



Product Disclosure Statement MTA Loan Protection Insurance Product Features Booklet

Loan Protection Insurance providing cover against:

- **Disablement;**
- **Involuntary Unemployment;**
- **Trauma; and**
- **Death**

This document must be read in conjunction with the Application/Certificate of Insurance for MTA Loan Protection Insurance. Together these documents form the Product Disclosure Statement for MTA Loan Protection Insurance.

This Product Disclosure Statement is effective from 20 March 2012.

MTA Loan Protection Insurance

Product Disclosure Statement

Product Features Booklet

Preparation Date: 28/02/2012

Effective Date: 20/03/2012

This PDS is jointly issued by:

MTA Insurance Limited ABN: 35 070 583 701, AFSL: 239912

PO Box 4824

Eight Mile Plains QLD 4113

Suncorp Life & Superannuation Limited ABN: 87 073 979 530, AFSL: 229880

Level 18 Suncorp Centre

36 Wickham Terrace

Brisbane QLD 4000

Contents

Important information.....	2
Purpose of Loan Protection Insurance	2
Who can apply?.....	2
Cooling off period.....	3
Details of cover.....	3
When does cover start?	4
When does cover stop?.....	5
When we will not pay.....	5
Your premium.....	6
Risks associated with this product.....	6
Commission.....	6
Taxation	6
Cancelling a policy.....	7
Making a claim.....	7
Your duty of disclosure	7
Privacy.....	7
The General Insurance Code of Practice	9
Procedures for resolving complaints about your policy.....	9
Alternative Remuneration Register	10
Important definitions	10
Contact Details	Back Cover

Important information

Loan Protection Insurance is jointly issued by MTA Insurance Limited ABN 35 070 583 701 AFSL 239912 (MTA) and Suncorp Life & Superannuation Limited ABN 87 073 979 530 AFSL 229880 (Suncorp). Suncorp is a related body corporate of Suncorp Group Limited ABN 66 145 290 124 (Suncorp Group) and Suncorp-Metway Limited ABN 66 010 831 722 (Suncorp-Metway). The obligations of Suncorp and MTA are not guaranteed by each other or another company within the Suncorp Group. Loan Protection Insurance is not a bank deposit or other bank liability of Suncorp. Each issuer takes full responsibility for the whole of this Product Disclosure Statement (PDS).

Loan Protection Insurance is promoted, distributed and administered by MTA. Loan Protection Insurance may also be distributed by anyone else permitted to do so by law.

This PDS covers two separate financial products provided as follows:

- MTA issues and incurs solely the obligations relating to the Disablement and Involuntary Unemployment cover options; and
- Suncorp issues and incurs solely the obligations relating to the Trauma and Death cover options.

Suncorp is not responsible for or liable in respect of policies issued by MTA under this PDS and MTA is not responsible for or liable in respect of policies issued by Suncorp under this PDS

Before you buy this insurance, please read this PDS carefully. This PDS contains information about what the policy covers as well as what it does not cover (please refer to When we will not pay on pages 5-6). Any information contained in this PDS has been prepared without taking into account your particular objectives, financial situation or needs (unless Suncorp, or MTA, its authorised officers, employees or Authorised Representatives have previously advised otherwise). For that reason before acting on the information, you should consider the appropriateness of the information in regards to your own circumstances.

You are not obliged to purchase Loan Protection Insurance and you may choose to apply for and arrange consumer credit insurance through a different insurer. If you decide to buy Loan Protection Insurance, you must answer all questions on the Application/Certificate of Insurance truthfully and accurately.

Loan Protection Insurance is not a savings plan. The primary purpose of this product is to provide a benefit under the terms and conditions of this policy. This benefit is measured by reference to your liability under the Finance Contract in the event of specified events or contingencies as detailed in this PDS and selected by you on the MTA Application/Certificate of Insurance occurring.

All the information contained in this PDS is current as at the time of issue.

When reading this PDS, please refer to the Important Definitions section on pages 10 to 11 for the meaning of various terms used in the PDS.

Purpose of Loan Protection Insurance

Loan Protection Insurance is designed to assist you in meeting your Finance Contract repayments in the event of changes to your health, employment status or as a result of your death. The insurance under this PDS is to assist with your loan repayments in the event of any of the following circumstances occurring:

- you are unable to work due to accident or sickness;
- you become involuntarily unemployed;
- you suffer a traumatic event and satisfy the definition of that traumatic event as contained in this PDS; or
- your death.

Please Note: there are circumstances where a benefit may not be paid under your policy. Some circumstances are different from the standard exclusions listed in the Insurance Contracts Regulations 1985. Please ensure you read and understand those circumstances applicable to you. For more details, please refer to When we will not pay on pages 5-6.

Who can apply?

Up to 2 people can apply for Loan Protection Insurance, as long as they each meet the eligibility requirements (please refer to page 3) and they apply by completing and signing the MTA Application/Certificate of Insurance, which includes questions regarding your health.

