

Policy Document – Group Income Protection Insurance Policy

K006534

Issued to:

Equity Trustees Superannuation Limited (ETSL) ABN 50 055 641 757, AFSL 229 757,
RSE Licence No. L0001458

As Trustee for:

Centric Super Fund ABN 91 593 544 166

For the Provision of Income Protection Insurance to Insured Members

Issued by:

AIA Australia Limited
ABN 79 004 837 861 AFSL 230043

Effective Date: 26 August 2023



HEALTHIER, LONGER,
BETTER LIVES

Insuring Clause

INSURANCE POLICY NO. K006534

FOR THE PROVISION OF INCOME PROTECTION INSURANCE TO INSURED MEMBERS OF CENTRIC SUPER FUND.

This Policy is issued by AIA Australia Limited ABN 79 004 837 861 AFS Licence No. 230043 ("the Company") to the Policy Owner described in the Policy Schedule.

The Policy is entered into by the Policy Owner in its capacity as Trustee for Centric Super Fund and the Policy Owner's rights, obligations and liabilities are those of the Trustee for Centric Super Fund.


In consideration of payment to the Company of all premiums and subject to the General Conditions hereof, the Company will pay to the Policy Owner the benefits stated in the Benefits section of the Policy, immediately upon proof being given to the satisfaction of the Company of:

1. the happening of the events upon which such benefits are herein expressed to become payable;
2. the identity of the Insured Member upon whose disablement the Company is asked to make payment; and
3. the correctness of the age of that Insured Member.

The Policy shall be deemed to be issued in the Commonwealth of Australia and all monies payable in respect thereof whether by or to the Company shall be payable in Australian currency.

The Company has caused this Policy to be executed as of the Policy Commencement Date.

Person authorised to sign on behalf of the Company:

DocuSigned by:

748FB51A97DC448

Nicky Serret


Head of Group Product

Effective Date: 26 August 2023

Date of Issue: 11 October 2023

EXECUTED by EQUITY TRUSTEES

SUPERANNUATION LIMITED ACN 055 641 757 by
its Authorised Signatories under Power of Attorney
dated 27th May 2016 in the presence of:


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Signature of Witness

Jason Lucas
.....

Name of Witness

12/10/2023
.....

Date

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Signature of Authorised Signatory

Megan Whitaker
Authorised Signatory – Schedule III
.....

Name of Authorised Signatory

12/10/2023
.....

Date


.....

Signature of Authorised signatory

Sarah Addinsall

Authorised Signatory – Schedule II
.....

Name of Authorised Signatory

12/10/2023
.....

Date

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1. BENEFITS

1.1 TOTAL DISABILITY BENEFIT

- 1.1.1 We will pay you a *total disability benefit* if an *insured member* is *totally disabled* immediately after the *waiting period* has ended.
- 1.1.2 The amount of the *total disability benefit* will be:
- (a) the monthly benefit reduced by the amount of *disability income*;
 - plus
 - (b) the *super monthly benefit*, if any, reduced by the amount of *disability super*;
- but will not exceed the *maximum monthly benefit*.
- 1.1.3 The *total disability benefit* starts the day after the *waiting period* has ended.
- 1.1.4 The *total disability benefit* will end on the earliest of the following:
- (a) the *insured member* is no longer *totally disabled*;
 - (b) the *benefit payment period* ends;
 - (c) the *insured member* reaches the *cover expiry age*;
 - (d) the *insured member* dies.

1.2 PARTIAL DISABILITY BENEFIT

- 1.2.1 We will pay you a *partial disability benefit* if an *insured member* is *partially disabled* immediately after the *waiting period* has ended.
- 1.2.2 The amount of the *partial disability benefit* will be:
- (a) the *partial monthly benefit* reduced by the amount of *disability income*; plus
 - (b) the *super monthly benefit*, if any, reduced by the amount of *disability super*;
- but will not exceed the *maximum monthly benefit*.
- 1.2.3 The *partial disability benefit* starts the day after:
- (a) the *waiting period* has ended;
 - (b) the *insured member* is no longer *totally disabled*;
- whichever is later.
- 1.2.4 The *partial disability benefit* will end on the earliest of the following:
- (a) the *insured member* is no longer *partially disabled*;
 - (b) the *benefit payment period* ends;
 - (c) the *insured member* reaches the *cover expiry age*;
 - (d) the *insured member* dies.

1.3 RECURRENT DISABILITY BENEFIT

The *waiting period* will not apply if, whilst the *insured member* is covered under this policy, the *insured member* is *disabled* again from the same or a related cause ('recurrent disability') within six months of *you* last receiving a *disability benefit* for the *insured member*. We will treat this as a continuation of the original claim and add both periods of *disability* (and any subsequent periods) together to determine when the *benefit payment period* ends. If the recurrent disability is *partial disability*, this condition 1.3 only applies if the *insured member* was *totally disabled* immediately before he or she became *partially disabled*.

1.4 INDEXATION OF BENEFIT PAYMENTS

If we are paying a *disability* benefit for an *insured member* and the *benefit payment period* exceeds two years, the *monthly benefit* and any *super monthly benefit* will each be increased by the percentage increase in the *consumer price index* at the end of each consecutive 12 month period for which benefits are payable, up to a maximum of 5%.

2. APPLICATION FOR COVER

2.1 START OF COVER

Cover for a person will not start under this policy, until an application for cover is made to *us* in accordance with condition 2.3;

Despite this condition 2.1, this policy is closed to new members.

2.2 COVER FOR EXISTING MEMBERS

2.2.1 Regardless of anything else in this Policy, an *existing insured member* will continue to have the same type and amount of cover from the effective date subject to conditions 2.2.2 to 2.2.4.

2.2.2 An *existing insured member* will have the same amount of cover, waiting period and benefit payment period from the effective date that they held under this Policy immediately prior to the *effective date*.

2.2.3 If the *existing insured member's* cover was *limited cover* immediately prior to the *effective date*, the conditions attaching to the *limited cover* will continue to apply on and from the *effective date* to the *existing insured member's* cover under the Policy until such time as they expire according to their terms.

2.2.4 Each individual condition, exclusion, restriction or loading which applied to an existing insured member's cover immediately before the effective date (each a "Pre-existing Term") will continue to apply on and from the effective date to the existing insured member's cover under this Policy until such time as the Pre-existing Term expires according to its terms.

2.3 APPLICATIONS UNDER THIS POLICY

2.3.1 An application for *insured cover*, or to increase, reduce or cease cover, under this policy must be made to *us* in the form prescribed by *us*. In the case of an application for *insured cover*, to change or increase cover, the application is made to *us* on the following terms:

- (a) When considering an application, we may request medical and other information;
- (b) We will notify *you* whether the application is accepted or declined. If accepted, the date on which the increased cover starts will be the date the increase is accepted by *us*. For a reduction in cover, the date the reduction request is received; and
- (c) We may apply special conditions to the cover.

2.3.2 If condition 2.3.1(c) applies for a person and he or she elects for cover not to start within 30 days of the date we advise *insured cover* starts, we will reimburse any premiums paid in respect of that person.

2.3.3 For avoidance of doubt, where an insured member has cancelled their cover in accordance with condition 5.1(c), they will not be eligible to reapply for cover.

2.4 ELIGIBILITY

You may apply for an increase in cover for an *insured member* on the following basis:

- (a) the application is made and assessed in accordance with condition 2.3;
- (b) if we decline an application for an increase in cover, the *insured member* retains the level of cover applying immediately before the application;
- (c) for an *insured member* to be eligible for an increase in cover he or she must, at the time of application:
 - (i) be aged more than 15 years but less than 65 years;
 - (ii) be a permanent resident of Australia;

- (iii) must be in self-employment or an *employee* of an employer on a *permanent basis* and for at least the *minimum hours*.
- (iv) satisfy such other requirements that are from time to time stipulated by *us*.

