

# Family Life Protection

Product Disclosure Statement



This Product Disclosure Statement contains important information about Family Life Protection. Issued by NobleOak Life Limited ABN 85 087 648 708 AFS Licence No. 247302.

Issued on 5 November 2012



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# About NobleOak

NobleOak Life Limited ABN 85 087 648 708 is the Insurer (Australian Financial Services Licence Number 247302) and also referred to as “NobleOak” in this document.

NobleOak has been delivering insurance and investment solutions to Australians, as a friendly society, for over 130 years. We pride ourselves on providing simple, competitive insurance products, supported by a prompt and personalised claims service.

NobleOak Life Limited Risk Fund No.1 provides the benefits of your insurance cover for Family Life Protection (the Plan) in accordance with the approved rules of that Fund, and as detailed in this PDS through a wholesale master insurance policy issued to the Trustee. Noblelink Financial Services Limited ABN 66 112981718 (Australian Financial Services Licence Number 286798) holds the wholesale master insurance policy issued by NobleOak, as Trustee.

NobleOak Life Limited reinsures with Hannover Re of Australasia, a subsidiary of the Hannover Re Group worldwide. Hannover Re Group is one of the largest life reinsurers in the world. The life insurance business of Hannover has been operating in the Australian market since 1958 and, as at 31 December 2011, had total in force premium in excess of \$600 million. Hannover's financial strength is visible in Standard & Poor's rating of "AA- (very strong)".

Members who are accepted for the Family Life Protection are covered under the master policy. Following acceptance, members will be provided with a Welcome Letter detailing acceptance terms including special terms. The person whose life is insured under the master policy is known as the Life Insured. Members do not hold an individual contract of insurance with the Insurer and may request to view a copy of the Trust Deed and the master insurance policy held by the Trustee at any time.

This Product Disclosure Statement (PDS) contains important information you should know about the Family Life Protection including the benefits, risks, limitations, costs and exclusions. The information provided in this document is of a general nature and does not take into consideration your objectives, financial situation or needs. You should consider the information having regard to your objectives, financial situation and needs. You should read this PDS and consider whether this product is right for you.



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# What you need to know about your plan



## Why might I need family life protection?

When you own something that's valuable, you insure it to protect it from damage or loss. Most people don't hesitate to insure their car, and their home and contents for that very reason.

As valuable as these assets are, nothing comes close to your most important asset - YOU.

Family Life Protection recognises how important you are to your family's financial security. It's there so that if you can no longer provide for your family, they have an alternative source of financial support to help them maintain their lifestyle.

This form of protection is valuable and particularly important at certain stages in life where you take on additional financial responsibilities.

For example, it's a good time to consider taking out Family Life Protection if you have:

- Been married or started a family
- Taken on a mortgage or other debts
- Started your own business

Family Life Protection is a flexible Plan that can be adapted to suit your needs at each stage of your life helping you ensure you have the right level of cover for your needs at any given time.

## How does the plan work?

Family Life Protection provides members with a simple and competitively priced life insurance plan that offers two types of cover:



### Life cover

Your dependants will receive the insured amount if you die. This money can be used to pay for your funeral, eliminate personal and business debts, and provide a future source of income for your family.

### Total and Permanent Disablement (TPD) cover

Add TPD Cover to your plan for an additional premium, and you will receive the insured amount if you become totally and permanently disabled (see page 7) as a result of injury or illness. You can use this money to eliminate personal and business debts, modify your home, and help you pay ongoing care and medical costs.

The amount of money you receive will depend on the amount of cover you apply for.



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## How much cover can I apply for?

You can select the level of cover to meet your needs up to a maximum of \$1,000,000 for Life cover and \$1,000,000 for TPD. Your level of TPD cover cannot exceed your Life cover.

When you're determining how much cover you need, you should consider your financial goals, your personal and business commitments and responsibilities. For example:

- Do you want to eliminate your personal and business debts?
- Do you want to provide for your partner and their future needs?
- Do you want to provide for your dependants and their future needs?

## How are my premiums calculated?

Your premium to join the Plan is based on several factors - including the level of cover you apply for, your gender, age, smoking status, health, pursuits and occupation. The premium includes the annual policy fee.

Generally, the cost of insurance is higher as you get older, and higher for greater amounts of cover. The Insurer may also apply a premium loading (usually a percentage on top of the standard premium rate) if your current state of health, family history, occupation and/or pastimes increase the risk associated with your Plan.

Total and Permanent Disablement (TPD) cover may be added to Life cover as an optional benefit for an additional premium.

For a personalised quote for your membership in the Plan, please call us on 1300 551 044

## How do I pay my premium?

Your premium will be payable by you on a monthly or annual basis. If you do not pay the premiums, your insurance will lapse 60 days after the due date. To ensure your insurance remains in place, you must pay the total premium due at the premium due date.

Your premium may be paid monthly or annually by direct debit, credit card or BPAY. Annual premiums will receive a 6% discount.

## What else do I need to know about my premium?

- No minimum premium will apply to members of the Plan.
- Premiums are based on the amount of insurance cover. The insurance will not have a surrender or cash value at any time.
- Future premium rates are not guaranteed to remain the same as current rates. The Insurer reserves the right to change the premium rates for all Plans in a particular category.

- After age 60, the TPD insured amount is reduced each year by 20% until age 65 or until you claim a benefit. The reduced level of cover will be reflected in your premium.
- Insurance premiums may attract State stamp duty with any charge being included in your premium and the Insurer will be responsible for these payments.

## Are there additional fees and charges?

All the fees and charges for the products are included in the premium and there are no additional fees and charges payable by you. The premium includes an annual policy fee of \$72. The policy fee may be changed. Members will be advised of any changes to the policy fee.