There are no medical tests required when you apply, however we will consider your health when assessing your application for insurance. We will use the information provided by you in your application to assess whether or not we can provide you with cover.

The following table details the eligibility requirements you need to satisfy to apply for MTA Loan Protection Insurance

Requirement at the time of application	Disablement Cover	Involuntary Unemployment	Trauma Cover	Death Cover
• you must be aged between 17 and 59 years (inclusive);	✓	✓	✓	✓
• you are an Australian resident and you have received a copy of this PDS in Australia;	✓	✓	✓	✓
• you must have satisfactorily completed the pre-existing illnesses and/or medical conditions section of the Application/Certificate of Insurance and advised of any pre-existing illnesses or medical conditions;	✓	✓	✓	✓
• you have never had a life, accident or sickness insurance policy declined, cancelled by the insurer, or offered on special terms.	✓	✓	✓	✓
• If you are an employee: you must be employed on a permanent, full time basis, or working on a permanent part-time basis for at least 20 hours per week and not under a notice of dismissal when this policy or the Finance Contract commences.	✓	✓		
• If you are self-employed: You must be self-employed, and working on a continuous basis for a minimum of 20 hours per week and you are not self-employed on a seasonal, temporary or non-renewable contract nature	✓	✓		

Cooling off period

You have 14 days from the commencement date noted on the Application/Certificate of Insurance to check this insurance meets your needs. This is the cooling off period.

If you wish, you can cancel your policy during the cooling off period by writing to MTA (please refer to the back cover for contact details). Provided you have not made a claim, a full refund of the premium will be paid to the Credit Provider noted on the Application/Certificate of Insurance. No cancellation fee will be charged.

Details of cover

There are four different types of cover options available under Loan Protection Insurance – Disablement, Involuntary Unemployment, Trauma and Death. The following table explains the cover, including the benefits payable under each one.

In addition to the information provided in the table below, please refer to When we will not pay on pages 5-6 for details of exclusions under this policy. Please also refer to the Important Definitions section on pages 10 to 11 for the meaning of various terms used in the PDS.

Cover Option	Cover Option & Limitations Explained	Example
Disablement	<p>For each day of disablement (excluding the first 14 days), we will pay 1/30th of the monthly benefit, providing you:</p> <ul style="list-style-type: none"> • were engaged in permanent and gainful employment on the date your disablement commenced; and • have obtained and are following the advice of a medical practitioner in relation to your disablement. <p>The maximum benefit payable is \$75,000.</p>	<p>John is employed as a full-time factory worker. He has a regular monthly loan repayment of \$600. He suffers an injury on 16 March and is unable to work from 17 March to 30 April inclusive. He has a medical certificate from his doctor for this period. He submits a disablement claim to MTA Insurance and the claim is accepted.</p> <p>As no benefit is payable for the first 14 days, John would be paid a Disablement Benefit from 31 March to 30 April. This period totals 31 days. The amount paid under the policy would be 31/30ths of \$600, which equals \$620.</p>
<p>Involuntary Unemployment</p> <p>This cover can only be selected in combination with Disablement Cover</p>	<p>For each day of Involuntary Unemployment (excluding the first 14 days), we will pay the lesser of:</p> <ul style="list-style-type: none"> • 1/30th of the monthly benefit for up to six months; or • \$3,000, for any one claim. <p>The maximum benefit payable during the period of insurance under this Cover is \$6,000, regardless of how many times you become involuntarily unemployed.</p> <p>We will pay only one claim in each 6 month period.</p>	<p>If you are an employee:</p> <p>Mary is made redundant from her job on 16 September, and is involuntarily unemployed from 17 September to 12 December inclusive. She has a regular monthly loan repayment of \$300 and has Involuntary Unemployment insurance with MTA Insurance. She submits an involuntary unemployment claim to MTA Insurance and it is accepted.</p> <p>As no benefit is payable for the first 14 days of involuntary unemployment, Mary is eligible for benefit payments from 1 October to 12 December inclusive. This is a total of 73 days, made up of 31 days in October, 30 days in November and 12 days in December. The total benefit payable is therefore calculated as 73/30ths of \$300 which equals to \$730.</p>