2.5 INDIVIDUAL TRANSFER TERMS COVER

A person:

(a) to whom *individual transfer terms* apply; and

(b) who was insured under an *agreed policy* on the day before his or her cover commenced under this policy;

will, from the date his or her cover is accepted under this policy, receive *individual transfer terms* cover subject to the following:

(i) any non-standard exclusions which applied under the *agreed policy* immediately before the *transfer date*, including but not limited to any exclusions for pre-existing conditions;

(ii) any other conditions, exclusions, restrictions or other special conditions we consider appropriate; and

(iii) the amount of *individual transfer terms cover* that applies to a person is calculated under condition 3.2. The amount of that cover, together with any existing cover which applies to the person under this policy, cannot exceed \$10,000 per month in total.

2.6 REINSTATING COVER

Where an *insured member's* cover ends because their account is *inactive* in accordance with condition 5.1(h) or because of an insufficient account balance in accordance with 5.1(d), cover can be reinstated on the following terms:

(a) Where the *insured member* notifies *you* of their request to reinstate their cover within 90 days of cessation pursuant to condition 5.1(h), cover for the *Insured Member* will be automatically reinstated from the date cover ceased and be treated as if it had never ceased subject to backdated premiums being paid.

(b) Where an amount is received within 90 days of cessation due to an insufficient account balance pursuant to condition 5.1(d), cover for an *Insured Member* will be automatically reinstated from the date cover ceased and be treated as if it had never ceased subject to backdated premiums being paid.

(c) With respect to condition 2.6(a) and (b), after 90 days, the *insured member* will not be eligible to reinstate their previous cover and will need to apply for new *insured cover* in accordance with condition 2.3.

3. AMOUNT OF COVER

3.1 AMOUNT OF COVER FOR AN INSURED MEMBER

- 3.1.1 Subject to any changes to the amount of cover under any other condition of this policy or to which we otherwise agree in writing, the amount of cover for an *insured member* will be the amount set out in condition 1.1.2 or 1.2.2.
- This cover may include a percentage increase equal to the *consumer price index* effective for the 12 month period to the *review date*, up to a maximum of 7.5%p.a.

3.2 INDIVIDUAL TRANSFER TERMS COVER

- 3.2.1 For an *insured member* to whom condition 2.5 applies, the cover applying on the date his or her cover commences under this policy is the lesser of:
- (d) The cover required to provide the *insured member* with the nearest amount of cover, but not less than the amount of cover which applied to the *insured member* under the *agreed policy* on the day before his or her cover commenced under this policy; and
 - (e) \$10,000 per month.
- 3.2.2 If an *insured member* is not *at work* on the date his or her cover starts under condition 2.5, the cover is *limited cover* until he or she is *at work* for 30 consecutive days.

4. INTERIM ACCIDENT COVER

4.1 ACCIDENT COVER

- 4.1.1 If a person applies for *insured cover*, or to increase, reduce or cease cover, under this policy, we will provide interim accident cover for the person while we are considering the request for *insured cover*, or an increase, variation or cessation of cover as set out in this condition 4. Interim accident cover for a person is subject to the exclusions, limitations, restrictions and claim procedures as apply under this policy.

4.2 ACCIDENTAL DISABILITY COVER

- 4.2.1 We will pay a benefit if a person is *totally disabled* as a result of an *accident* for longer than the waiting period which applies under condition 4.3.1 and the *total disability* happens:
- (a) within 120 days of the *accident*; and
 - (b) during the interim accident period set out in condition 4.5.

4.3 WAITING PERIOD AND BENEFIT PAYMENT PERIOD

- 4.3.1 The waiting period which applies to a person under condition 4.2 is the waiting period which applies to the person under this policy, subject to the terms contained in the definition of *waiting period*. If the person is not already insured under this policy, then the waiting period which applies to the person is that which is specified in the application made by the person, subject to the terms contained in the definition of *waiting period*.
- 4.3.2 The benefit payment period which applies to a person under condition 4.4.3(b) is the lesser of:
- (a) the benefit payment period which applies to the person under this policy; or
 - (b) two years.
- If the person is not already insured under this policy, the benefit payment period which applies to the person is that which is specified in the application made by the person to a maximum of two years.

4.4 AMOUNT OF BENEFIT

- 4.4.1 The benefit equals the lesser of:
- (a) the amount of cover the person applied for;
 - (b) the person's *pre-disability income*;
 - (c) the *maximum accident cover*.
- However, this benefit is reduced by any cover already applicable to the person under this policy and the amount of any *disability income*.
- 4.4.2 The benefit starts to accrue from the day after the end of the waiting period that applies under condition 4.3.1.
- 4.4.3 The benefit ends on the earliest of the following:
- (a) when the person is no longer *totally disabled*;
 - (b) the end of the benefit payment period that applies to the person under condition 4.3.2;
 - (c) the person reaches the *cover expiry age*;
 - (d) the death of the person.
- 4.4.4 Once the benefit ends under condition 4.4.3, no further benefits are payable for the person under this condition 4.

4.5 INTERIM ACCIDENT COVER PERIOD

4.5.1 Interim accident cover for a person starts on the date *we* are notified in writing of the person's application for an increase in, variation or cessation of cover and ends on the earliest of the following dates:

- (a) the date *you* or the person withdraws the application for cover;
- (b) the date *we* accept the person's application for cover on standard or special terms;
- (c) the date *we* reject the person's application for the cover;
- (d) the date on which a benefit becomes payable for the person under this condition 4;
- (e) the date *we* cancel the interim accident cover; and
- (f) 120 days from the date *we* are notified of the person's application for cover.

4.6 INTERIM ACCIDENT COVER LIMITATIONS

Interim accident cover for a person is subject to the same exclusions, limitations, restrictions and claim procedures as apply to an *insured member* under the policy.

4.7 IF YOU MAKE A CLAIM

4.7.1 If a person becomes entitled to make a claim under this condition 4 for a person, that person's application for cover is automatically cancelled.

If *you* are entitled to make a claim under this clause 4 for an *insured member* or a person, *we* will require payment of the premium for the period from the date *you* are notified in writing of the person's request for the cover to the date of the *accident* and the terms of this policy apply to that claim.

5. END OF COVER

5.1 END OF COVER

Cover for an *insured member* under this policy will end on the earliest of the following:

- (a) the date a terminal illness or total permanent disablement benefit becomes payable for the *insured member* under the *group life policy*;
- (b) the *insured member* reaches the *cover expiry age*;
- (c) the date *you* or *we* receive a written request from the *insured member* to cancel the *insured member's* cover;
- (d) two months from the end of the calendar month following the date on which the balance in the *insured member's* account in the *fund* is insufficient to cover the next month's premium payment for the *insured member's insured cover*;
- (e) the *insured member* joins the armed forces of any country other than the Australian Armed Forces Reserve;
- (f) the date the policy terminates;
- (g) the death of the *insured member*, or
- (h) the date on which the account for an *insured member* becomes inactive, meaning *you* have not received an amount in respect of the *insured member* for a continuous period of 16 months (as at or after 1 July 2019).

The above provision 5.1(h) does not apply to an *insured member* who has provided a written election to *you* after 8 May 2018 to maintain their cover.

6. COVER AFTER POLICY TERMINATES

6.1 CONTINUED COVER

If an *insured member* is not *at work* on the last working day immediately before the termination date, we will provide *continued cover* for the *insured member*.

