regarded as dangerous including, but not limited to, test pilot, explosives workers, underground miners, bomb disposal workers and over 20 metre high window cleaners. This does not include normal travel to and from dangerous occupations; or
- participation in dangerous pursuits. Dangerous pursuits are those activities that would ordinarily be regarded as dangerous, including but not limited to professional sports, hang gliding, underwater diving beyond 30 metres, motor car or motor cycle sports, speed contests, skydiving, parachuting and flying in an aircraft (except as a fare paying passenger or aircrew traveling in a licensed commercial aircraft engaged in public transport service). This does not include normal travel to and from dangerous pursuits.

If the Accidental Death Cover is not paid, we will not refund the Premiums you have paid in respect of the Benefit.

Extra Accidental Injury Cover

If you choose to add the Extra Accidental Injury Cover, please be aware that a Life Insured is not Covered for that Extra Accidental Injury Cover in any of the following circumstances:

- an Accidental Injury, which occurred prior to the start date of your Policy;
- any intentionally self-inflicted act, including attempted suicide;
- participation in any criminal or unlawful activity;
- being under the influence of alcohol (over the prescribed legal limit for driving a motor vehicle according to relevant state of territory limit) or any drug not prescribed by a Medical Practitioner and taken in the correct dosage;
- any Injury directly brought about by any cause other than an Accident;
- war, hostilities or war-like operations (whether war is declared or not), civil commotion, civil war or rebellion, but not terrorism, outside of Australia or New Zealand;
- undertaking a dangerous occupation. Dangerous occupations are those occupations that would ordinarily be regarded as dangerous including, but not limited to, test pilot, explosives workers, underground miners, bomb disposal workers and over 20 metre high window cleaners. This does not include normal travel to and from dangerous occupations; or
- participation in dangerous pursuits. Dangerous pursuits are those activities that would ordinarily be regarded as dangerous, including but not limited to professional sports, hang gliding, underwater diving beyond 30 metres, motor car or motor cycle sports, speed contests, skydiving, parachuting and flying in an aircraft (except as a fare paying passenger or aircrew traveling in a duly licensed aircraft engaged in public transport service). This does not include normal travel to and from dangerous pursuits.

If the Accidental Injury Cover is not paid, we will not refund the premiums you have paid in respect of the Benefit.

What is Accidental Death?

Accidental Death means death from a physical injury caused directly by violent, external and visible means. You're Covered for Accidental Death from the minute you take out your Policy.

Accidental Death does not include and we will not pay any Accidental Death Benefit for a death caused by:

- actual or attempted intentional self-injury or suicide;
- sickness, medical or surgical treatment; or
- the taking of intoxicating liquor or drugs other than those prescribed for the Life Insured and taken in the correct dosage.

What if I pass away in the Accidental Death period?

If you pass away from a non-accidental death within the first 12 months, we will refund all the premiums that had been paid towards your Funeral Insurance Cover.

Can I make alterations to my Policy after it has commenced?

You have the flexibility to make changes to your Policy after it has commenced. For example, you can add additional people to your Policy or remove existing ones, change your Cover amount, switch between premium payment options or change your billing information.

Please note these changes may have an impact on your Policy. By adding people to your Policy or increasing your Cover amount, your premiums will go up. If you reduce your Cover amount it will also reduce the proportion of your premiums that count towards your Premium Cap. We understand that situations can change. If you find yourself having trouble budgeting for your Policy, please call us – we'll go through your options and work out the best way for you to manage your premiums, while still keeping your Cover.

Increases

Benefit Amount increases can be made to the Funeral Insurance Benefit and the Accidental Death Extra Benefit, and the premium you have to pay will be increased correspondingly. The Accidental Injury Extra Benefit has a predetermined Benefit Amount that cannot be increased.

You may increase the Funeral Insurance Benefit Amount for each Life Insured to a maximum amount of \$15,000 prior to the Life Insured attaining 80 years of age (age 70 for our Level Advantage option).

Any increase to the Funeral Insurance Benefit Amount will be subject to the 12 month Accidental Death Period for the increased portion. Any increase to the Funeral Insurance Benefit Amount will not be payable during the 12 month Accidental Death Period for the increased amount.

Any increase to the Funeral Insurance Benefit Amount will cause an adjustment to the Premium Cap. For the Level Payment Plan, the Premium Cap will be increased by twice the amount of the increase. For the Level Advantage Payment Plan, the Premium Cap will be increased by the incremental amount of the increase.