Cover Option	Cover Option & Limitations Explained	Example
<p>Involuntary Unemployment</p> <p>This cover can only be selected in combination with Disablement Cover</p>	<p>For each day of Involuntary Unemployment (excluding the first 14 days), we will pay the lesser of:</p> <ul style="list-style-type: none"> • 1/30th of the monthly benefit for up to six months; or • \$3,000, for any one claim. <p>The maximum benefit payable during the period of insurance under this Cover is \$6,000, regardless of how many times you become involuntarily unemployed.</p> <p>We will pay only one claim in each 6 month period.</p>	<p>If you are self-employed:</p> <p>John's business fails and he becomes unemployed on 16 September. On 17 September John registers with Centrelink and begins to receive benefits. John has a regular monthly loan payment of \$300. John submits an involuntary unemployment claim to MTA Insurance and it is accepted. John obtains employment on 13 December.</p> <p>As no benefit is payable for the first 14 days of involuntary unemployment, John is eligible for benefit payments from 1 October to 12 December. This is a total of 73 days, made up of 31 days in October, 30 days in November and 12 days on December. The total benefit payable is therefore worked out as 73/30 of \$300 which is \$730.</p>
<p>If repayments under the Finance Contract are not equal monthly amounts, the amount of benefit payable for each day of disablement or involuntary unemployment is the amount calculated by dividing the total amount of repayments, less the amount of Balloon Payments, by the number of days that make up the term of the Finance Contract.</p>		
<p>Trauma</p> <p>This cover can only be selected in combination with Death Cover.</p> <p>Trauma and Death cover may also be combined with Disablement, or Disablement and Involuntary Unemployment Cover</p>	<p>If, during the period of insurance, you suffer a Traumatic Event and, in the opinion of Suncorp after having considered medical and any other evidence we may require, satisfy the definition of that condition, Suncorp will pay the lesser of:</p> <ul style="list-style-type: none"> • the amount sufficient to pay out the Loan at the date the trauma was suffered (including a maximum of two months' arrears); or • the amount financed in the Application/Certificate of Insurance; or • \$40,000 – the maximum benefit payable. <p>A waiting period of 90 days applies from the Policy Commencement Date in relation to Trauma insurance benefits. Payment will be made for one specified Trauma event only.</p>	<p>Bill took out Death and Trauma Cover under Loan Protection Insurance when he arranged his \$25,000 loan in August. On 15 May, Bill has a heart attack and is admitted to hospital. On this date, the amount outstanding on Bill's loan is \$21,000. Bill submits a claim for a Trauma Benefit to Suncorp for assessment. After reviewing the necessary evidence, the claim is accepted.</p> <p>On the date Bill suffers a heart attack, the amount outstanding on his loan is \$21,000. As this amount is less than the amount financed in the Application (\$25,000) and less than \$40,000, Suncorp will pay a benefit of \$21,000. There were no arrears.</p>
<p>Death</p>	<p>If, during the period of insurance, you die, Suncorp will pay the lesser of:</p> <ul style="list-style-type: none"> • the amount sufficient to pay out the Loan at the date of death (including a maximum of two months' arrears); or • the amount financed in the Application/Certificate of Insurance; or • \$100,000 – the maximum benefit payable. <p>If the policy is held by joint borrowers, Death cover will be payable once under the policy.</p>	<p>John chose to purchase Death Cover under Loan Protection Insurance when he arranged his \$30,000 loan in March. On 5 August, John suffered a fatal stroke. As at the date of John's death, the amount outstanding on his loan was \$28,000.</p> <p>As the amount outstanding on John's loan is less than the amount financed in the Application (i.e. \$30,000) and less than \$100,000, Suncorp will pay a benefit of \$28,000. There were no arrears.</p>

When does cover start?

If the persons to be insured meet the eligibility criteria (explained on page 3), we receive your completed MTA Application/Certificate of Insurance and your application for cover is accepted by us (including payment), you will be covered for the benefits outlined in this PDS from the Policy Commencement Date.

If you apply and we accept your application for cover, this PDS and your Application/Certificate of Insurance together sets out the full terms and conditions of your policy. This policy is issued on the basis of information contained in the Application/Certificate of Insurance and will constitute notification of our acceptance of your Loan Protection Insurance policy at the premium quoted on the Application/Certificate of Insurance.

All benefits payable under this policy will be paid to the Credit Provider and will be used to either meet your loan repayments, or reduce or pay out your loan, unless otherwise directed by the Credit Provider.

When does cover stop?

Cover under this policy will stop and all benefits will cease on the earliest of:

- the expiry date of the Period of Insurance;
- the date on which the Finance Contract is discharged, refinanced, in default or terminated;
- the effective date of cancellation by you or the Credit Provider or us;
- the date you reach your 65th birthday;
- the date a Death or Trauma Insurance Benefit is paid;
- the date you are no longer a resident of Australia, or residing outside Australia for more than 6 months (unless otherwise agreed to in writing by us); or
- the maximum policy claim limit is reached.

When we will not pay

We will not pay:

- more than any one benefit at the same time or for the same event;
- if the Traumatic Event occurs in the first 90 days from the Policy Commencement Date;
- more than one Trauma Benefit;
- in relation to a particular cover option, as indicated by a (X) in the following table.

Please refer to the Important Definitions section on pages 10 to 11 for the meaning of various terms used in the following table.