6.2 END OF CONTINUED COVER

Continued cover for the *insured member* will end on the earliest of the following:

- (a) the *insured member* has returned to work after the termination date of this policy and actively performed all the duties and work hours of his or her *own occupation* free of any limitation due to illness or injury and is not entitled to or receiving income support benefits from any source including workers' compensation benefits, statutory transport accident benefits and disability income benefits;
- (b) we make a decision on any claim for the *insured member* under *continued cover*;
- (c) the person is no longer an *investor*;
- (d) the *insured member* reaches the *cover expiry age*.

7. LIMITATIONS AND EXCLUSIONS

7.1 ONE BENEFIT AT A TIME

We will only pay benefits for an *insured member* for one *disability* at a time.

7.2 EXCLUSIONS

7.2.1 We will not pay an increased benefit in respect of an *insured member* if an illness or injury is directly or indirectly caused by:

- (a) intentional self-inflicted injury or attempt at suicide within 12 months of cover commencing or increasing. This exclusion applies whether or not the *insured member* is sane at the time
- (b) the *insured member's* service in the armed forces of any country;
- (c) *normal pregnancy or childbirth*; or
- (d) *war*.

7.2.2 Where the exclusion in 7.2.1(a) applies in the case of an increase in *insured cover*, the exclusion only applies to the extent of the increase.

7.2.3 We will not pay a benefit under this policy for any illness, injury or medical condition which arises, directly or indirectly, as a result of:

- (a) the *insured member's* participation in illegal activity or their intention to participate in such activity; or
- (b) the *insured member's* permanent or temporary banning, deregistration or disqualification which:
 - ◆ arises solely from disciplinary action undertaken against the person and
 - ◆ prevents the person from pursuing, practising or engaging in their occupation or profession.

7.2.4 We will not make a payment under this policy if the payment would cause us to infringe the *Private Health Insurance Act 2007 (Cth)*, *Health Insurance Act 1973 (Cth)* or the *National Health Act 1953 (Cth)* or any succeeding legislation in connection with health insurance.

7.3 MAXIMUM BENEFIT PAYMENT PERIOD

The maximum time we will pay a benefit for *disability* resulting from any one or related cause is the number of months in the *benefit payment period*. The number of months in the *benefit payment period* will include any months in which the benefit is reduced or is calculated to be zero for any reason other than that outlined in Condition 1.4.

7.4 MAXIMUM PAYMENT FOR DISABILITY OUTSIDE AUSTRALIA

If an *insured member* is outside Australia at the date they are *disabled*, the maximum amount of monthly benefits they can receive while they remain *disabled* is six unless, in *our* opinion, the *insured member* is unable to return to Australia due to medical reasons (maximum overseas payment period). No benefit will be paid between the end of the maximum overseas payment period and the date the *insured member* returns to Australia (gap period) but the gap period will not count towards the *benefit payment period*. Benefit payments will only start again if the *insured member* returns to Australia, as long as they continue to satisfy the conditions of payment.

7.5 WORLDWIDE COVER

7.5.1 Cover for an *insured member* applies outside Australia.

7.5.2 We may require an *insured member* to return to Australia for assessment of a claim as soon as medically possible. We will not be liable for the *insured member's* expenses in relation to their return to Australia. When the *insured member* returns to Australia the *insured member* must be under the immediate care of a *medical practitioner*.

8. CLAIMS

8.1 WHEN TO MAKE A CLAIM

You must notify us in writing as soon as possible after you become aware of any claim or potential claim. If you delay notifying us of a claim, and as a result our interests are prejudiced, we may be permitted not to pay the claim or to reduce the benefit in some circumstances under applicable laws.

8.2 OUR REQUIREMENTS

8.2.1 We must be satisfied of our liability to pay a benefit. You must provide us, at your expense, with any requirements we reasonably consider are necessary to properly assess the claim.

8.2.2 Payment of a benefit is conditional on the *insured member*:

- (a) undergoing any medical or other examination, and providing us with any information or authorities, that we reasonably require during our continual assessment of the claim; and
- (b) complying with any medical treatment or rehabilitation program that is reasonable.

8.3 MEDICAL EXAMINATIONS THAT WE ARRANGE

(a) We will pay:

- (i) the costs of any medical or other examination we require under condition 8.2.2, other than:
 - (A) the initial medical examination required to make a claim; and
 - (B) all standard progress reports required by us each month to continue the benefit payments.
- (ii) the *insured member's* expenses of complying with a rehabilitation program under condition 8.2.2(b) if:
 - (A) we approve the rehabilitation expenses in writing before they are incurred;
 - (B) the expenses are incurred to directly assist the *insured member* to return to work in a gainful occupation or to undertake a vocational retraining program because of his or her *disability*;

Generally, these expenses include the cost of a rehabilitation program (other than an *excluded rehabilitation program*) which a *medical practitioner* certifies is necessary for the *insured member's* rehabilitation. We meet these costs by payment directly to the provider of the applicable service.

The maximum amount we will pay for rehabilitation expenses under this condition for any one *disability* of the *insured member* is the lesser of:

- 1. the costs; and
- 2. 24 times the total of the *monthly benefits* less any amounts that can be claimed from any other source for those expenses.

(b) However, unless we agree otherwise, we will not pay any other costs including fees incurred for travelling to an appointment or for non-attendance at an appointment arranged under condition 8.2.2.

8.4 INSURED MEMBERS LEAVING AUSTRALIA

If we are paying you a benefit under this policy in respect of an *insured member* and you become aware that the *insured member* intends to leave Australia or has left Australia, you must notify us of this in writing within 2 weeks of your becoming aware of the *insured member's* movements.

8.5 CONFIDENTIAL INFORMATION IN RELATION TO CLAIMS

If we provide *you* with information that we obtain in the course of assessing a claim:

- (a) *you* must deal with that information in accordance with the Privacy Act 1988 (Cth) and that information must at all times remain confidential to *you*, unless *you* have a statutory obligation to disclose it;
- (b) any person *you* appoint to assist *you* manage or assess claims must agree to be bound by the same obligations that *you* have under this condition 8.5.

8.6 EVIDENCE IN SUPPORT OF A CLAIM

We may refuse to accept any evidence in support of a claim, including a report of a *medical practitioner* if it is illegible or is not written in the English language. Before we consider evidence given to *us* in support of a claim, we may, at no expense to *us*, require *you* to have the evidence transcribed into a form in which it can be comprehended in English and appropriately certified to be a true copy of the original.

9. PREMIUM

9.1 TIME TO PAY PREMIUM

You must pay premiums monthly in arrears on or before the *premium due date*.

9.2 AMOUNT OF PREMIUM

The amount of premium payable is the total cost of cover for *all insured members* during the period in respect of which premium is calculated based on the *premium rates* for that period, plus any government levies, duties, taxes or charges not included in the *premium rates*.

9.3 PREMIUM ADJUSTMENT

9.3.1 At each *premium calculation date* and on termination of the policy, we will recalculate the premium to reflect changes in the number of *insured members* and the amount of cover of the *insured members* over the period since the last *premium calculation date*. You must give us any additional information we need to recalculate the premium.

9.3.2 If the premium you paid for that period:

- (a) exceeds the recalculated premium, we will refund the excess to you within 30 days after the date the recalculated premium is determined or use it to pay your premium; or
- (b) is less than the recalculated premium, you will pay the shortfall to us within 35 days after the date we notify you of the recalculated premium.

