Office use only

*Denotes mandatory fields



Maritime variation of cover form.

Complete this form to apply for cover or change any cover already in place. Please read the Important Notes before completing this form.

You can apply for:

- Death & TPD cover up to \$1 million
- Income Protection cover up to \$8,000 per month and a 90-day waiting period

For cover above these limits, we will call you to give you the option of either completing the MLC Limited Full Personal Statement or participating in a short phone interview.

1 Member details.

Hostplus membership number* Title		Other			
Given names*					
Surname*					
Date of birth* Gender*					
Current address*					
Suburb Country	State		P/C		
Mobile phone					
Preferred method of contact* Preferred time* Mail Email Phone AM (9am-12pm) PM (12-6pm)					
Email address*					
Usual occupation*					

Hostplus has taken out a contract of insurance with MLC Limited ABN 90 000 000 402 AFSL 230694 (Insurer) to provide the insurance benefits in the Maritime Division of the Fund. On becoming a member, you are bound by the terms and conditions of this contract of insurance.

Your duty to take reasonable care not to make a misrepresentation about this application and your duty

When you apply for life insurance, the insurer conducts a process called underwriting. It's how the insurer decides whether they can cover you, and if so on what terms and at what cost. The insurer asks questions they need to know the answers to. These will be about your personal circumstances, such as your health and medical history, occupation, income, lifestyle, pastimes, and current and past insurance. The information you give in response to their questions is vital to their decision.

The duty to take reasonable care

When applying for insurance, there is a legal duty to take reasonable care not to make a misrepresentation to the insurer before the contract of insurance is entered into. A misrepresentation is a false answer, an answer that is only partially true, or an answer which does not fairly reflect the truth. This duty also applies when extending or making changes to existing insurance, and reinstating insurance.

If you do not meet your duty

If you do not meet your legal duty, this can have serious impacts on your insurance. Your cover could be avoided (treated as if it never existed), or its terms may be changed. This may also result in a claim being declined or a benefit being reduced.

Please note that there may be circumstances where the insurer later investigates whether the information given was true. For example, the insurer may do this when a claim is made.

Guidance for answering questions

We, as the trustee, are the policy owner. You are the life insured. A misrepresentation by you, as the life insured, has the effect as though it is a misrepresentation by us as the policy owner. As the insurance is inside super we obtain this insurance from the insurer in relation to you. In this circumstance, the insurer will rely on the representations made by us and you.

Both you and us, as the trustee of the fund, are responsible for the information provided to the insurer. When answering the questions, the insurer requests that you:

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

You must not assume that the insurer will contact your doctor for any medical information. If you are unsure about whether you should include information or not, please include it.

Changes before your cover starts

Your duty to take reasonable care not to make a misrepresentation continues until the time your insurance cover starts.

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

If you need help

It's important that you understand this information and the questions the insurer asks.

You can ask us, the insurer or an adviser for help if you have difficulty understanding the process of applying for insurance or answering the questions.

If you're having difficulty due to a disability, understanding English or for any other reason, we or the insurer are available to help and can provide additional support for anyone who might need it. If you want, you can have a support person you trust with you.

What can the Insurer do if the duty is not met?

If the person who answers the questions does not take reasonable care not to make a misrepresentation, there are different remedies that may be available to the insurer.

These are set out in the Insurance Contracts Act 1984 (Cth). These are intended to put the insurer in the position they would have been in if the duty had been met.

For example the insurer may:

- avoid the cover (treat it as if it never existed);
- vary the amount of the cover; or
- vary the terms of the cover.

Whether the insurer can exercise one of these remedies depends on a number of factors, including:

- whether the person who answered the questions took reasonable care not to make a misrepresentation. This depends on all of the relevant circumstances.
- what the insurer would have done if the duty had been met for example, whether the insurer would have offered cover, and if so, on what terms
- whether the misrepresentation was fraudulent; and in some cases, how long it has been since the cover started.

Before the insurer can exercise any of these remedies, they will explain their reasons, how to respond and provide further information, including what you can do if you disagree. The insurer is required to notify us, as the trustee and policy owner, of these matters.

Definition of 'Gainfully employed'

'Gainfully Employed' means employed for gain or reward in a business, trade, profession, vocation, calling, occupation or employment with an employer who is a participating employer with the Fund.

MLC Limited's privacy policy

MLC Limited respects your privacy and handles your information in accordance with their privacy notification. A copy of the Insurer's privacy policy can be obtained by visiting www.mlc.com.au/mlcinsuranceprivacypolicy.