Decreases

Benefit Amount decreases can be made to the Funeral Insurance Benefit and Accidental Death Extra Benefit, and the premium you have to pay will be decreased accordingly. The Accidental Injury Extra Benefit has a predetermined Benefit Amount that cannot be decreased.

The Funeral Insurance Benefit Amount may be decreased at any time, however the proportion of Cap Credit relative to the Premium Cap will remain the same before and immediately after the decrease.

For example, your Premium Cap is \$6,000 and your Cap Credit is \$3,000 so far, which is 50% of your Premium Cap. You reduce your Benefit Amount to \$5,000. Your Cap Credit remains at 50% of your (new and reduced) Premium Cap – the same proportion relative to the original Premium Cap – which means you have \$2,500 left to pay before reaching the Premium Cap (assuming no other changes to your Benefit Amount are made).

Beneficiary/ies

If you are the sole Life Insured and Policy Owner under this Policy, you can nominate one or more people to receive the Funeral Insurance and Accidental Death Extra Benefits payable under this Policy. They are called the Beneficiary/ies. A Beneficiary can be a Life Insured or a third party. If there are one or more Beneficiaries under this Policy:

- (a) this will be indicated on your Policy Schedule; and
- (b) the Beneficiary will receive the proceeds of this Policy in the proportions indicated on your Policy Schedule if a claim is paid by us.

If no nomination has been made, the proceeds will be paid to the Policy Owner or the Policy Owner's estate.

Any nomination is binding on us. However, you may revoke or change a nomination at any time. Any nomination, revocation or change in the details of a Beneficiary has no effect unless we have issued a written confirmation to you.

Maximum Benefit per Life Insured

The maximum Funeral Insurance Benefit that can be paid per Life Insured for any Funeral Insurance Benefit is \$15,000. The maximum Accidental Death Extra Benefit that can be paid per Life Insured is \$50,000. The maximum Accidental Injury Extra Benefit that can be paid per Life Insured is \$50,000.

Children turning 21

Insurance Cover for any child on this Policy will continue as an Adult Life Insured as part of this Policy, on the Policy Anniversary after that child turns 21. At that time, you will be advised of any change in premium, and any other Benefits which may be available.

More than one Life Insured

Your Funeral Insurance Policy can Cover more than one Life Insured, subject to entry age requirements. All Lives Insured will be shown individually on your Policy Schedule.

If more than one Life Insured is Covered under this Policy, a reference to a Life Insured means each respective Life Insured individually.

The 30 day Cooling Off Period applies only once when you first receive your Policy. No further Cooling Off Periods will apply for additional Lives Insured.

You may add a new Life Insured to your Policy after the Commencement Date. If a new Life Insured is added, a new Policy Schedule will be sent to you listing all of the Lives Insured then Covered under this Policy, effective as at the Issue Date of the Policy Schedule. Lives Insured added after the Commencement Date will be subject to an Accidental Death Period of 12 months from the Issue Date of the Policy Schedule.

Additional Lives Insured can have different Funeral Insurance and, if applicable, Extra Accidental Death Cover amounts. For Funeral Insurance, the premium for each additional adult will be equal to or more than the multi-life discount given to the first Life Insured.

When does my Policy end?

As long as you keep your premiums up to date and pay when due, you'll continue to be Covered. Funeral Insurance has no specific end date. And remember, once the premiums you've paid reach the cap for your chosen payment option, you'll no longer have to make payments, yet you'll still be Covered for the rest of your life. We'll let you know when that time comes.

Your Policy starts at the Policy Commencement Date and ends on the first to occur of:

- cancellation for non-payment of premiums for that Life Insured;
- the death of the last remaining Adult Life Insured under the Policy;
- the date we receive a written request from the Policy Owner to cancel the Policy altogether.

If you choose to add the Extra Accidental Death Cover or Extra Accidental Injury Cover to your Policy, please be aware that these additional Extra Benefits will only Cover you while premiums are up to date until you've reached age 90.

If Lifetime Protection has been selected and the Funeral Insurance Benefit for a Life Insured has been Active for 5 years or more, the Lifetime Protection Benefit applies for that Life Insured.

5

Premiums

The following table explains both your and our obligations relating to the payment of premiums under our Policy.