9.4 OVERDUE PREMIUMS

If the premium payable under condition 9.2 is not paid to us within 30 days of the *premium due date*, we will give you a notice and if the premium due is not paid within the time period stipulated in the notice the policy may be terminated by us by writing to you and all insured cover for each *insured member* will end. Any such notice will not stipulate a date less than 60 days after the notice is given.

9.5 WAIVER OF PREMIUM

9.5.1 Premiums will be waived for an *insured member* whilst we are paying a *disability* benefit under this policy for that *insured member*.

9.5.2 If cover ends for an *insured member* under condition 5.1(a), (e) or (g), the premium from the first of the month in which the *insured member* met the aforementioned condition, to the date cover ends, will be waived.

10.VARIATION OF POLICY

10.1 VARIATION BY AGREEMENT

This policy may be varied by written agreement between *you* and *us*. The variations to this policy which *you* and *us* have documented in this policy document apply on and from the *policy commencement date*, unless otherwise agreed in writing between *you* and *us*.

10.2 VARIATION BY US

10.2.1 We may vary the *premium rates* by giving *you* at least 3 months' prior written notice of the variation:

- (a) at any time after the end of a *guarantee period*;
- (b) if the number of *insured members* reduces by more than 25% within any consecutive 3 month period
- (c) if the *fund* merges or amalgamates with another superannuation fund; or
- (d) if the *fund* is bought or sold to another entity.

The notice in relation to (b), (c) or (d) may be given to *you* at any time, including during the *guarantee period*.

10.2.2 We may vary any of the terms and conditions of this policy (including the *premium rates*) by giving *you* at least three months' written notice, even before the end of a *guarantee period*, if there is a change to the law and as a result:

- (a) it becomes impossible or impractical for *us* to carry out *our* obligations under the policy;
- (b) the basis of taxation of the policy or *us* is changed;
- (c) government charges, taxes or levies are imposed or changed; or
- (d) if the provisions of the policy would otherwise become inconsistent with the law.

A variation by *us* of any of the terms and conditions of this policy on the basis of condition 11.2.2(b) must be consistent with the relevant change to the basis of taxation of the policy or *us*.

10.2.3 Our right to vary the terms and conditions of the policy under condition 11.2.2 does not apply to the extent that it would prevent the policy from being treated as life insurance business under the Life Insurance Act 1995 (or any legislation that replaces it).

10.2.4 We may vary the *premium rates* with immediate effect and confirm the change in writing, even before the end of a *guarantee period*, in the event of *war* within Australia.

11.GENERAL

11.1 TERM OF THIS POLICY

This policy begins on the *policy commencement date*. It will end on the first to occur of the following:

- (a) the expiry of two months after we receive *your* written request to cancel this policy or on another date we agree to in writing;
- (b) the date cover under the policy has ended for all *insured members*;
- (c) a premium is more than 30 days overdue and we cancel the policy.

11.2 RECORDS

11.2.1 You must keep, for *our* inspection, accurate records necessary for the effective operation of this policy, as we require from time to time. These records must be maintained in a format that is reasonably accessible by *us*.

11.2.2 We may conduct an audit from time to time of any records *you* (or any person on *your* behalf) have which are connected with this policy. We will give *you* reasonable notice if we propose to conduct an audit. We will only conduct an audit in normal office hours.

11.3 INCORRECT OR INCOMPLETE INFORMATION

We rely on information *you* give *us* to provide cover for *insured members* and to assess claims. If *you* (or any person on *your* behalf) give us incorrect information or do not give *us* complete and relevant information, we may not pay, or we may delay payment of, a claim in some circumstances.

11.4 BENEFITS

Every benefit:

- (a) accrues from the date it starts until the date the benefit ends;
- (b) is calculated for that part of the month for which it is payable; and
- (c) is payable monthly in arrears.

11.5 PAYMENTS

All payments made in connection with this policy, whether to *us* or by *us*, must be made in Australia and in Australian currency.

11.6 NOTICES

11.6.1 Notices, medical evidence or other communications must be in writing and in English.

11.6.2 We will send notices to *you* at the address *you* last gave to *us*.

11.6.3 You will send notices to *us* at the address *we* last gave to *you*.

11.7 WAIVER

- 11.7.1 *Our* failure or delay to exercise a power or right *we* have under or in connection with this policy does not operate as a waiver of that power or right.
- 11.7.2 A waiver of our power or right is not effective unless *we* waive that power or right in writing.
- 11.7.3 Waiver of a power or right by *us* is limited to the specific matter in respect of which *we* grant it and applies only to the extent and for the period notified in writing by *us*. It does not preclude either the exercise of that power or right in the future or the exercise of any other power or right.

11.8 NON ASSIGNMENT OF POLICY

You may not assign this policy without *our* written agreement.

11.9 GENERAL

This policy:

- (a) is issued from *our* No. 1 Statutory Fund;
- (b) does not participate in *our* profits; and
- (c) does not acquire a surrender value.

11.10 INTERPRETATION

- 11.10.1 The headings in this policy are a guide only. They are not intended to be used to interpret the policy conditions.
- 11.10.2 If the context allows, plurals can be read as the singular and the singular read as plurals.
- 11.10.3 This policy is subject to and governed by the laws of the Commonwealth of Australia and the laws of the State of New South Wales.
- 11.10.4 In this policy (including the Schedule, tables and annexures to this policy document) references to "this policy" or "the policy" are references to the income protection policy no. K006534, but only to the extent that the income protection policy relates to existing members of the *fund*.

12.SPECIAL CONDITIONS

Any *special conditions* for this policy are shown in the Schedules attached to this policy and will apply despite any other condition of this policy.

13.DEFINITIONS

Words or expressions in italics throughout the policy document have the meanings set out in the Schedule(s) attached to this policy. These schedule(s) form part of this policy.

GROUP INCOME PROTECTION POLICY SCHEDULE

<i>accident</i>	A bodily injury caused solely and directly by accidental, external and visible means, independent of any other cause.
<i>active employment</i>	<p>Means the person:</p> <ul style="list-style-type: none">(a) is <i>employed</i> (including being on fully paid leave which is caused by illness or injury) by an employer to carry out identifiable duties and is actually performing those duties; and(b) is not in <i>our</i> opinion, restricted by illness or injury from performing or being capable of actively performing on a <i>full time basis</i> (even if not then working on a <i>full time basis</i>) either:<ul style="list-style-type: none">(i) the duties referred to in paragraph (a); or(ii) the full and normal duties of his or her usual occupation; and(c) is, in our opinion, capable of satisfying paragraphs (a) and (b) above on an ongoing and prolonged basis; and(d) is not entitled to or receiving income support benefits from any source including workers' compensation benefits, statutory transport accident benefits and disability income benefits.
<i>agreed policy</i>	<p>A "life policy" under the Life Insurance Act 1998 (Cth):</p> <ul style="list-style-type: none">(a) Providing income protection cover; and(b) That we agree to treat as an agreed policy for the purposes of this policy.
<i>at work</i>	<p>Means either:</p> <ul style="list-style-type: none">(a) the <i>insured member</i> is:<ul style="list-style-type: none">(i) actively performing all the duties and work hours of his or her usual occupation with his or her employer free from any limitation due to illness or injury; and(ii) in <i>our</i> opinion, capable of satisfying paragraph (i) on an ongoing and prolonged basis; and(iii) not entitled to or receiving income support benefits from any source including workers' compensation benefits, statutory transport accident benefits and disability income benefits; <p>OR</p>

- (b) the *insured member*:
 - (i) is on employer approved leave for reasons other than illness or injury; and
 - (ii) was, on the last working day for the person immediately before he or she commenced the employer approved leave:
 - (A) in *our* opinion actively performing all the duties and work hours of his or her usual occupation free from any limitation due to illness or injury; and
 - (B) not entitled to or receiving income support benefits from any source including workers' compensation benefits, statutory transport accident benefits and disability income benefits.