Cause / Condition Standard Exclusion	Disablement	Involuntary Unemployment	Trauma	Death
We will not pay a benefit or refund any premiums if the event giving rise to the claim (as indicated in the following table by X), directly or indirectly is as a result of:				
• a deliberate, self-inflicted injury	X	X		
• war or war like activities	X	X	X	X
• expropriation of any property	X	X		
• the use, existence or escape of nuclear weapons material, or ionizing radiation from, or contamination by radioactivity from, any nuclear fuel or nuclear waste from the combustion of nuclear fuel	X	X	X	X
• you being under the influence of intoxicating liquor or of a drug, other than a drug taken or administered by or in accordance with the advice of a duly qualified medical practitioner	X	X		
• you being addicted to intoxicating liquor or to a drug;	X	X		
• you taking part in a riot or civil commotion	X	X		
• you acting maliciously	X	X		
• you engaging in professional sporting activities	X	X		
• you becoming voluntarily unemployed	X	X		
• you flying, or engaging in aerial activities, other than as a passenger in an aircraft that is authorised to fly under a law that relates to the safety of aircraft	X	X		X
• you being employed for a specified period or by reference to specified work – the insured person becoming unemployed at the expiration of the period or on the completion of the work	X	X		
• any pre-existing medical condition	X	X	X	X
• any pre-existing illness and/or condition of: a) heart, vein or circulatory disorder; or b) stroke, epilepsy, fainting spells or fits of any kind; or c) high blood pressure; or d) leukaemia, cancer, melanoma or tumour	X		X	X
• Cancer or Stroke as defined and excluded on page 5			X	
• elective surgery during the period of insurance	X	X		
• any illness, condition or injury as a result of elective surgery within 6 months of the policy commencement date	X	X		
• terrorist activities	X	X	X	X

Cause / Condition Standard Exclusion	Disablement	Involuntary Unemployment	Trauma	Death
• any contact with asbestos	X	X	X	X
• the Human Immunodeficiency Virus, Acquired Immune Deficiency Syndrome or sexually transmissible diseases	X	X	X	X
• suicide within 13 months of the policy commencement date				X
• you becoming unemployed, disabled, suffering a traumatic event or dying after your 65th birthday	X	X	X	X
• lockouts or taking part in strikes	X	X		
• any illness or condition diagnosed within 28 days of the policy commencement date	X	X		
• any illness or condition resulting from or attributable in any way to childbirth, abortion or pregnancy	X	X		
• you engaging in a criminal act	X	X		
• cessation of your employment within 28 days of: a) the policy commencement date; or b) the date you commence new employment; or c) failure to provide proof of at least 60 days continuous employment immediately prior to any period of involuntary unemployment		X		
• Your employment being, seasonal, non-renewable, or if your employment is under a fixed term contract of employment of less than 12 months duration	X	X		
• You being on maternity, paternity or sabbatical leave	X	X		
• Misconduct or breach of employment contract resulting in dismissal or unemployment	X	X		
• Not obtaining or following the advice of a medical practitioner	X			

Your premium

Your premium pays for the cost of insurance cover, government taxes (eg Stamp Duty and GST), any commission and administration costs. The amount of GST and Stamp Duty will be shown on your Application/Certificate of Insurance.

The premium payable is determined by multiplying the amount financed under your Finance Contract by the applicable premium rate. The premium rate that applies will vary depending on the type of insurance cover you select and the term of your Finance Contract. Rates are generally calculated based on a number of factors including but not limited to age, sex and smoker status. The premium payable will be shown on the Application/Certificate of Insurance.

The premium is a once only payment that covers the full term of the period of insurance. You are required to pay the premium at the time your Finance Contract commences. The premium is calculated as a set percentage of the amount financed, depending on which type(s) of cover you choose. If a Finance Contract is taken in joint names and both elect to apply for Loan Protection Insurance, the premium will also increase to take into account both insured persons applying for cover.

The premium is included in your initial loan amount, that is, it is fully funded by the loan, interest will be charged on the premium. If you pay off your loan early or you request cancellation of your cover any rebate applicable will be paid to the credit provider who will reduce your payout figure by the total of the rebate. The period of insurance normally covers the same period of time as your Finance Contract. However, you may select to have this insurance cover for a shorter period of time. For a personalised quote, please discuss with the authorised representative who is selling you this policy.

Where premiums are paid into a statutory fund, they do not participate in any surplus arising from that fund.

Risks associated with this product

You should be aware of the following risks in relation to this product:

- your policy may not suit your needs;
- the cover provided under the product may not fully cover your Finance Contract amount in the event of a claim; or
- you may not be paid a benefit if in the event of a claim you are subject to one of the exclusions (please refer to When we won't pay on page 5).

It is important your policy meets your needs both now and in the future. You may need to seek assistance from an adviser if the terms are not consistent with your needs or they do not suit your personal circumstances.

Commission

The authorised representative selling you this policy will be paid a commission. The premiums paid take into account any commissions payable. The rate of commission is up to 20% of the premium paid (excluding government charges) as limited by the National Credit Code (the Code).