Payment Plan	How it works	Amendments	Premium Cap
All Plans	<p>Premiums cease when Cap Credit reaches the Premium Cap.</p> <p>This is an insurance policy, not a savings plan, which means you may pay more or less in premiums than your Benefit Amount over the life of the Policy.</p>	<p>You can make changes to your Payment Plan at any time.</p> <p>Changing between Payment Plans will impact your premium and Cap Credit.</p>	<p>Applicable for Adult Lives Funeral Insurance Benefit only. The Accidental Death Extra Benefit and Accidental Injury Extra Benefit do not have a Premium Cap.</p>
Level	<p>Premium remains level throughout life of the Policy.</p>	<p>You can make changes to the following at any time:</p> <ul style="list-style-type: none"> • Benefit Amount • Lives Insured • Payment Plan <p>Your premium and Cap Credit may change as a result.</p>	<p>You will be limited to paying no more than twice your Benefit Amount in premiums over the life of the Policy – unless Cover is adjusted by you.</p>
Level Advantage	<p>Premium is level throughout the life of the Policy and is higher than Level.</p>	<p>You can make changes to the following at any time:</p> <ul style="list-style-type: none"> • Benefit Amount • Lives Insured • Payment Plan <p>Your premium and Cap Credit may change as a result.</p>	<p>You will be limited to paying no more than the amount of the Funeral Insurance Benefit, unless Cover is adjusted by you.</p>

The premium you have to pay

The total first year's premium, or the first instalment of that premium, you have to pay is shown in your Policy Schedule.

Your premium will change when any of the following events occur:

- if your Benefit Amount is increased or decreased;
- if you add or remove a Life Insured from your Policy;
- if you change your premium frequency from yearly, then you will lose the annual premium payment discount;
- if a Policy has more than one Adult Life Insured and Cover ends as a result of the death or the removal of one or more Adult Lives Insured, such that premiums remain payable only in respect of one Adult Life Insured, then the discount for more than one Adult Life Insured will no longer apply.

How are your premiums calculated?

Premiums are calculated separately for each Life Insured and are based on their age, gender, level of Cover and any applicable discounts. Once Covered, your premiums do not go up just because you get older.

When do you have to pay?

The premium is due at the frequency shown in the Policy Schedule. The specific dates for the coming year are also outlined in your Policy Schedule which will be sent out at each Policy Anniversary.

You can change the frequency of premium payments at any time. An updated Premium Schedule will be sent for your records.

If you are paying by direct debit or credit card, the premium will be deducted from the account that you have authorised us to debit, on the agreed date and frequency. Depending on weekends and public holidays, the deduction will be made on the next business day. If we are unable to debit on the agreed date due to insufficient funds we will, subject to the relevant debit authority, attempt to debit again.

Unpaid premium and premium dishonours

If you don't pay the premium when due, or the premium deduction from your account can't be made, then:

- if the unpaid premium is the first premium, the Policy will be cancelled and be treated as if it had not operated at all; or
- if the unpaid premium is a premium other than the first premium, we will allow 30 days from the due date to make this payment. If we have not received payment by this time, we will send you a notice telling you that we will cancel your Policy if the premium then due is not paid by the date shown in the notice. This date will be at least 28 days from the date of the giving of this notice. If you do not pay the premium by that date we will cancel the Policy and the insurance Cover stops.

No Benefits will be paid if the Policy is cancelled.

If Level Advantage has been selected, then Cover under the Policy will be terminated for all Lives Insured, regardless of whether they have reached their individual Premium Cap.

If Lifetime Protection has been applied to the Funeral Insurance Benefit for a Life Insured, the Cover under the Policy will not end, but will be reduced proportionally in line with the schedule of Lifetime Protection percentages as shown in the definition of Lifetime Protection Benefit.

What happens if I stop paying?

Your Cover only continues while premiums are paid when due, so if you stop paying, your Cover will end. As Funeral Insurance is an insurance Policy, not a savings plan, it works in the same way as other insurance, such as car insurance. If you stop paying or cancel outside of the first 30 days, there will be no refund of any of the money you've paid in premiums.

Of course, we understand that today's financial demands can be tough, so if you're having trouble paying, please contact us immediately to talk it over. We may be able to provide an alternative that better suits your budget, whilst allowing you to help maintain the financial assistance your loved ones could receive if you were to pass away.

Will my premiums go up?

Your premiums are guaranteed to remain unchanged for life as long as your Policy is active and you don't, at a later date, make changes to your Cover amount or add Extra Benefits. For example, your premiums will go up if you add another person to your Policy or increase the level of Cover.

Are my premiums tax deductible?

