

# Application to reduce or cancel cover

Please complete all pages of this form in black ink using **BLOCK** letters.

- If you wish to **reduce** your cover under Perpetual Select Super Plan you should complete **Section 1 and 2** of this form and sign the Declaration at Section 4.
- If you wish to **cancel** cover under Perpetual Select Super Plan you should complete **Section 1 and 3** of this form and sign the Declaration.

## 1. Investor details (must be completed)

client number		account number	
investor name			
c/- (if applicable)			
postal address			
suburb	state	postcode	
country			
phone (after hours)	phone (business hours)		
mobile	fax		
email			

## 2. Reduce cover

I wish to reduce my current level of cover and require the following level of cover:

Please make a selection below:

### Death only

nominate a fixed-dollar cover amount

for death: \$  ,  ,  .

### TPD only

nominate a fixed-dollar cover amount

for TPD: \$  ,  ,  .

### Death and TPD

nominate a fixed-dollar cover amount

for death: \$  ,  ,  .

for TPD: \$  ,  ,  .

## 2. Reduce cover (continued)

### Salary continuance

nominate a fixed-dollar cover amount

to a value of: \$    ,    .    per month

select your waiting and benefit period:

no change

change your waiting period (if increasing only): 30 days  60 days  90 days

change your benefit period (if decreasing only): 2 years  5 years  to age 65

**Note:** Please complete an insurance application form available at [www.perpetual.com.au/resources-and-documents](http://www.perpetual.com.au/resources-and-documents) if you wish to **decrease your waiting period and/or increase your benefit period** as these changes are subject to underwriting. Approval of any change will be confirmed in writing.

## 3. Cancel part or all of your cover

Complete this section if you want to cancel part or all of your cover. Please put an (X) next to each type of cover that you want to cancel and note that Perpetual Select Super Plan allows for Death or TPD only cover.

Once cover is cancelled you will no longer be insured for that cover and you (or your beneficiaries) will not be able to make an insurance claim for that type of cover. If you cancel your cover and decide to apply for that type of cover in the future, you will need to complete an insurance application form and go through underwriting.

Please cancel my: Death only  TPD only  Death and TPD  Salary continuance

## 4. Signature and declaration

### Privacy statement

I have read and understood the privacy disclosure as detailed in the Perpetual Select Super Plan PDS and incorporated by reference documents that form part of the PDS. I consent to my personal information being collected and used and disclosed in accordance with the privacy disclosure.

I acknowledge that:

- I have read the 'Insurance in your super' document which forms part of the PDS and I elect to reduce or have no cover under Perpetual Select Super Plan.
- I understand that any cover I currently have, and the premium payable, will be reduced or cease from the date that the Trustee receives this fully completed application.
- If I have chosen to cancel part or all of my cover, I will not be entitled to the part, or all, of the cover that I have applied to cancel after the date that the Trustee receives this fully completed application to reduce or cancel cover.
- Should I wish to apply for or increase my cover with the Trustee in the future, I will be required to go through underwriting by completing an insurance application and my cover will not commence until the Insurer has accepted my application for cover in writing.

signature  date  /  /

print name

## 5. Mailing instructions

### Return this form to:

Reply Paid 4171  
Perpetual Select  
GPO Box 4171  
Sydney NSW 2001  
Australia