Taxation

Usually, premiums are not tax deductible and any benefit payments are not assessable for tax purposes.

However, under certain circumstances, premiums under the Disablement and Involuntary Unemployment options may be tax deductible, and any benefits payable may be assessable for income tax purposes.

These comments are a guide only and do not take into account changes in taxation laws or your particular circumstances. Please consult your tax adviser, accountant or the Australian Taxation Office about your own individual circumstances.

Cancelling a policy

You may cancel your policy at any time by giving us written notice. Cancellation will take effect from the date we receive your request.

We may also cancel this policy on any grounds permitted under relevant legislation by telling you in writing.

We will rebate part of your premium in accordance with relevant legislation (eg the Code). We will not refund premium where a Trauma or Death Benefit has been paid, or where we have paid Disablement or Involuntary Unemployment benefits up to their limit under this policy.

The credit provider may cancel this policy if any item to which the Finance Contract relates is repossessed by, or on behalf of, the credit provider, or is deemed a total loss.

Any refund or rebate of premium will be forwarded to the credit provider nominated on the Application/Certificate of Insurance.

Making a claim

To make a claim, please contact MTA (please refer to the Back Cover for contact details) within 30 days of the event which may have given rise to your claim.

We will send you a claim form which must be fully completed, signed and returned with all requirements, including written statements, medical certificates and any other supporting documentation we may require you to provide. This information must be gathered and returned to us as soon as reasonably possible. We may refuse the claim if we are disadvantaged by any delay in notifying us of a claim. You must also provide us with your current residential address and keep us advised of any changes.

Depending on the Cover you are claiming for, we will require information to help us complete our assessment. The following information will be required:

To make a **Disablement** claim, you are required to provide us with evidence of the disablement from a medical practitioner. The medical certificate provided by your medical practitioner cannot exceed one calendar month, except as directed by the MTA Claims Manager in charge of your claim.

To make an **Involuntary Unemployment** claim:

If you were an employee, you are required to provide us with certification of registration from Centrelink, a separation certificate from your immediate past employer and regular Centrelink confirmation of unemployment.

If you were self-employed, you are required to provide us with certification of registration from Centrelink, and regular Centrelink income statements. Confirmation from the administrator that the business is ceasing to operate due to actual or imminent insolvency.

To make a **Trauma** claim, you are required to provide us with evidence from a Medical Practitioner that you have suffered a Traumatic Event.

To make a **Death** claim, your executor, spouse or dependant is required to provide us with your death certificate, as well as proof of age, identity and evidence of the amount to be claimed.

In addition to these requirements, we have the right to make any

further reasonable enquiries in relation to a claim. We also have the right to require you to be medically examined by our appointed medical practitioner at our expense.

Claim recovery

If, for any reason, we pay benefits that you are not entitled to, we shall have the right to recover those benefits from you or the credit provider.

Your duty of disclosure

For contracts of insurance

Before you enter into a contract of 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, is relevant to the insurer's decision whether to insure you, and, if so, on what terms.

You have the same duty to disclose those matters to the insurer before you renew, extend, vary or reinstate a contract of insurance. Your duty, however, does not require disclosure of a matter:

- that reduces the risk to be undertaken by the insurer;
- that is common knowledge;
- that your insurer knows, or, in the ordinary course of business, ought to know; or
- that your insurer has waived your duty to disclose.

In summary, you are required to be truthful.

Non disclosure – life insurance

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

Non disclosure – general insurance

If you are unsure as to whether you need to disclose something, it is better to tell us. This is because if you fail to comply with your duty of disclosure and do not tell us something that you know or should know is relevant to the insurance contract, we may be entitled to reduce our liability under the contract in respect of a claim or may cancel the contract.

If your non-disclosure is fraudulent, we may also have the option of treating the contract as if it was never entered into from the beginning.

Privacy

MTA Privacy Statement

We, MTA, respect the confidentiality of the personal information that you provide to us.

1. National Privacy Principles

The way we handle your personal information is governed by the National Privacy Principles. You can ask to obtain access to your personal information we and/or our contractors hold, although under some circumstances permitted by law you may not be provided with such information.

2. Our ability to collect personal information

We are permitted to collect this information under laws relating to insurance, credit, taxation and the provision of financial services.

3. How your personal information will be used

We collect your personal information so that we can assess the risk in providing you with the insurance for which you have applied, and, if your application is successful, provide you with such insurance, and to assess any claim you may make on such insurance. If you do not provide us with your personal information, we will be unable to assess the risk or process your application for insurance.