Generally, the premiums paid will not be tax deductible nor will the Benefits be assessable for income tax purposes. The taxation information in this PDS is based on the continuation of present laws and their current interpretation and is a general statement only. For comprehensive advice regarding taxation please contact your registered accountant or the Australian Taxation Office.

Cap credit and premium cap limits

The Cap Credit only relates to premiums paid for the Funeral Insurance Benefit of each adult Life Insured – that is, the premium paid for any child Life Insured do not contribute to the Cap Credit of any other Life Insured Covered on your Policy. Similarly, premiums paid for the Accidental Death Extra and Accidental Injury Extra Benefits do not contribute to the Cap Credit of that Life Insured.

Each Adult Life Insured on the Policy will have their own Cap Credit and Premium Cap which means that even if a Life Insured has reached their individual Premium Cap, there may be other Lives Insured on the Policy for whom premiums will continue to be payable.

Reinstatement

If this Policy lapses it may be reinstated at our sole discretion at any time within 3 months after the date that the unpaid amount became due, on such terms and conditions as we may require including, but not limited to the following:

- outstanding premiums will need to be paid before a Policy can be reinstated;
- reinstatement is not guaranteed;
- reinstatement may be in the form of a new Policy, with a new Policy number and contract conditions. In this case, any Lifetime Protection Value which has accrued will remain in place on the lapsed Policy until claimed and the Cap Credit for the new Policy will start at zero.

Changing between payment plans

You can change your Payment Plan at any time, subject to the following conditions as applicable:

- if you change your Payment Plan, your Accumulated Premium will be reset to zero, unless you revoke the change on the same business day; or
- if you have changed Payment Plans, only the premiums paid after the effective date of the change will be counted towards your Accumulated Premium.

Premium end date

Premium payments for the Funeral Insurance Benefit in respect of a Life Insured will cease at the earliest of:

- the Policy Anniversary after the Life Insured turns 90;
- the point when the Cap Credit for a Life Insured equals the Premium Cap for that Life Insured.

In all of the above cases, the Funeral Insurance Benefit will continue for free for the remaining life of the Life Insured.

Premiums for the Accidental Death Extra and/or Accidental Injury Extra Benefits are independent of the Funeral Insurance Benefit and are payable until the Policy Anniversary after the Life Insured turns 90, at which time, Cover under these Benefits ends.

Why Insuranceline?

Insuranceline is Australia's number one choice for direct life insurance*. Why? Because above all, we believe that all Australians have the right to be protected and that this peace of mind should not be a luxury, but an affordable part of everyday life.

*Source: Direct Life Insurance 2015, Rice Warner Actuaries Pty Ltd.

Any questions?

If there's anything we haven't answered for you here, or even if there's anything you're not completely sure about, please don't hesitate to contact us. We'd love to hear from you! Here's how to contact us:

1800 999 804 8am – 8pm (AEST) Monday to Friday
customerservice@insuranceline.com.au
Reply Paid GPO Box 5380, Sydney NSW 2001

For legal purposes and quality control, all phone calls are recorded. If you don't want your call recorded, please tell us. In this case, we may ask that your request be put in writing.

Surrender value

Your Funeral Insurance Policy does not contain a surrender value or cash value, and no premiums or refunds will be payable to the Policy Owner or Lives Insured in the event of Policy cancellation, except within the 30 day Cooling Off Period.

Statutory fund

The assets of TAL's Statutory Fund Number 1 will alone be liable for the payment of the Benefits under this Policy. You have no rights to the assets of TAL or any other TAL statutory fund.

Currency

All payments in connection with this Policy must be made in Australian dollars.

Risks

There are risks involved with taking out insurance that you should be aware of. These include:

- you may not select the right insurance product and Cover level for your needs;
- it is possible to pay more in premiums than the amount you are Covered for;

- if you are replacing another insurance contract, you should consider the terms and conditions of each insurance contract of each before deciding to make the change; and
- our policies do not contain a savings or investment component, which means that if you cancel your Policy after the 30 day Cooling Off Period, you will not receive any money back.

You should consider if the Policy meets your needs both now and in the future. You may need to seek assistance from a financial adviser to assist you to determine if the terms are consistent with your objectives, financial situation and needs.

Dispute resolution process

Insuranceline offers an internal dispute resolution service in relation to any concerns you may have about your Policy, our services or your privacy. If a dispute is not resolved to your satisfaction through our internal dispute resolution service, you may then refer your concern to an external dispute resolution service. These are free of charge to you.