A person who does not meet this definition is correspondingly described as being "not *at work*".

benefit payment period

2 years; or up to age 65.

consumer price index

The latest annual Consumer Price Index (All Capital Cities) published by the Australian Bureau of Statistics as at the effective date of the calculation under this policy. If the consumer price index is no longer published we will use a similar index to it.

For the purposes of calculating an *insured member's* amount of cover under Condition 3 or an *insured member's monthly benefit* the consumer price index is set to a minimum of 3.0% p.a.

continued cover

The continuation of cover for a *insured member* after termination of this policy, but only for *disability* arising from an illness or an injury where that illness or injury is the reason the *insured member* was not *at work* on the last working day immediately before the termination date of the policy.

cover expiry age

The first day of the month in which the *insured member* turns 65 years of age.

disabled/disability

Partially disabled or *totally disabled*, as applicable. Disability has a corresponding meaning.

disability income

The sum of:

- (a) any income (other than benefits received under this policy) or commutation of income, paid or payable in respect of an *insured member* as a result of the *insured member's* illness or injury including:
 - (i) sick leave payments;
 - (ii) any amounts payable under legislation such as workers' compensation or motor accident compensation; and
 - (iii) any benefits payable under other income protection insurance policies;
- (b) any social security benefits paid or payable in respect of the *insured member*;
- (c) any annual leave, sick leave or long service leave payments received by the *insured member* while *disabled*;
- (d) any income earned by the *insured member* from personal exertion while *disabled*, but excluding any such income earned from an employer; and
- (e) any income which, in *our* opinion, the *insured member* could reasonably be expected to earn in his or her occupation while *disabled* excluding any income actually earned from an employer;

for a month for which a *disability* benefit is payable under this policy.

Any income described in paragraph (a), (b), (c) or (d) which is in the form of a lump sum or is exchanged for a lump sum has a monthly equivalent of 1/60th of the lump sum over a period of 60 months.

disability super

Where an *insured member* is entitled and continues to receive superannuation contributions from his/her employer or from any other source on behalf of his/her employer, during a period of *disability* or *partial disability* or *rehabilitation* any such payments will be disability super.

effective date

26 August 2023

employee	<p>An employee includes a person who satisfies both of the following paragraphs (a) and (b):</p> <p>(a) the person is an employee under the expanded meaning of that term in section 12(3) of the Superannuation Guarantee (Administration) Act 1992 (Cth) (the "SG Act"); and</p> <p>(b) the person is a person for whom the employer is required to pay superannuation contributions to avoid or reduce the superannuation charge payable pursuant to the SG Act.</p> <p>In interpreting the conditions of this policy the employer is regarded as:</p> <ul style="list-style-type: none"> ◆ the employer of; and ◆ being in an employer/employee relationship with; <p>the person.</p>
excluded rehabilitation program	Any program providing 'hospital treatment' or 'general treatment' within the meaning of the Private Health Insurance Act 2007 (Cth) or any other program which might cause this policy to cease to be exempt from any legislation in connection with health insurance, including the Private Health Insurance Act 2007 (Cth) (or any succeeding legislation).
existing insured member	Means an <i>insured member</i> immediately prior to the <i>effective date</i> .
full time basis	At least 30 hours per week
fund	Centric Super Fund ABN: 91 593 544 166
gainfully employed	means employed or self-employed for gain or reward in any business, trade, profession, vocation, calling; occupation or employment including a member who has ceased temporarily to receive any gain or reward under a continuing arrangement for the member to be gainfully employed.
guarantee period	From 1 July 2019 to 30 June 2023 and such subsequent periods as <i>you</i> and <i>we</i> agree in writing.
inactive	In relation to a member's account, has the meaning described in section 68AAA(3) of the <i>Superannuation Industry (Supervision) Act 1993</i> (Cth).
income	<p>1. If the <i>insured member</i> is employed on a casual basis, works as an independent contractor, or earns an income from a business they directly own part of or all of, <i>income</i> means the remuneration earned by the <i>insured member</i> from all <i>regular occupations</i></p> <p>Where an <i>insured member</i> directly owns all or part of the business in which they perform a <i>regular occupation</i>, their <i>income</i> is the total amount earned by that business for the relevant period as a direct result of the <i>insured member's</i> personal exertion, less his or her share of business expenses, but before the deduction of income tax, for that business for the same period.</p> <p>2. If the <i>insured member</i> does not fall within paragraph 1, <i>income</i> means the regular annual remuneration expected to be earned by the <i>insured member</i> from permanent employment in all <i>regular occupations</i> including:</p> <ul style="list-style-type: none"> (a) the value of a fringe benefit which: <ul style="list-style-type: none"> (i) the <i>insured member</i> receives from his or her employer by way of salary sacrifice; and (ii) the <i>insured member</i> would benefit from for at least 6 months after the date on which the salary, which the <i>insured member</i> sacrificed for the fringe benefit, would have first become payable by the <i>insured member's</i> employer; and (b) performance related annual bonuses and commissions (averaged over the lesser of the preceding 3 years and the period for which the <i>insured member</i> has been in receipt of such bonuses or commissions).
income producing duties	The duties of the <i>insured member's own occupation</i> immediately before he or she became <i>totally disabled</i> which generates 20% or more of the <i>insured member's</i> income.

individual transfer terms

Individual transfer terms apply to a person if all of the following requirements are satisfied:

- (a) the person was continuously insured under an *agreed policy* during the 12 months before the *transfer date*;
- (b) on the day before the *transfer date* the person's cover under the *agreed policy* did not contain any individual premium loadings;
- (c) the person has provided *us* with details of any non-standard exclusions that applied to their cover under the *agreed policy* on the day before the *transfer date* ;
- (d) an application for life insurance for the person has never been declined;
- (e) the person's cover under the *agreed policy* ceased on the day before the *transfer date* and the person has agreed to waive any entitlement to continue his or her cover under the *agreed policy*, whether pursuant to a continuation option under the *agreed policy* or otherwise;
- (f) the person:
 - (i) has not received;
 - (ii) has not been admitted for; and
 - (iii) is not eligible for;a total and permanent disablement benefit under the *agreed policy* or any other policy;
- (g) as at the *transfer date* the person is less than 55 years;
- (h) *we* are satisfied, on medical or other evidence, that, as at the date the person's cover under the *agreed policy* ceased, the person has not been diagnosed with an illness that reduces his or her life expectancy to less than 24 months;
- (i) in the 12 months before the *transfer date*, the person must not have been advised to undergo treatment or to take medication prescribed by a *medical practitioner* that was intended to last for three months or longer (excluding the contraceptive pill, hormone replacements, inhaled asthma medication or cold, flu or hay fever medication);
- (j) as at the *transfer date* the person is able to work 35 hours per week and, if applicable, both of the following apply:
 - (i) if in the two years before the *transfer date* the person had their duties or workplace modified due to injury, illness or impairment, they have resumed their pre-modified duties as at the *transfer date*;
 - (ii) if in the two years before the *transfer date* the person was working in a role or occupation that was designed or chosen to suit the needs of an injury, illness or impairment, they have resumed their pre-modified occupation as at the *transfer date*.
- (k) *we* have been provided with evidence satisfactory to *us* of the type and amount of cover which applied to the person under the *agreed policy* on the day before the *transfer date*;
- (l) the person has completed, to our satisfaction, such application or other documents *we* prescribe for this purpose.

