



1 October 2021

## Occupational Duties Questionnaire

- IOOF Pursuit**

Please use this form if you want to update your current occupation.

**Please complete these instructions in BLACK INK using CAPITAL LETTERS and ✓ boxes where applicable.**

### Step 1: Member details

Member number (if known)  -  -

Title (Dr/Mr/Mrs/Ms/Miss)  Surname

Given name(s)

Residential address

Suburb  State  Postcode

Date of birth  /  /  Gender Male  Female

Employer's name

What is your occupation?

What is your annual salary/remuneration\*\* package (gross)? \$

\*\* Salary/remuneration package (gross): comprises your current wages or salary, plus commissions, plus all other regular cash and non-cash payments and benefits provided to you or for your benefit by your employer, and excludes superannuation guarantee contributions. For full definition of salary/remuneration package, see the relevant insurance guide for your product available on our website ([www.ioof.com.au](http://www.ioof.com.au)).

### The duty to take reasonable care

When you apply for insurance, or apply to make changes to your existing insurance, you have a legal duty to take reasonable care not to make a misrepresentation to the Insurer. A misrepresentation is a false answer, an answer that is only partially true, or an answer which does not fairly reflect the truth.

If the duty is not met, 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.

When answering the questions in this application, please:

- Think carefully about each question before you answer. If you are unsure of the meaning of any question, please ask us before you respond.
- Answer every question truthfully, accurately, and completely.
- Review your application carefully before it is submitted and if necessary, make any corrections.

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

It's important that you understand your obligations and the questions that are being asked. Please contact us for help if you have difficulty understanding the process of obtaining insurance or answering any questions.

What are the principal duties of your occupation and the percentage of time performing each (to a total of 100%):

Principal duties	Percentage of time spent (%)
1. Clerical/administration/managerial	
2. Light manual (such as qualified tradespeople, coffee shop owner)	
3. Manual (such as carpenter, plumber, plasterer, mechanic or an occupation for which travel is an essential part of the job (eg field surveyor)	
4. Heavy manual (such as interstate bus driver, warehouse worker, labourer, bricklayer, house removalist)	
5. Other – please specify:	

Details of any tertiary qualifications or registrations with professional bodies


## Step 2: Privacy statement

The Privacy of IIML and TAL customers is important and IIML and TAL is bound by obligations imposed by current privacy laws including the Australian Privacy Principles.

The way in which IIML and TAL collects, uses, secures and discloses your personal information is set out in their respective Privacy Policies. IIML Privacy Policy is available at [www.ioof.com.au/privacy](http://www.ioof.com.au/privacy). TAL Privacy Policy available at <http://www.tal.com.au/Privacy-Policy>.

### Collection and use of personal information

IIML and TAL collect personal information, including your name, age, gender, contact details, health information, salary, and employment information so that we may assess and administer our products and services to you. In certain circumstances, such as applications for life insurance products and claims, IIML and TAL may be required to collect personal information of a sensitive nature such as lifestyle and medical history information. If you do not supply the information that is required, IIML and TAL may not be able to provide our products and services to you or pay the claim.

IIML and TAL may take steps to verify the information collected; for example, a birth certificate provided as identification may be verified with records held by Births, Deaths and Marriages to protect against impersonation, or IIML or TAL may verify with an employer regarding remuneration information provided in a claim for income protection to ensure that it is accurate.

### Disclosure of personal information

IIML and TAL disclose relevant personal information to external organisations that help us provide our services and may also disclose some of your personal information to other parties, when required to do so to provide our products and services to you, such as the following:

- Claims assessors and investigators, claims managers and reinsurers;
- Medical practitioners (to verify or clarify, if necessary, any health information you may provide);
- Any person acting on your behalf, including your financial advisor, solicitor, accountant, executor, administrator, trustee, guardian or attorney;
- Other insurers;
- For members of superannuation funds where TAL is the insurer, to the trustee, or administrator of the superannuation fund; and
- Other organisations to whom we outsource certain functions during the underwriting and claims processes, such as obtaining blood tests for underwriting purposes, rehabilitation providers, surveillance providers and forensic accountants.

There are situations where we may also disclose your personal information in circumstances where it is:

- Required by law (such as to the police or Australian Tax Office),
- Authorised by law (eg under Court Orders or Statutory Notices).

### Step 3: Member declaration and signature

- I acknowledge that I have read the notice explaining the duty to take reasonable care.
- I confirm I have read and checked any answers, including those not completed in my handwriting, and to the best of my knowledge and belief all the answers to the questions in this application which relate to me are true and correct and complete.
- I have read the privacy information in the PDS **and this application** and I consent to my personal information (including health and sensitive information) being collected, used and disclosed by the Trustee and TAL or their external service providers/contractors as **detailed in the Trustee's and TAL's privacy policies and as summarised in the PDS and this application.**
- I have read and understood the PDS and understand that if this application is accepted, my cover will be subject to the terms and conditions of the relevant insurance policy.
- I acknowledge I'm electing to apply for insurance even if I'm under age 25 and/or my balance is less than \$6,000.
- If I have provided information about another person, it is my responsibility to inform them that I have done so and to refer them to the Trustee's and TAL's privacy policies.
- I understand that if this application is accepted, my cover will be subject to the terms and conditions of IOOF Employer Super's insurance policy.
- I acknowledge that I have received the current Product Disclosure Statement prior to completing this form.
- I acknowledge I'm electing to apply for insurance even if I'm under age 25 and/or my balance is less than \$6,000.

#### Insurance inactivity opt in

- I elect to have any existing or future insurances retained, even if my account does not receive a contribution for a continuous period of 16 months. I acknowledge I can request to cancel my insurance at any time.

Member signature

Date

 /  / 

#### Please forward all correspondence and enquiries to

##### Applications and forms

**Post** GPO Box 264, Melbourne VIC 3001  
**Email** clientfirst@ioof.com.au  
**Fax** 03 6215 5933

##### Enquiries

**Telephone enquiries** 1800 333 500  
**Email enquiries** clientfirst@ioof.com.au