Internal dispute resolution service

In the first instance, we hope that our representatives can handle any concern you may have. Please call us on 1800 999 804 or write to us at Insuranceline, Reply Paid GPO Box 5380, Sydney NSW 2001 or via email at insuranceline@insuranceline.com.au. If you are not satisfied with our initial response, please ask to speak to the Complaints Officer who will handle your matter personally, or write to our Complaints Officer.

External dispute resolution service

In the event that we are unable to resolve your concern, you have the right to contact the Financial Ombudsman Service (FOS) which is an independent complaints resolution body. Call FOS on 1800 367 287 or write to G.P.O Box 3, Melbourne Victoria 3001. FOS is an independent body and its service to you is free. Different terms of reference are applied by FOS depending on whether your complaint relates to a life insurance product or a general insurance product. Please refer to FOS for details.

To use FOS, you must have firstly attempted to use our internal dispute resolution service.

Your privacy

Personal and sensitive information is collected from you or about you to enable us to provide our insurance products or services to you. Further information may be requested from you at a later time, such as if you want to make alterations to your insurance Policy or at claim time when we may need to collect financial and health information about you to process the claim.

If you do not supply the required information to us we may not be able to provide our products and services to you or pay your claim.

Our Privacy Policy

The way in which we collect, use and disclose your information is described in our Privacy Policy available at www.insuranceline.com.au/Privacy-Policy or is free of charge on request.

Our Privacy Policy contains details about the following:

- the kinds of personal information that we collect and hold;
- how we collect and hold personal information;
- the purposes for which we collect, hold, use and disclose personal information;
- how our customers may access personal information about them which is held by us and how they can correct that information; and
- how we deal with any complaints that our customers may have regarding privacy issues.

Contacting us about privacy matters

If you have any questions regarding privacy related matters, about how we manage your information or a complaint relating to privacy please contact us using the contact details below:

Reply Paid GPO Box 5380, Sydney NSW 2001
1800 999 804
customerservice@insuranceline.com.au

We rely on the accuracy of the information you provide. If you think that we hold information about you that is incorrect, please let us know using the communication methods above.

Additional Information about privacy issues

The website of the Privacy Commissioner which is available at <http://www.oaic.gov.au/> is a useful source of additional information about both the privacy rights of individuals and the privacy laws imposed on organisations such as ours. This website also contains sensible steps that individuals can take to protect their

information when dealing with organisations and when using modern technology. We take no responsibility for the contents of this Government run website.

Access to information held about you

Under the current privacy legislation, you are generally entitled to access the personal information we hold about you. To access that information, simply make a request in writing. This process enables us to confirm your identity for security reasons and to protect your personal information from being sought by a person other than yourself.

If, for any reason we decline your request to access and/or update your information, we will provide you with details of the reasons. In some circumstances it may be appropriate to provide copies of complex medical information to a treating GP rather than directly to our customer so that the medical terminology can be explained.

There are some limited exemptions where TAL would be unable to provide the personal information that we hold about you and these include the following circumstances:

- If the access would have an unreasonable impact on the privacy of other people; or
- If the access request is frivolous or vexatious; or
- If giving access would be unlawful.

Disclosure of information

In processing and administering your insurance (including at the time of claim) we may disclose your personal information to other parties such as organisations to whom we outsource our mailing and information technology, Government regulatory bodies and other companies within the TAL group and accountants (if applicable). We may also disclose your personal information (including health information) to other bodies such as the reinsurers, health professionals, investigators, lawyers and external complaints resolution bodies.

Generally we do not use or disclose any customer information for a purpose other than providing our products and services unless:

- our customer consents to the use or disclosure of the customer information; or
- the use or disclosure is required or authorised under an Australian law or a court/tribunal order; or
- the use or disclosure of the information is reasonably necessary for one or more enforcement related activities conducted by, or on behalf of, an enforcement body e.g. the police.

Direct marketing and opt out

From time to time we and our related entities or business partners may use your personal information for the purpose of marketing our products and services, together with the products and services of third parties that we think may be of interest to you. If you do not want us to use or disclose your personal information for these marketing purposes please contact us on 1800 999 804 or email customerservice@insuranceline.com.au

Contact from us

From time to time we may contact you by telephone about your Policy. If you do not want to receive calls from us at all, or would prefer to receive calls at certain times or days, please contact us by calling 1800 999 804 or write to Insuranceline Reply Paid GPO Box 5380, Sydney NSW 2001.

Accident means an event where injury is caused solely and directly by violent, external and visible means.