individual transfer terms cover

The cover *we* provide under condition 3.2 of this policy for a person to whom condition 2.5 applies. This cover is provided subject to the terms and conditions of this policy including all policy exclusions.

insured member

A person who, at the relevant time, is a *investor* of the *fund* and who either has *individual transfer terms cover* or who has been accepted by *us* for cover under this policy.

insured percentage

75%

investor

An individual with an investment in the *fund*.

limited cover

The person is only covered for *disability* arising from:

- (a) an illness which first becomes apparent; or
- (b) an injury that first occurs,

on or after the date the cover last commenced, recommenced or increased for the *insured member* in the *fund*

maximum accident cover	\$15,000 per month
maximum monthly benefit	\$30,000 a month (\$25,000 for benefit periods greater than 2 years).
minimum hours	15 hours per week.
medical practitioner	<p>A person, acceptable to <i>us</i>, who is registered and practicing as a medical practitioner in Australia other than:</p> <ul style="list-style-type: none"> (a) the <i>insured member</i>; (b) the <i>insured member's</i> direct family member, including a spouse or partner, parent, sibling or child; (c) the <i>insured member's</i> business partner, associate, employer or employee; or (d) a person who practices in the same medical centre or clinic as the <i>insured member</i>.
monthly benefit	<p>The lesser of the following amounts:</p> <ul style="list-style-type: none"> (a) the <i>insured percentage</i> times <i>pre-disability income</i>; (b) the <i>insured percentage</i> times <i>income</i> divided by 12; and (c) the amount determined in accordance with condition 3.
normal pregnancy or childbirth	Normal and uncomplicated pregnancy or childbirth, including multiple pregnancy, caesarean birth, threatened miscarriage, participation in in-vitro fertilisation or other medically assisted fertilisation techniques and normal discomforts of pregnancy, such as morning sickness, backache, varicose veins, ankle swelling and bladder problems.
own occupation	The normal occupation or work carried out by the <i>insured member</i> before becoming <i>disabled</i> .
partial disability benefit	The benefit payable under condition 1.2.
partial monthly benefit	<p>The partial monthly benefit is the <i>monthly benefit</i> reduced by the amount calculated in accordance with this formula:</p> $\frac{C}{PDI} \times \text{Monthly benefit}$ <p>where:</p> <p><i>C</i> = <i>current income</i> <i>PDI</i> = <i>pre-disability income</i></p> <p>for each month the <i>insured member</i> is continuously <i>partially disabled</i>, where <i>current income</i> is the income the <i>insured member</i> earned working for an employer during the month.</p>
partially disabled/partial disability	<p>An <i>insured member</i> is partially disabled if he or she is not <i>totally disabled</i> but, because of illness or injury, he or she:</p> <ul style="list-style-type: none"> (a) has been <i>totally disabled</i> for at least 14 days; (b) is unable to work in his or her <i>own occupation</i> at full capacity immediately after he or she became <i>totally disabled</i> because of the illness or injury that caused his or her <i>total disability</i>; (c) is working in his or her <i>own occupation</i> in a reduced capacity, or working in another occupation; (d) earns a monthly income that is less than his or her <i>pre-disability income</i>; and (e) is under the regular care of, and following the advice of, a <i>medical practitioner</i>

<i>permanent basis</i>	Being employed under a single and ongoing contract of employment that: <ul style="list-style-type: none"> (a) is of indefinite duration or is for a fixed term of no less than 12 months; (b) requires the person to perform identifiable duties; (c) requires the person to work a regular number of hours each week; and (d) provides for paid annual leave, sick leave and long service leave.
<i>policy commencement date</i>	25 August 2023
<i>policyowner</i>	Equity Trustees Superannuation Limited (ETSL) ABN 50 055 641 757, AFSL 229 757, RSE Licence No. L001458
<i>pre-disability income</i>	The total monthly value of income received by the <i>insured member</i> from his or her <i>own occupation</i> averaged over the most recent 12 months immediately prior to becoming <i>disabled</i> . If the <i>insured member</i> has been employed for less than 12 months prior to becoming <i>disabled</i> , then the total monthly value of income will be averaged over the period since the <i>member</i> last commenced employment but subject to a minimum averaging period of 6 months.
<i>premium calculation date</i>	The last business day of every month.
<i>premium due date</i>	The fifth day of every month in each <i>policy year</i> .
<i>premium rates</i>	The premium rates are set out in the Appendix to this policy. The premium rates include stamp duty.
<i>review date</i>	1 July each year
<i>super monthly benefit</i>	The lesser of the following amounts: <ul style="list-style-type: none"> (a) 10% times <i>pre-disability income</i>; and (b) 10% times <i>income</i> divided by 12.
<i>super policy</i>	A "life policy" under the <i>Life insurance Act 1995</i> (Cth): <ul style="list-style-type: none"> (a) providing income protection cover for <i>standard employer – sponsored members</i> of a superannuation fund; and (b) that we agree to treat as a super policy for the purposes of this policy; where the expression <i>standard employer – sponsored member</i> has the same meaning at that expression has in the <i>Superannuation Industry (Supervision) Act 1993</i> (Cth).
<i>totally disabled/total disability</i>	An <i>insured member</i> is totally disabled if, because of illness or injury, he or she has ceased to be <i>gainfully employed</i> and is: <ul style="list-style-type: none"> (a) unable to perform at least one <i>income producing duty</i> of his or her <i>own occupation</i>; (b) under the regular care of, and following the advice of, a <i>medical practitioner</i>; and (c) not working in any occupation, whether or not for reward.
<i>total disability benefit</i>	The benefit payable under condition 1.1.

transfer date	The date we agree in writing is the transfer date for the purpose of applying the <i>individual transfer terms</i> to a person insured under an <i>agreed policy</i> .
waiting period	<p>The continuous period of 30, 60 or 90 days for which an <i>insured member</i> has to be <i>disabled</i> before a <i>disability</i> benefit starts to accrue under this policy, subject to the following requirements:</p> <ul style="list-style-type: none"> (a) The waiting period starts on the date a <i>medical practitioner</i> examines the <i>insured member</i> and certifies that he or she is <i>disabled</i>. (b) The <i>insured member</i> must be <i>totally disabled</i> for at least 14 out of the first 19 consecutive days of the waiting period to qualify for a <i>disability</i> benefit. (c) If the <i>insured member</i> returns to work at full capacity during the waiting period, the waiting period starts again unless the return to work happens once and it is for no more than 5 consecutive days. If this happens, we will add the number of days of work to the waiting period. <p>For <i>insured members</i> to whom condition 2.5 applies, the waiting period which will apply under this policy will be the same waiting period or the next greatest waiting period (if this policy does not provide for the same waiting period) to the waiting period which applied to the <i>insured member</i> under the <i>agreed policy</i> on the day before his or her cover commenced under this policy, with the exception of any waiting period greater than 90 days, which will revert to 90 days under this policy.</p> <p>By way of example of the application of the waiting period which applies under <i>individual transfer terms</i> cover, if:</p> <ul style="list-style-type: none"> (a) the waiting period under the <i>agreed policy</i> is 45 days then the waiting period under this policy will be 60 days; (b) the waiting period under the <i>agreed policy</i> is 180 days, then the waiting period under this policy will be 180 days; (c) the waiting period under the <i>agreed policy</i> is 60 days, then the waiting period under this policy will be 60 days. <p>An insured member may apply to vary the waiting period applicable to them.</p> <p>If the application is to reduce their waiting period, for example from 90 days to 30 days, we will request evidence of their health. We may apply an exclusion or other special terms as a condition of accepting the request. Any change in the waiting period will be effective from the date we advise the insured member of the change, in writing.</p> <p>The change to the premium payable will occur at the end of the month following the application to vary the <i>insured member's</i> waiting period.</p>
war	Includes any act of war (whether declared or not).
we/our/us	AIA Australia Limited ABN 79 004 837 861 AFSL 230043 and its successors or assignees.
you/your	The <i>policyowner</i> .