4. Exchange of personal information with third parties

Your personal information may be disclosed to the parties described below to enable us to assess your application for insurance or any claim you may make in the future:

- current and future insurance agencies, or other insurers including Suncorp Life & Superannuation Ltd and any member of the Suncorp Group, (in this PDS called the Suncorp Group) in relation to your application, the issue of insurance and any claim you may make in the future;
- our insurance underwriters / providers in relation to our insurance policies (including the Suncorp Group)
- medical practitioners, rehabilitation providers, health specialists, claims investigators and assessors who may be assisting us in assessing any claim you may make;
- Centrelink, the Australian Taxation Office or other government departments, agencies or bodies to whom we may be required by law to disclose information regarding, but not limited to, any payout or benefit paid in respect of any insurance policy you may hold with us;
- your employer, in relation to your employment status; and
- our professional advisers and other contractors (eg. insurance reference agencies, information technology consultants and mailing houses).

We may also be providing a copy of your application and personal information to:

- any finance company referred to in your application;
- the motor dealer/broker referred to in your application; and
- the Suncorp Group.

5. Access and correction of your personal information

It is important to us that the personal information that we hold about you is accurate, complete and up to date. If you are aware that this is not the case and would like your personal information corrected, or if you simply desire access to your personal information, please contact MTA (please refer to the Back Cover for details). If we decide not to correct or provide you with access to your personal information, we will give you our reasons for our decision.

Suncorp Privacy Statement

The Privacy Act 1988 (Cth) requires us to inform you that:

Purpose of collection

Personal information is information about an identifiable individual and includes facts or an opinion about you which identifies you or by which your identity can be reasonably determined. We collect your personal information so we can conduct our business and offer and provide you with our range of financial products and services.

We collect personal information for the purposes of:

- identifying you when you do business with us;
- protecting your personal information from unauthorised access;
- establishing your requirements and providing, administering and managing the products or services you request;
- assessing and investigating, and if accepted managing a claim made by you under one or more of our products; and
- understanding your circumstances and improving our financial products and related services.

We may be required by taxation and other relevant laws to collect your personal information

Consequences if personal information is not provided

If we request personal information about you and you don't provide it, we won't be able to provide you with and manage the financial product or service you request, or manage and pay any benefit or insurance claim you make.

Disclosure

We use and disclose your personal information for the purposes we collected it. We may also use and disclose your personal information for a secondary purpose related to the purpose for which we collected it, where you would reasonably expect us to use or disclose your personal information for that secondary purpose. In the case of sensitive information, any secondary purpose, use or disclosure will be directly related to the purpose of collection.

When necessary and in connection with purposes listed above, we may disclose your personal information to and/or collect your personal information from:

- hospitals, medical or health professionals or various professional advisers who assist;
- mail service organisations who create and despatch our documentation and correspondence, including our direct marketing material;
- document storage facility providers;
- information technology providers, including hardware and software vendors and consultants such as programmers;
- reinsurers, policy administrators, claims reference providers and investigative service providers;
- customer research organisations;
- where required or authorised under our relationship with our joint venture partners; and
- other companies within the Suncorp Group.

Disclosure overseas

There are also instances where we may have to send your personal information overseas or collect personal information from overseas. These instances include:

- when you have asked us to do so;

- when it is necessary in order to facilitate a transaction on your behalf;
- when we are authorised or required by law to do so;
- when we have outsourced a business activity or function to an overseas service provider with whom we have a contractual arrangement;
- certain electronic transactions; or
- ending your personal information to companies in the Suncorp Group.

We will only send your personal information overseas or collect personal information about you from overseas for the purposes in this statement and in compliance with the privacy regime.

Access

You can ask us to provide you with the personal information we hold about you. In some circumstances, we can deny your request for access. If we deny your request, we will tell you why. If it will take us time to access and supply your personal information, we will inform you of the likely delay. More detailed access requests, eg access to information held in archives, may incur a fee to cover our costs.

Marketing

We would like to use and disclose your personal information to keep you up to date with the range of products and services available from the Suncorp Group. Generally, the companies in our Group will use and disclose your personal information for Suncorp's marketing purposes.

If you do not want us to use and disclose your personal information for these marketing purposes please contact us and tell us.

Contact

Please contact us if you change your mind at any time about receiving marketing material or you want to request access to the personal information we hold about you. If you would like more information about our privacy practices, please ask us for a copy of our Privacy Policy. You can contact us by calling 13 11 55. Our Privacy Policy can also be found on our website at www.suncorp.com.au.

The General Insurance Code of Practice

MTA has adopted the General Insurance Code of Practice (the Code). The purpose of the Code is to raise the standards of practice and service in the general insurance industry.

The objectives of the Code are:

- to promote better, more informed relations between insurers and their customers;
- to improve customer confidence in the general insurance industry;
- to provide access for resolution of complaints and disputes between insurers and their customers; and
- to commit insurers and their service providers to higher standards of customer service.

Procedures for resolving complaints about your policy

Non-claim related complaints

If you have a complaint about any aspect of your policy or the way we have dealt with your personal information, please contact:

MTA Insurance Limited
 PO Box 4824
 Eight Mile Plains QLD 4113
 Phone: Toll Free 1800 634 294
 Facsimile: 07 3340 2701
 Email: enquiries@mtai.com.au

Your complaint will receive prompt consideration.

