

3. SMOKER STATUS

Complete this section to apply for smoker premiums or for non-smoker premiums if you have not previously advised BT that you are a non-smoker.

I am a smoker

I am a non-smoker

▶ To apply for non-smoker rates, please answer the following questions:

1. Are you in good health and do you ordinarily enjoy good health? Yes No

2. Have you ever smoked tobacco:
a. during the last twelve months Yes No

b. during your lifetime? Yes No

3. Have you ceased smoking on advice from your doctor or due to any medical reasons? Yes No

4. Are you currently taking stimulants, sedatives, medications or drugs? Yes No

Note: If you answered YES to any of questions 2-4, please provide full details in the space below. For example: if you smoked, what quantity, what form and if applicable when did you start and quit.

4. DECLARATION AND SIGNATURE

Investor declaration

I have read the Product Disclosure Statement (PDS) and I elect to amend my details and/or insurance cover details. I understand that:

- if no further information is requested by the Insurer then any insurance cover details I currently have, and the premium payable, will be adjusted from the date that BT receives this fully completed application, and
- if the Insurer has requested further information in relation to this amendment or should I wish to apply for increased insurance cover in the future I will be required to provide underwriting information, including evidence of good health satisfactory to the insurer and my insurance cover will not commence until the Insurer has accepted my application.

Duty of Disclosure

Before you enter into a contract of life insurance with an insurer, you have a duty, under the Insurance Contracts Act 1984, to disclose to the Insurer every matter that you know, or could reasonably be expected to know, that is relevant to the Insurer's decision whether to accept the risk of insurance and if so, on what terms.

You have the same duty to disclose these matters to the Insurer before you extend, vary or reinstate a contract of life insurance. However, your duty does not require disclosure of a matter:

- that diminishes the risk to be undertaken by the Insurer
- that is common knowledge
- that your Insurer knows, or ought to know, in the ordinary course of business
- where your duty is waived by the Insurer.

If you fail to comply with your duty of disclosure and the Insurer would not have entered into the contract on any terms if the failure had not occurred, the Insurer may avoid the contract within three years of entering into it. If your non-disclosure is fraudulent, the Insurer may avoid the contract at any time.

An insurer who is entitled to avoid a contract of life insurance may, within three years of entering into it, elect not to avoid it but to reduce the sum that you have been insured for in accordance with a formula that takes into account the premium that would have been payable if you had disclosed all relevant matters to the insurer.

Signature of Investor

--



Date (dd/mm/yy)

--	--	--

Signatory name (please print)

--

You can submit this form by:

-  mail BT Lifetime – Personal Super
GPO Box 2919, Adelaide SA 5001
-  fax (02) 9274 5062