APPENDIX – PREMIUM RATES

INCOME PROTECTION INSURANCE RATES (2 years Benefit Period) Monthly Premium Rates per \$1,000 of Insured Monthly Benefit

Includes: 8% Stamp Duty

Excludes: Adviser Commission, Dealer / Customer Commission and Administrator / Trustee Commission

Age Next Birthda y	Waiting Period – 30 days				Waiting Period – 60 days				Waiting Period – 90 days			
	Male		Female		Male		Female		Male		Female	
	Non-Smoker	Smoker	Non-Smoker	Smoker	Non-Smoker	Smoker	Non-Smoker	Smoker	Non-Smoker	Smoker	Non-Smoker	Smoker
16	5.10	6.45	7.65	9.67	3.89	4.91	5.83	7.37	1.45	1.84	2.18	2.76
17	5.10	6.45	7.65	9.67	3.89	4.91	5.83	7.37	1.45	1.84	2.18	2.76
18	5.10	6.45	7.65	9.67	3.89	4.91	5.83	7.37	1.45	1.84	2.18	2.76
19	5.10	6.45	7.65	9.67	3.89	4.91	5.83	7.37	1.45	1.84	2.18	2.76
20	5.10	6.45	7.65	9.67	3.89	4.91	5.83	7.37	1.45	1.84	2.18	2.76
21	5.10	6.45	7.65	9.67	3.89	4.91	5.83	7.37	1.45	1.84	2.18	2.76
22	5.10	6.45	7.65	9.67	3.89	4.91	5.83	7.37	1.45	1.84	2.18	2.76
23	5.10	6.45	7.65	9.67	3.89	4.91	5.83	7.37	1.45	1.84	2.18	2.76
24	5.10	6.45	7.65	9.67	3.89	4.91	5.83	7.37	1.45	1.84	2.18	2.76
25	5.10	6.45	7.65	9.67	3.89	4.91	5.83	7.37	1.45	1.84	2.18	2.76
26	5.14	6.49	7.71	9.74	3.89	4.91	5.83	7.37	1.41	1.79	2.12	2.68
27	5.23	6.60	7.84	9.90	3.89	4.91	5.83	7.37	1.39	1.76	2.09	2.64
28	5.33	6.73	8.00	10.10	3.95	4.98	5.92	7.48	1.39	1.76	2.09	2.64
29	5.49	6.93	8.23	10.40	4.03	5.10	6.05	7.64	1.39	1.76	2.09	2.64
30	5.70	7.20	8.55	10.80	4.18	5.28	6.27	7.92	1.43	1.81	2.15	2.72
31	5.94	7.51	8.92	11.26	4.30	5.43	6.45	8.14	1.45	1.84	2.18	2.76
32	6.23	7.86	9.34	11.80	4.50	5.69	6.75	8.53	1.51	1.91	2.27	2.87
33	6.54	8.26	9.81	12.39	4.71	5.94	7.06	8.92	1.57	1.99	2.36	2.98
34	6.91	8.73	10.36	13.09	4.97	6.28	7.45	9.42	1.65	2.09	2.48	3.13
35	7.31	9.24	10.97	13.86	5.26	6.65	7.89	9.97	1.75	2.22	2.63	3.32
36	7.75	9.79	11.63	14.69	5.58	7.05	8.38	10.58	1.87	2.37	2.81	3.55
37	8.21	10.37	12.31	15.55	5.96	7.53	8.95	11.30	2.01	2.54	3.02	3.81
38	8.73	11.03	13.10	16.55	6.37	8.05	9.56	12.07	2.17	2.74	3.26	4.12
39	9.29	11.74	13.94	17.61	6.81	8.60	10.22	12.91	2.35	2.97	3.53	4.46
40	9.89	12.49	14.84	18.74	7.31	9.23	10.96	13.85	2.57	3.25	3.86	4.87
41	10.54	13.31	15.81	19.97	7.89	9.97	11.84	14.95	2.83	3.57	4.24	5.36
42	11.24	14.20	16.86	21.30	8.51	10.75	12.76	16.12	3.13	3.95	4.69	5.93
43	11.99	15.15	17.99	22.73	9.21	11.63	13.81	17.45	3.45	4.35	5.17	6.53
44	12.82	16.19	19.23	24.29	9.97	12.59	14.95	18.89	3.83	4.83	5.74	7.25
45	13.68	17.28	20.52	25.92	10.79	13.63	16.18	20.44	4.24	5.36	6.37	8.04
46	14.64	18.50	21.96	27.74	11.75	14.84	17.63	22.27	4.74	5.99	7.11	8.99

	Waiting Period – 30 days				Waiting Period – 60 days				Waiting Period – 90 days			
	Male		Female		Male		Female		Male		Female	
Age Next Birthda y	Non- Smoker	Smoker	Non- Smoker	Smoker	Non- Smoker	Smoker	Non- Smoker	Smoker	Non- Smoker	Smoker	Non- Smoker	Smoker
47	15.70	19.83	23.54	29.74	12.83	16.21	19.25	24.32	5.32	6.72	7.98	10.08
48	16.84	21.27	25.25	31.90	14.00	17.69	21.00	26.53	5.96	7.53	8.94	11.29
49	18.08	22.84	27.12	34.26	15.35	19.39	23.02	29.08	6.70	8.46	10.04	12.69
50	19.43	24.54	29.15	36.82	16.81	21.23	25.21	31.85	7.53	9.52	11.30	14.27
51	20.92	26.43	31.38	39.64	18.45	23.30	27.67	34.95	8.47	10.70	12.70	16.05
52	22.59	28.53	33.88	42.80	20.29	25.63	30.43	38.44	9.53	12.03	14.29	18.05
53	24.39	30.81	36.59	46.22	22.33	28.21	33.50	42.32	10.72	13.54	16.08	20.31
54	26.39	33.34	39.59	50.01	24.64	31.13	36.96	46.69	12.08	15.25	18.11	22.88
55	28.53	36.04	42.80	54.06	27.10	34.23	40.65	51.34	13.51	17.07	20.27	25.60
56	31.00	39.16	46.51	58.75	29.93	37.81	44.90	56.72	15.19	19.18	22.78	28.77
57	33.76	42.64	50.64	63.96	33.12	41.84	49.68	62.75	17.06	21.55	25.59	32.32
58	36.84	46.54	55.27	69.81	36.63	46.27	54.94	69.40	19.13	24.17	28.70	36.25
59	40.30	50.90	60.45	76.36	40.60	51.29	60.91	76.93	21.46	27.11	32.19	40.67
60	44.23	55.87	66.34	83.80	45.05	56.90	67.57	85.35	24.05	30.38	36.08	45.57
61	48.65	61.45	72.97	92.17	49.99	63.14	74.98	94.71	26.90	33.98	40.35	50.97
62	55.36	69.20	78.95	98.69	51.49	64.36	73.42	91.78	38.75	48.44	55.26	69.08
63	44.85	56.05	65.93	82.41	41.71	52.13	61.32	76.64	31.39	39.24	46.15	57.69
64	37.67	47.09	55.38	69.23	35.03	43.79	51.50	64.38	26.37	32.96	38.77	48.46
65	24.10	30.14	35.44	44.30	22.42	28.03	32.96	41.20	16.87	21.09	24.81	31.01