If your complaint is not resolved to your satisfaction, it will be referred to MTA's Internal Dispute Resolution (IDR) Officer who has authority to deal with the dispute. Otherwise you can contact the Financial Ombudsman Service ABN 67 131 124 448 (FOS) (please refer to their contact details below).

Claim related complaints

If your complaint concerns a Disablement or Involuntary Unemployment claim or you are dissatisfied with our decision or the way we handled your complaint, please contact MTA (please refer to the back cover for contact details). Otherwise you can contact the FOS (please refer to their contact details below). The General Insurance division of FOS resolves general insurance complaints that are covered by its Terms of Reference.

If you have a complaint about a Death or Trauma claim, you can contact our Customer Relations Unit by:

- phone on 1800 689 762
- fax on 1300 767 337
- email at customer.relations@suncorp.com.au
- writing to us at Reply Paid 1453
 Suncorp Customer Relations Unit (RE058)
 GPO Box 1453
 Brisbane QLD 4001

For more information on our complaints handling process, please contact our Customer Relations Unit on the details above. If you are dissatisfied with our decision or the way we handled your complaint, you can also contact the FOS. FOS hears complaints in accordance with the applicable Terms of Reference.

Financial Ombudsman Service (FOS)

FOS is an external dispute resolution scheme that provides a free service to customers and is a totally impartial body who will deal with your complaint directly or follow up the matter on your behalf.

You can contact FOS by:

- phone on 1300 78 08 08 (for the cost of a local call*)
- fax on (03) 9613 6399
- email at info@fos.org.au
- writing to Financial Ombudsman Service Limited
 GPO Box 3
 Melbourne VIC 3001

* A higher charge may apply for public telephones and mobile phones

Alternative Remuneration Register

All payments made or received by Suncorp will be in accordance with the Financial Services Council (FSC) Industry Code of Practice. We keep a register of these payments which you can view by contacting us on 1800 634 294.

Important definitions

Some of the words in this policy have special meanings. These words and their meanings are listed below and apply whether the first letter of each word is in upper case or lower case.

Amount Financed means the amount borrowed as specified in the Finance Contract.

Application/Certificate of Insurance Insurance means the document you complete when you apply for insurance cover under this PDS. The Application/Certificate of Insurance sets out the particular details applicable to your insurance policy and forms part of this PDS.

Balloon Payment (Payment (where applicable to the Loan) means a final loan repayment that is significantly larger than all the other loan repayments that make up the total of the Finance Contract.

Benefit means either the disablement benefit, involuntary unemployment benefit, death benefit or the trauma benefit (as the case may be) payable under this policy.

Cancer is defined as any malignant tumour characterised by the uncontrolled growth and spread of malignant cells that requires treatment by surgery, radiotherapy, chemotherapy, biological response modifiers, or any other major interventionist treatment and includes cancers that are completely untreatable. Payment of the sum insured will cover numerous cancers such as breast cancer, bowel cancer, lung cancer and prostate cancer.

The following Cancer conditions are not covered under the policy:

- Chronic lymphocytic leukaemia Rai Stage 0;
- Melanomas and all skin cancers including malignant melanomas (except Melanomas which have a depth invasion of Clark Level 3 or 1.55 mm or more in thickness) unless there has been a spread to other organs;
- Carcinoma in situ of the breast except if the carcinoma results directly in the removal of the entire breast. Cover is provided if the carcinoma results directly in the removal of the entire breast and if the procedure is performed specifically to arrest the spread of malignancy and is considered appropriate and necessary treatment;
- Prostatic cancers which are histologically described as TNM Classification T1 or are of other equivalent or lesser classification;
- Tumours showing the malignant changes of carcinoma in situ (including cervical dysplasia CIN-1, CIN-2 and CIN-3) or which are histologically described as pre-malignant; or
- Dukes Stage A colorectal cancer unless there has been a spread to other organs.

Coronary Artery Bypass Grafting means coronary artery bypass grafting to correct a narrowing or blockage of one or more coronary arteries.

Credit Provider means the financier from whom you obtained the finance and who is stated on your Application/Certificate of Insurance as the credit provider.

Disablement means your total and continuous inability due to an accident, sickness or medical condition to perform the duties of an occupation for which you are reasonably qualified by education, training or experience and that this inability has been certified by a legally qualified medical practitioner acceptable to us.

Elective Surgery means surgery that is subject to choice (election).

Finance Contract means the finance contract specified in the Application/Certificate of Insurance.

Heart Attack is defined as the death of a portion of the heart muscle (myocardium) as a result of inadequate blood supply to the relevant area. The diagnosis shall be supported by the following criteria being present and consistent with a heart attack.