Hostplus Privacy Collection Statement

Hostplus is seeking to collect personal information from you so that it may set up a superannuation account for you as well as administer this superannuation account on an ongoing basis. The personal information we are seeking to collect from you is your name, address, date of birth, Tax File Number (TFN), contact details, occupation and employer, personal health information and your dependants. We need to collect the requested personal information from you for the following purposes:

- to establish and manage your superannuation account.
- · to implement your investment choices.
- to establish and maintain your insurance protection.
- to process contributions, transfer monies or pay superannuation benefits to you.
- to report the investment performance of your account to you.
- to keep you up to date about other products and services available to you as a member of Hostplus (which may include direct marketing communications).

The Hostplus privacy policy is available on the Hostplus website at **hostplus.com.au/privacy** and includes information about overseas disclosure of personal information, how you may access and seek correction of your personal information as well as how you can make a complaint about a breach of your privacy. Hostplus usually discloses your personal information to our administrator Australian Administration Services Pty Limited (AAS) ABN 62 003 429 114, mail houses, our insurer(s). AAS (a company within the LINK Group of companies) may also disclose your personal information to overseas recipients. Please see the LINK Group's Privacy Policy at www.linkgroup. com/privacy.html for further information.

Self-assessment of occupation category - must be completed by all members

To self-assess your occupation, select one of the three occupation categories in Option 1 or, if you are unsure and choose not to self-assess your occupation, complete Option 2 and the Insurer will assess your occupation category for you. A duty to take reasonable care not to make a misrepresentation applies when you self-assess your occupation. Any intentional and/ or fraudulent misrepresentation of your occupation at the time you sign the declaration will allow the Insurer to avoid your insurance and/or adjust any sum insured payable to reflect correct classification of your occupation at this time.

Option 1

Self-assess your occupation category - please select one of the following options by ticking the appropriate box:



White Collar

- Predominantly office-based, sedentary roles performing clerical, administrative and managerial duties with no more than 10% of time performing light Manual Duties* (e.g. stocking shelves, loading photocopy paper); or
- persons who work in an office environment for at least 80% of the time (excluding travel time from one office environment to another). This includes sales representatives who are not involved with deliveries.

Light Blue Collar

Occupations which involve light Manual Duties* and are land-based or involve one of the following non-land-based occupations: masters, engineers and officers. Also includes supervisors of Heavy Blue Collar workers.



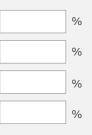
Heavy Blue Collar

- Skilled (i.e. trade-qualified occupations) and unskilled blue collar workers performing Manual Duties*. This shall include, but is not limited to, the occupation of stevedore;
- any occupation or employment where employment is spent on a ship, tug, offshore vessel or on the water and shall include, but is not limited to, occupations of seaman, integrated rating and steward; or
- members who are not working.

Option 2

Describe the duties of your occupation and the Insurer will assess your occupation category

How much time do you spend on the water?
How much time do you spend in the office?
How much time do you spend performing light manual duties*?



How much time do you spend performing heavy Manual Duties*? * Manual Duties means duties involving or using human effort, power or physical energy.

(Includes stocking shelves and loading photocopy paper)

If you do not choose Option 1 or Option 2 and you do not have existing insurance cover with Maritime Super on 1 September 2023, you will be classified as 'Heavy Blue Collar' by default (with the exception of Employer sub-fund members, who will be classified as 'Light Blue Collar' by default).

Please indicate which option you require and the type and level of cover for your chosen option. You can choose only one option. You cannot have a combination of both options.

Unitised Cover

Please indicate the number of units you require in total including your existing voluntary cover:

Death only cover		Death only units
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Death and TPD cover

Death and TPD units

Do not include your default cover in the above.

You can apply for up to \$5 million of Death cover and up to \$2 million of TPD cover.

Any cover or increase in cover is subject to your application being accepted.

If the insurer does not accept your application you will retain your current level of cover.

If the insurer accepts your application, this new cover will replace the level of cover you currently have with Hostplus.