Accidental Death means a death as a result of physical injury caused solely and directly by violent, external and visible means, while Cover is in force. It does not include death arising from:

- actual or attempted intentional self-injury or suicide;
- sickness, medical or surgical treatment;
- the taking of intoxicating liquor or drugs other than those prescribed for the Life Insured and taken in the correct dosage.

Accidental Death Extra is an optional Benefit which if taken out is payable in the event of the Accidental Death of a Life Insured to an amount shown on the Policy Schedule

Accidental Death Period means the period of time that the Life Insured is Covered for Accidental Death only under the Funeral Insurance Benefit. The Accidental Death Period begins at the Commencement Date of the Funeral Insurance Benefit or the effective date of any increase to the Benefit Amount in relation to the increased amount.

Accidental Injury means a new physical injury caused solely and directly by violent, external and visible means, resulting in serious incapacity as confirmed by a registered Medical Practitioner, while Cover is in force. It does not include the exacerbation of a previous injury, or injury arising from:

- attempted intentional self-injury or suicide;
- sickness, medical or surgical treatment;
- the taking of intoxicating liquor or drugs other than those prescribed for the Life Insured and taken in the correct dosage.

Accidental Injury Event means the specific injury sustained by a Life Insured that is Covered by Accidental Injury Cover as outlined on pages 20-23 of this document.

Active, in respect of a Benefit for a Life Insured, means that Benefit is in force and premium payments have not ceased.

Adult means an adult person over the age of 21.

Australian Residents means an Australian or New Zealand citizen or Australian permanent residents, currently residing in Australia who has received the PDS in Australia.

Beneficiary means the person/s, institution or estate selected by you to receive, in the proportion nominated, the Benefit Amount payout in the event of your death.

Benefit or Benefit Amount means the amount payable on the death (or Terminal Illness) of the Life Insured, subject to the terms of Cover outlined in this document, with any respective increases or indexation applicable shown in the Policy Schedule.

Cap Credit means the amount which is compared against the Premium Cap for the purpose of determining whether Funeral Insurance Benefit premiums for a Life Insured cease to be payable. Generally, it is determined as the sum of each Adult Life Insured's Funeral Insurance Benefit premiums paid by you to us over time, net of any refunds and adjusted for any decreases or changes to the Payment Plan, where applicable. The premiums paid for the Accidental Death Extra and Accidental Injury Extra are not included in the Cap Credit.

Commencement Date means the date on which your Policy starts and is the date from which you are able to claim against the Policy in the event of the death of a Life Insured in accordance with the contents of this document. Where we have agreed to add additional Lives Insured to the Policy after the Commencement Date the Commencement Date of any such additional Life Insured will be deemed to be the Issue Date of the Policy Schedule we send to you confirming the addition of that Life Insured.

Cover or Covered refers to the circumstances in which a Benefit Amount is payable in accordance with this document. The Cover your Policy provides is shown in your Policy Schedule.

Funeral Insurance is Life Insurance providing a sum payable in the event of the death of a Life Insured.

Immediate Family Member means a spouse, de facto, partner (same or opposite gender), child, grandchild, parent, grandparent, sibling, aunt, uncle, cousin, niece or nephew.

Injury means an accidental bodily injury suffered by the Life Insured after the Cover Commencement Date or in the case of an increase to a Benefit, after the commencement of the increase. The Injury must be caused directly and solely by an Accident.

Issue Date means the date on which a new Policy Schedule is issued due to changes made to your Policy. This is the date from which you are able to claim against the Policy for Lives Insured or additional Benefits added after the Commencement Date.

Level is a Payment Plan available whereby Level Premiums are payable for the Policy and the Premium Cap is equal to twice the Benefit Amount for the Funeral Insurance Benefit.

Level Advantage is a Payment Plan available whereby Level Premiums for the Policy are payable and the Premium Cap is equal to the Benefit Amount for the Funeral Insurance Benefit.

Level Premiums are calculated for each Life Insured based on age and gender at the Commencement Date and will not go up each year just because the Life Insured gets older.

Life Insured or Lives Insured means a person or persons that we have agreed in writing to insure under this Policy as stated in the Policy Schedule.

Lifetime Protection Promise, Lifetime Protection, if selected and shown on your Policy Schedule, means that, where the Funeral Insurance Benefit for a Life Insured is cancelled or lapses after a 5 year qualifying period, the Lifetime Protection Value is payable if the Life Insured dies at any time thereafter. If the Lifetime Protection Value is paid, no additional Benefits will be payable in respect of that Life Insured.