EITHER

- (a) – confirmatory new electrocardiogram (ECG) changes; and
 - diagnostic elevation of cardiac enzyme CK-MB; OR
- (b) – a reduction in the Left Ventricular Ejection Fraction to less than 50% measured three months or more after the event; and
 - an elevation of Troponin in excess of the level representing Minimal Myocardial Damage. For the purpose of this definition, Minimal Myocardial Damage is represented by a level of Troponin I of 2 µg/L or less, or Troponin T of 0.6 µg/L or less, or the equivalent.

Insured Person means the person who has the benefit of the insurance cover purchased under this PDS.

Insurer, We, Us, Our Our means MTA Insurance Limited ABN 35 070 583 701 (in the case of Disablement and/or Involuntary Unemployment cover) and/or Suncorp Life & Superannuation Limited ABN 87 073 979 530 (in the case of Trauma and/or Death cover).

Involuntary Unemployment means:

If you are an employee, you are involuntarily terminated from permanent and gainful employment during the period of insurance. You must be registered for unemployment with Centrelink. This also means your termination of employment was not due to voluntary unemployment, voluntary redundancy, reaching retirement age, misconduct or breach of employment contract resulting in dismissal or unemployment.

If you are self-employed, your termination from Permanent and Gainful Employment arising from the business ceasing to operate is due to actual or imminent insolvency or business factors beyond your reasonable control. The business must be in the process of being liquidated or placed in the control of an insolvency or bankruptcy administrator. You are receiving unemployment benefits under the social security law (as defined by the Social Security (Administration) Act 1990) as issued and amended by the Commonwealth Government. Approved leave, for example maternity, paternity or sabbatical leave, is not considered unemployment.

Joint Borrower means a policy where a finance contract is entered into in joint names by more than one person.

Loan means the Finance Contract.

Medical Practitioner means someone legally qualified and registered to practice medicine in Australia (other than you or members of your immediate family).

Monthly Benefit means the regular monthly repayment (excluding any residual or Balloon Payment) as shown in the Application/Certificate of Insurance.

MTA or MTA Insurance Limited means MTA Insurance Limited ABN 35 070 583 701 AFSL No. 239912.

Notice Of Dismissal means a written advice or notice from your employer notifying you that you have been dismissed from your current employment.

Period Of Insurance means the period shown on your Application/Certificate of Insurance as the applicable period of insurance cover.

Permanent and Gainful Employment means:

If you are an employee, you are working on a permanent and continuous basis for wages or income for a minimum of 20 hours every week and you are not in employment of a seasonal, temporary or non-renewable contract nature.

If you are self-employed, you are working on a permanent and continuous basis for a minimum of 20 hours per week in a business or professional practice that is capable of generating income for that business or professional practice. You are not self-employed on a seasonal, temporary or non-renewable contract nature.

Pre-existing Medical Condition means any illness or condition for which you have consulted a medical practitioner at any time prior to the policy commencement date; or which is a direct or indirect result of any illness, injury or condition where any symptoms were present in the six month period prior to the policy commencement date, or which is a direct or indirect result of any illness, injury or condition of which you were otherwise aware, or ought reasonably have been aware, prior to the policy commencement date.

Policy means the contract of insurance between you and Suncorp Life & Superannuation Limited and/or MTA Insurance Limited (as the case may be) as set out in this PDS.

Policy Commencement Date means the later of the date the first loan monies are advanced or the date we accepted your application for insurance.

PDS means this Product Disclosure Statement and the Application/Certificate of Insurance.

Stroke means a cerebrovascular accident or event producing objective neurological sequelae, subject to any exclusions set out on pages 5 to 6 of this PDS. There must be clear evidence:

- on a CT, MRI or similar scan that a stroke has occurred; and
- of infarction of brain tissue, intracranial or subarachnoid haemorrhage or embolisation from an extracranial source.

It excludes:

- transient ischaemic attacks and ischaemic neurological sequelae lasting less than twenty four hours;
- cerebral symptoms due to reversible ischaemic neurological sequelae, migraine, hypoxia or trauma; and
- vascular disease affecting the eye, optic nerve or vestibular functions.

Suncorp, insurer means Suncorp Life & Superannuation Ltd, ABN 87 073 979 530 AFSL No. 229880.

Suncorp Group means Suncorp Group Ltd ABN 66 145 290 124 and its related body corporates, including Suncorp.

Traumatic Event means cancer, coronary artery bypass grafting, heart attack or stroke that occurs during the period of insurance.

You or Your means the insured person(s) named in the Application/Certificate of Insurance.

Contact Details



Enquiries

If you have enquiries with regard to the administration of the policy, please contact the administrator:

MTA Insurance Limited
PO Box 4824
Eight Mile Plains QLD 4113

Phone: 1800 634 294

The registered office for MTA Insurance Limited is:

Building 23
Garden City Office Park
2404 Logan Road
Eight Mile Plains QLD 4113



Registered Office

The registered office for Suncorp Life & Superannuation Limited is:

Level 18
Suncorp Centre
36 Wickham Terrace
Brisbane QLD 4000