5 Complete this section to apply for or change voluntary Income Protection cover.

Income Protection cover provides you with a benefit if you are temporarily unable to work as a result of an injury or illness either physical or mental. You are eligible for Income Protection cover only if you work at least 15 hours per week. The weekly cost for Income Protection cover will depend on the following:

- 1. your age at last 30 June; and
- 2. the waiting period you choose; and
- 3. whether you select 50% or 75% of salary cover
- 4. the occupation scale. For information on when an Income Protection benefit is payable and the cost of cover go to hostplus.com.au/pds

What is your gross annual salary?	\$				
How much Income Protection cover would you like?	75% salary (rounded up to next \$100 per month) 50% salary (rounded up to next \$100 per month)				
If you are increasing from 50% to 75% you will need to com What Waiting Period would you like?	plete the MLC Limited Full Personal Statement 30 days 90 days				
If you are changing from 90 to 30 days you will need to complete the MLC Limited Full Personal Statement Do you work more than 15 hours a week? Yes (15 hours or more)					
Cancel your cover.					

Please select which cover you would like to cancel.

Voluntary Death and TPD

Voluntary income protection

Default Death and TPD (subject to fund rules)

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1.						
1.						
	Are you a citizen or permanent resident of Australia?					
2.	Are you a New Zealand national working for an Australian employer?					
3.	If you answered 'No' to questions 1 & 2, do you hold a current 457 visa?					
4.	What is your occupation?					
he develop 2						
	Industry?					
	How many hours per week do you work? Annual salary \$					
5.	What is your height? cm					
	What is your weight? kg					
i.	Your BMI is determined by your weight in kilograms divided by your (height in metres). If your BMI is greater than 36,					
	you will need to provide additional information – we will call you to let you know if this is the case and give you the					
	option of either completing the MLC Limited Full Personal Statement or participating in a short phone interview.					
YOU	ur Health.					
1.	Full Personal Statement.					
	 In the last 10 years, have you suffered symptoms of, or had, or have been told you have, or received any advice or treatment for any of the following: high blood pressure, high cholesterol, heart attack, heart complaint, chest pain or stroke mental health condition, such as stress, anxiety or depression cancer or tumour of any type or breast lump 					
	 or received any advice or treatment for any of the following: high blood pressure, high cholesterol, heart attack, heart complaint, chest pain or stroke mental health condition, such as stress, anxiety or depression 					
	 or received any advice or treatment for any of the following: high blood pressure, high cholesterol, heart attack, heart complaint, chest pain or stroke mental health condition, such as stress, anxiety or depression cancer or tumour of any type or breast lump 					
	 or received any advice or treatment for any of the following: high blood pressure, high cholesterol, heart attack, heart complaint, chest pain or stroke mental health condition, such as stress, anxiety or depression cancer or tumour of any type or breast lump back, neck or joint condition or muscle condition or arthritis, loss of limb or paralysis loss of sight in one or both eye(s) – do not include long or short sightedness that has 					
	 or received any advice or treatment for any of the following: high blood pressure, high cholesterol, heart attack, heart complaint, chest pain or stroke mental health condition, such as stress, anxiety or depression cancer or tumour of any type or breast lump back, neck or joint condition or muscle condition or arthritis, loss of limb or paralysis loss of sight in one or both eye(s) – do not include long or short sightedness that has been corrected either with surgery, contact lenses or glasses, or colour blindness 					
2.	 or received any advice or treatment for any of the following: high blood pressure, high cholesterol, heart attack, heart complaint, chest pain or stroke mental health condition, such as stress, anxiety or depression cancer or tumour of any type or breast lump back, neck or joint condition or muscle condition or arthritis, loss of limb or paralysis loss of sight in one or both eye(s) – do not include long or short sightedness that has been corrected either with surgery, contact lenses or glasses, or colour blindness kidney, bladder, bowel or stomach condition 					
	 or received any advice or treatment for any of the following: high blood pressure, high cholesterol, heart attack, heart complaint, chest pain or stroke mental health condition, such as stress, anxiety or depression cancer or tumour of any type or breast lump back, neck or joint condition or muscle condition or arthritis, loss of limb or paralysis loss of sight in one or both eye(s) – do not include long or short sightedness that has been corrected either with surgery, contact lenses or glasses, or colour blindness kidney, bladder, bowel or stomach condition diabetes or liver disease (including hepatitis B or C) At the date of this application for cover, are you absent from work or unable to carry out all of the duties of your current or usual occupation on a full-time basis, due to an injury or illness 					
3.	 or received any advice or treatment for any of the following: high blood pressure, high cholesterol, heart attack, heart complaint, chest pain or stroke mental health condition, such as stress, anxiety or depression cancer or tumour of any type or breast lump back, neck or joint condition or muscle condition or arthritis, loss of limb or paralysis loss of sight in one or both eye(s) – do not include long or short sightedness that has been corrected either with surgery, contact lenses or glasses, or colour blindness kidney, bladder, bowel or stomach condition diabetes or liver disease (including hepatitis B or C) At the date of this application for cover, are you absent from work or unable to carry out all of the duties of your current or usual occupation on a full-time basis, due to an injury or illness (even if you are not currently working on a full-time basis or are unemployed)? Do you drink more than 28 standard drinks per week? A standard drink is 1 nip (30mL) spirits, 					