Occupation Loadings:	Professional	White Collar	Light Blue Collar	Medium Blue Collar	Heavy Blue Collar	Hazardous
	90%	100%	150%	225%	350%	n/a

INCOME PROTECTION INSURANCE RATES (To age 65 Benefit Period)**Monthly Premium Rates per \$1,000 of Insured Monthly Benefit****Includes:** 8% Stamp Duty**Excludes:** Adviser Commission, Dealer / Customer Commission and Administrator / Trustee Commission

Age Next Birthda y	Waiting Period – 30 days				Waiting Period – 60 days				Waiting Period – 90 days			
	Male		Female		Male		Female		Male		Female	
	Non-Smoker	Smoker	Non-Smoker	Smoker	Non-Smoker	Smoker	Non-Smoker	Smoker	Non-Smoker	Smoker	Non-Smoker	Smoker
16	9.68	12.30	16.00	20.02	9.00	11.45	14.88	18.61	6.78	8.61	11.21	14.01
17	9.68	12.30	16.00	20.02	9.00	11.45	14.88	18.61	6.78	8.61	11.21	14.01
18	9.68	12.30	16.00	20.02	9.00	11.45	14.88	18.61	6.78	8.61	11.21	14.01
19	9.99	12.89	16.00	20.02	9.30	11.99	14.88	18.61	7.00	9.02	11.21	14.01
20	10.30	13.48	16.00	20.02	9.58	12.54	14.88	18.61	7.22	9.44	11.21	14.01
21	10.39	13.48	16.00	20.02	9.66	12.54	14.88	18.61	7.28	9.44	11.21	14.01
22	10.79	13.87	16.39	20.49	10.04	12.89	15.25	19.06	7.56	9.70	11.47	14.34
23	11.21	14.27	16.69	20.87	10.43	13.27	15.52	19.41	7.84	9.99	11.68	14.61
24	11.63	14.67	17.09	21.36	10.82	13.64	15.90	19.87	8.14	10.27	11.96	14.95
25	12.17	15.21	17.38	21.74	11.32	14.14	16.16	20.22	8.52	10.65	12.17	15.22
26	12.47	15.60	17.78	22.44	11.60	14.51	16.54	20.87	8.73	10.92	12.45	15.70
27	12.66	15.84	17.92	22.85	11.77	14.73	16.67	21.25	8.86	11.08	12.55	15.99
28	12.83	16.05	18.13	23.33	11.94	14.92	16.87	21.70	8.99	11.23	12.70	16.33
29	13.09	16.38	18.26	23.71	12.17	15.22	16.98	22.04	9.16	11.46	12.79	16.59
30	13.35	16.68	18.47	24.20	12.41	15.51	17.18	22.50	9.35	11.67	12.93	16.94
31	13.69	17.12	19.19	24.90	12.74	15.93	17.85	23.15	9.59	11.99	13.43	17.43
32	14.28	17.85	20.27	26.03	13.29	16.60	18.85	24.21	10.00	12.50	14.18	18.22
33	14.87	18.57	21.56	27.46	13.83	17.28	20.05	25.54	10.42	13.00	15.10	19.21
34	15.45	19.30	22.89	28.88	14.37	17.96	21.28	26.86	10.82	13.52	16.03	20.22
35	16.23	20.28	24.23	30.28	15.09	18.86	22.53	28.16	11.36	14.19	16.96	21.20
36	16.99	21.26	26.08	32.59	15.80	19.77	24.25	30.31	11.90	14.88	18.25	22.82
37	17.88	22.35	27.89	34.85	16.63	20.78	25.94	32.42	12.51	15.65	19.52	24.40
38	18.85	23.57	29.71	37.12	17.53	21.91	27.62	34.53	13.20	16.49	20.80	25.99
39	19.93	24.90	31.54	39.42	18.54	23.15	29.33	36.66	13.94	17.43	22.08	27.60
40	21.18	26.48	33.27	41.60	19.70	24.64	30.95	38.69	14.82	18.54	23.29	29.13
41	22.55	28.19	35.92	44.89	20.97	26.20	33.41	41.75	15.79	19.73	25.15	31.43
42	24.10	30.12	38.68	48.34	22.40	28.01	35.97	44.95	16.87	21.08	27.07	33.83
43	25.75	32.20	41.36	51.72	23.96	29.94	38.47	48.09	18.03	22.54	28.95	36.21
44	27.70	34.63	44.10	55.12	25.77	32.20	41.01	51.27	19.39	24.23	30.87	38.59
45	29.93	37.42	46.77	58.47	27.84	34.80	43.50	54.38	20.96	26.19	32.74	40.94
46	32.35	40.46	50.78	63.47	30.09	37.62	47.23	59.02	22.65	28.31	35.54	44.43
47	34.98	43.74	54.93	68.66	32.53	40.67	51.09	63.85	24.49	30.61	38.45	48.07
48	37.90	47.39	59.25	74.05	35.25	44.06	55.09	68.86	26.53	33.17	41.47	51.83
49	41.11	51.39	63.70	79.63	38.23	47.79	59.25	74.06	28.78	35.97	44.59	55.75

	Waiting Period – 30 days				Waiting Period – 60 days				Waiting Period – 90 days			
	Male		Female		Male		Female		Male		Female	
Age Next Birthday	Non-Smoker	Smoker	Non-Smoker	Smoker	Non-Smoker	Smoker	Non-Smoker	Smoker	Non-Smoker	Smoker	Non-Smoker	Smoker
50	44.51	55.63	68.32	85.42	41.40	51.74	63.54	79.43	31.16	38.94	47.83	59.79
51	49.07	60.82	73.79	92.24	45.63	56.56	68.62	85.79	34.35	42.57	51.66	64.57
52	53.97	66.31	79.64	99.56	50.19	61.67	74.07	92.59	37.78	46.41	55.75	69.69
53	59.11	72.01	85.73	107.16	54.97	66.97	79.73	99.66	41.38	50.41	60.01	75.01
54	64.51	77.94	92.14	115.18	59.99	72.48	85.69	107.11	45.15	54.55	64.49	80.62
55	69.87	83.72	98.78	123.49	64.97	77.86	91.87	114.85	48.91	58.60	69.15	86.44
56	74.52	90.07	103.10	128.86	69.30	83.77	95.88	119.84	52.17	63.05	72.16	90.21
57	78.49	95.71	107.25	134.06	72.99	89.00	99.75	124.67	54.94	66.99	75.07	93.85
58	81.63	100.37	110.70	138.39	75.91	93.35	102.96	128.70	57.14	70.27	77.50	96.87
59	83.17	103.12	112.77	140.97	77.35	95.91	104.88	131.11	58.22	72.19	78.94	98.68
60	82.40	103.00	112.77	140.96	76.63	95.79	104.88	131.10	57.68	72.10	78.94	98.68
61	77.99	97.49	108.36	135.44	72.53	90.66	100.78	125.96	54.58	68.23	75.85	94.82
62	69.48	86.85	99.08	123.86	64.62	80.77	92.14	115.18	48.63	60.79	69.35	86.70
63	56.29	70.34	82.74	103.42	52.35	65.42	76.96	96.18	39.39	49.25	57.92	72.40
64	47.28	59.10	69.50	86.88	43.96	54.96	64.63	80.80	33.09	41.36	48.66	60.82
65	30.25	37.83	44.48	55.60	28.14	35.18	41.36	51.71	21.17	26.47	31.14	38.92

Occupation Loadings:	Professional	White Collar	Light Blue Collar	Medium Blue Collar	Heavy Blue Collar	Hazardous
	90%	100%	150%	225%	n/a	n/a