Lifetime Protection Value means the amount payable at the time of a claim, being a percentage of the average sum insured of the Funeral Insurance Benefit for that Life Insured over the period that the Funeral Insurance Benefit was Active. The schedule of percentages payable is shown below:

Number of years continuously Active from Cover commencement	% average Cover amount paid on death
Less than 5	0%
5-9	25%
10-14	50%
15+	75%

Medical Practitioner means a person who is registered as a Medical Practitioner in Australia, other than:

- you or the Life Insured;
- a business partner of you or the Life Insured; or
- an Immediate Family Member of you or the Life Insured.

If practising other than in Australia, the Medical Practitioner must be approved by us and have qualifications equivalent to Australian standards.

NOTE: Chiropractors, physiotherapists and alternative therapy providers are not considered Medical Practitioners unless also registered to practise medicine in Australia.

Payment Plan means the premium option selected by you as set out in the Policy Schedule.

PDS means the Funeral Insurance Product Disclosure Statement and Policy Document.

Policy means the legal contract between the Policy Owner and us. This document, the application, the personal statements, the Policy Schedule and any special conditions or endorsements make up the Policy.

Policy Anniversary means each anniversary of the Commencement Date.

Policy Conditions means the Policy terms and conditions as set out in this document.

Policy Owner means the person/s shown in the Policy Schedule as the person/s to whom the Policy has been issued. Also described as 'you' or 'your'.

Policy Schedule means the document which will be provided to you by us, containing details of the Lives Insured under this Policy. Your Policy Schedule will be updated by us as a result of:

- any changes you make to your Policy and agreed to by us; and/or
- any changes made by us in accordance with these Policy Conditions.

Premium Cap is the amount which, when reached by the Cap Credit, will cause premium payments to cease in respect of the Funeral Insurance Benefit for a Life Insured. This may vary in accordance with the options you have chosen.

Insuranceline direct debit service agreement

This Agreement is issued by TAL Life Limited. It sets out the conditions for using direct debit to pay your insurance premiums. Please keep this Agreement in a safe place for future reference.

How direct debit works

On the day your premiums are due, we send a request to your financial institution to debit the payment from your nominated account.

It usually takes between one to three days for the funds to be deducted — so make sure you keep enough money in your account during this time. If there are insufficient funds in your account to Cover your premium payment, your bank may charge you a dishonour fee, and your insurance Cover may lapse.

TAL Life Limited does not charge a dishonour fee for missed payments, but we may cancel your Cover if your premiums remain unpaid.

When we deduct your payments

Usually we'll deduct your payment on the day it is due. Here are the exceptions:

- **Weekends** — we'll deduct your payment the next business day, usually Monday.
- **National public holidays** (Christmas Day, Boxing Day, New Year's Day, Australia Day, Easter Friday, Easter Monday, and Anzac Day) — we'll deduct your payment the next business day.

For public holidays that do not apply in all States, we'll deduct your payment the day it's due.

Our promise to you

We promise to:

- Give you at least 14 days' written notice of changes to this Agreement.
- Keep your nominated account information confidential, except where conducting direct debits with your financial institution, or otherwise as required by law.

Your commitment to us

You agree that:

- You've given us the correct account details (please check a recent account statement to confirm).
- The account you've nominated allows direct debit payments.
- All account holders are party to this Agreement.
- Sufficient funds will be available on the due dates to Cover your direct debit payments.

How to make changes

To make a change to your direct debit arrangement, please contact us on 1800 999 804. Our Customer Care Team can help you with:

- Changing your nominated account details.
- Delaying, stopping or suspending any debits.
- Cancelling the Agreement completely.

We'll need **at least two business days' notice** before your next payment for these changes to take effect.

If you delay, suspend, stop or cancel your direct debit payment, you'll need to make alternative payment arrangements to ensure your insurance Cover can continue.

This Service Agreement is administered by Insuranceline on behalf of the product issuer TAL Life Limited under an agreement to provide administration services for Funeral Insurance policies.

This Financial Services Guide (FSG) is provided by TAL Direct Pty Limited ABN 39 084 666 017 (“TAL Direct”). TAL Direct holds an Australian Financial Services Licence 243260 and is related to the insurer TAL Life Limited ABN 70 050 109 450 (“TAL Life”). TAL Direct and TAL Life are part of the TAL Dai-ichi Life Australia Pty Limited ABN 97 150 070 483 group of companies (“TAL”). TAL Direct is responsible for the content of this FSG and has authorised its distribution. For the purpose of this FSG references to we, us and our mean “TAL Direct.”