I, whose signature appears below, declare that:

General - relating to your Hostplus account

- I have read and understood the current Maritime Division Member Guide (Product Disclosure Statement) and the associated reference material available at hostplus.com.au/ maritime
- I agree to be bound by the terms of the Hostplus trust deed upon joining Hostplus.
- I declare that all details given in this application form are accurate and complete.
- I undertake to provide the trustee with any further information it may request relating to my Hostplus membership and I will update the trustee if any of the information provided changes.
- I have read and understood the privacy policy of Hostplus and its service providers.
- I consent to allowing Hostplus to contact my employer/s to confirm my hours of work (if required).
- I consent to receiving information on new products, special offers and promotions from Hostplus, Hostplus industry parties and associations (direct marketing) unless advised otherwise by me.

Insurance declarations – please read "Your duty of disclosure" before signing

- I understand that I can only apply to increase my insurance cover once under the special offer as detailed in the Maritime Division Member Guide product disclosure statement and that Hostplus will process the first application it receives from me (whether by post or electronic means).
- If the Insurer accepts an application to transfer cover:
 - a. You acknowledge the Insurer is accepting the risk based on:
 - the information you provided the previous insurer;
 - your previous insurer relied on that information when it approved your existing cover;
 - The Insurer is relying on your reconfirmation of the validity of that information for this application;

- b. You reconfirm to the Insurer:
- You disclosed all relevant matters to your previous insurer in accordance with your Duty of Disclosure when you applied for your existing cover;
- The information you provided the previous insurer to obtain the existing cover was and continues to be accurate and complete; and
- c. If you did not tell a previous insurer something that you knew or could reasonably have been expected to know about your health when applying for the existing cover, and this would have allowed the previous insurer to avoid, reduce or vary the contract, the Insurer may exercise that right due to this reconfirmation.
- The answers to the questions in this application are true and correct, and I have not deliberately withheld any information material to the proposed insurance.
- The answers to the questions in this application are true and correct, and I have not deliberately withheld any information material to the proposed insurance.
- I understand that if my application is accepted, insurance cover will be provided to me on the terms contained in Hostplus' insurance policy as changed from time to time.
- I understand that if at the date my cover commences (Cover Commencement Date) I have a claim admitted (ie. accepted by an insurer), were eligible to receive a benefit, are in a waiting period for a benefit, and or in the process of claiming a benefit with respect to Terminal Illness from any source ('Claiming Member') that I will not be eligible for automatic default insurance cover, unless accepted by the Insurer on written application by me. Acceptance remains subject to underwriting.
- I understand that my insurance cover will not become effective until the Cover Commencement Date, provided my account has adequate funds to meet the premium payable.
- I authorise any hospital, doctor or other person who has treated or examined me to give to the Insurer or any organisation duly appointed by them, any information on my illness or injury, consultation, prescription or treatment or copies of all hospital or medical reports. A photocopy of this authorisation is as valid as the original. I agree to provide further medical authorities if required.

I would like my insurance cover to continue in the event that my Hostplus super account has not received any contributions or other amounts for a continuous period of 16 months. This election will apply to all insurance cover I have with Hostplus, including any cover for death, total and permanent disablement and income protection.

Yes No

Why do I have to answer?

Under superannuation legislation, your insurance cover will end if your superannuation account has not received any contributions or other amounts for a continuous period of 16 months. However, you can make an election to stop your cover from ending. If you do not make an election and your cover ends, the insurer may need to assess your health in order to restart your cover and your cover may be subject to restrictions or conditions. If you make the election, you can still cancel your cover at any time.

Signature of applicant*

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Date*			

Faxed or scanned forms cannot be processed. However photocopied forms can be processed if signed with an original signature. It is important that you answer all questions on this form. In confidence when completed.

When you have completed this form please send it to: Hostplus, Locked Bag 5046, Parramatta NSW 2124

Issued by Host-Plus Pty Limited ABN 79 008 634 704, AFSL No. 244392, RSEL No. L0000093 as trustee for the Hostplus Superannuation Fund ABN 68 657 495 890, RSE No. R1000054, MySuper No. 68657495890198, ® Registered to BPAY Pty Ltd ABN 69 079 137 518.