Purpose of this Financial Services Guide

We are required by law to provide you with this FSG. This document outlines important legal information as required by the Corporations Act 2001. It contains important information about the authorised services we offer, the remuneration received by us, our service providers and our internal and external dispute resolution services. This FSG is designed to assist you in deciding whether to use any of the authorised services.

Our services and who we act for

TAL Direct is authorised and responsible under its Australian Financial Services Licence to:

- Provide financial product advice about life risk and superannuation products to retail clients;
- Provide general advice only in relation to general insurance products to retail clients;
- Deal in life and general insurance products to retail clients; and
- Arrange superannuation products to retail clients.

When our representatives provide financial product advice, arrange for the insurer to issue policies or renew policies they are acting for TAL Direct. TAL Direct is also authorised to issue and administer policies and pay claims on behalf of certain insurers under an arrangement called a “binder”. These insurers are; for life cover, TAL Life Limited; for Involuntary Unemployment Cover, St Andrew’s Insurance (Australia) Pty Ltd, ABN 89 075 044 656 AFSL 239649 (St Andrew’s) and for Pet Insurance, The Hollard Insurance Company Pty Ltd, ABN 78 090 584 473 AFSL 241436 (Hollard). When TAL Direct does this we will tell you and, in these circumstances, TAL Direct is also acting for the insurer.

The Insurer's registered address is:

TAL Life Limited
Level 16, 363 George Street
Sydney NSW 2000

TAL Direct's address is:

Level 16, 363 George Street
Sydney NSW 2000

St Andrew's address is:

Level 6, 100 Skyring Terrace
Newstead QLD 4006

Hollard's address is:

Level 12, 465 Victoria Avenue
Chatswood NSW 2067

Who are our representatives?

Our representatives have been appointed by TAL Direct to provide a financial service over the telephone. These people have received specialist training to discuss the products we offer.

What does general advice mean?

It is important that you understand that we will not provide personal advice or make recommendations about the suitability of the product for you. Therefore, you should carefully review the Product Disclosure Statement "PDS", having regard for your own objectives, financial situation and needs before deciding to purchase.

The PDS sets out the important information you should consider when deciding to acquire a certain product, including the insurer and the benefits, features and associated costs of the product.

You can read the PDS prior to receiving a call from our representative or if you like, you can ask our representative to read it to you.

Dispute resolution process

Insuranceline offers a dispute resolution service in relation to any concerns you may have about your Policy, our services or your privacy. Please refer to page 35 for details of the Internal and External Dispute Resolution processes.

Disclosure of remuneration

When insurance is arranged for you, you will be required to pay a premium and this will be paid to the insurer of the product. The premium includes any commission payable by the insurer for distributing the product so you do not need to pay any extra.

Where Involuntary Unemployment Cover is arranged for you, St Andrew's will pay a commission to TAL of up to 35% of the Involuntary Unemployment component of each premium paid. Currently GST of 10% is applied to amounts paid to TAL.

Where a representative arranges a policy for you over the telephone, that representative may in addition to their salary receive a commission from TAL. The amount of commission is dependent on a number of factors including the number of policies issued and the quality of the representative's conduct.

If we provide you with a financial service you are entitled to request details of this remuneration, and may do so by contacting us on the number specified in this FSG. There may be circumstances where additional commissions, bonuses and non-cash incentives are paid and these will accrue from time to time. These are not an additional cost to you. TAL may also pay referral fees or commissions to people or organisations that refer new customers to us. The referral fee may be paid in the form of an upfront commission fee and/or periodical trail fees. This will be at no additional cost to you. In addition to paying referral fees, TAL may from time to time give other non cash benefits to referral partners.

PI Insurance

TAL Direct is part of TAL and we confirm that TAL retains professional indemnity (PI) insurance to cover the activities of licensees within TAL, including TAL Direct. This PI Cover is maintained in accordance with the law, is subject to its terms and conditions and provides indemnity up to the sum insured for the activities of the representatives of TAL and TAL Direct.

How to contact us.

Phone: 1800 999 804

Fax: 1800 730 099

Mail: Insuranceline, Reply Paid GPO Box 5380,
Sydney NSW 2001

Email: customerservice@insuranceline.com.au

Web: insuranceline.com.au

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1800 999 804 8am – 6pm (AEST) Monday to Friday
customerservice@insuranceline.com.au
Reply Paid GPO Box 5380, Sydney NSW 2001
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