## How are benefits paid?

By joining the Plan, you become entitled to access these benefits from the Insurer in the event of a claim.

However, you should note that Family Life Protection is a 'wholesale policy' issued by NobleOak Life Limited (the Insurer), and held by Noblelink (the Trustee). This means you would not hold an individual contract of insurance with either the Insurer or Trustee. Instead, you become a member of the group to which the wholesale policy applies.

When you make a claim, the Trustee (as the policy owner) directs the Insurer to pay any benefit payable to you or your nominated beneficiaries.

## What if I change my mind?

After you take out insurance cover and receive a copy of the Welcome letter you have a 21-day cooling off period to ensure that the Plan suits your needs.

Within this period, you may cancel your insurance cover under the Plan and your premium will be refunded in full. To do this you must put your request in writing to the Insurer.

### Where can I get more information?

If you have any question about the Family Life Protection, please contact NobleOak:

Phone: 1300 551 044

Email: [enquiries@noblegroup.com.au](mailto:enquiries@noblegroup.com.au)

Website: [www.nobleoak.com.au](http://www.nobleoak.com.au)



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# Family Life Protection key product features

## Eligibility

Minimum age at entry:	21
Maximum age at entry:	64
Termination age:	70
Maximum sum insured:	\$1,000,000

## Benefits

Once your application is successful, you or your beneficiaries will be entitled to the following benefits:

### Death Benefit

If you die while insured, the Insurer will pay the agreed insured amount (see 'Level of Cover') as a lump sum to your nominated beneficiaries, subject to acceptance of the claim.

If you have not made a nomination, the Insurer will pay the agreed insured amount to your estate.

### Terminal Illness Benefit

If you become terminally ill, the Insurer will pay the death benefit sum insured that applied when you first stopped work due to the terminal illness, subject to acceptance of the claim. Your death benefit sum insured will be reduced by the amount of any terminal illness benefit paid.

To be eligible for this payment:

- You must be diagnosed by an Australian registered medical practitioner as being terminally ill;
- The illness must prevent you from working in a job to which you are reasonably suited by education, training or experience; and
- After consideration of medical and other evidence satisfactory to the Insurer, it is of the opinion that you are not expected to live more than 12 months.

The Australian registered medical practitioner cannot be you or a member of your family, your business partner, your employee or your employer.

## Total and Permanent Disablement Benefit

In addition to Life cover, you may apply for Total and Permanent Disablement (TPD) cover for an additional premium.

Minimum Age at Entry:	21
Maximum Age at Entry:	59
Termination Age:	65
Maximum Sum Insured:	\$1,000,000

If you obtain TPD insurance and you become totally and permanently disabled, the Insurer will pay you the agreed insured amount as a lump sum (see 'Level of Cover'), subject to acceptance of the claim

**Your death benefit sum insured will be reduced by the amount of any TPD benefit paid.**

A person is considered to be totally and permanently disabled when he or she has met any of the following three definitions:

a) Suffered the total and irrevocable loss of the:

- Sight of both eyes; or
- Use of two limbs; or
- Sight of one eye and use of one limb.



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b) Where the member is gainfully employed and working a minimum of 25 hours per week at the time of injury or illness, then as a result of that injury or illness:

- Has not performed any work for an uninterrupted period of at least 6 consecutive months solely due to the same injury or illness; and
- Is attending a registered medical practitioner and has undergone all reasonable and usual treatment including rehabilitation for the injury or illness; and
- After consideration of all the medical evidence and such evidence as the Insurer may require, has become incapacitated to such an extent as to render him or her unlikely to ever be able to engage in his or her occupation and any other occupation for which he or she is reasonably suited by education, training or experience; or

c) Where the member is engaged in 'domestic duties' or is gainfully employed and working less than 25 hours per week or is unemployed at the time of injury or illness, then as a result of that injury or illness is totally and irreversibly unable to perform at least four of the five 'Activities of Daily Living' (see below).

'Domestic duties' means the member is engaged in full-time unpaid domestic duties in their own residence.

'Activities of Daily Living' are:

- Bathing - The ability to wash yourself either in the bath or shower or by sponge bath without the standby assistance of another person. You will be considered to be able to bathe yourself even if the above tasks can only be performed by using equipment or adaptive devices.
- Dressing - The ability to put on and take off all garments and medically necessary braces or artificial limbs usually worn, and to fasten and unfasten them, without the standby assistance of another person. You will be considered able to dress yourself even if the above tasks can be performed only by using modified clothing or adaptive devices such as tape fasteners or zipper pulls.
- Eating - The ability to get nourishment into the body by any means once it has been prepared and made available to you without the standby assistance of another person.
- Toileting - The ability to get to and from and on and off the toilet, to maintain a reasonable level of personal hygiene and to care for clothing without the standby assistance of another person. You will be considered able to toilet yourself even if you have had an ostomy and are able to empty it yourself, or if you use a commode, bedpan or urinal and are able to empty and clean it without the standby assistance of another person.
- Transferring - The ability to move in and out of a chair or bed without the standby assistance of another person. You will be considered able to transfer yourself even if equipment such as canes, quad canes, walkers, crutches or grab bars or other support devices including mechanical or motorised devices are used.

## Guaranteed renewability

The Insurer guarantees to renew your insurance cover each year provided no event of termination has occurred. Your insurance cover will not be cancelled, nor will the premiums be increased, due to any change in your state of health, occupation or pastimes.

## Indexation of benefits

Your sum insured will be automatically increased each annual renewal date until the annual renewal before your 60th birthday by a figure based on the previous year's increase in the Consumer Price Index with a minimum increase of 3% and a maximum of 5%.

You may refuse each year's increase in sum insured and we will continue to automatically increase the sum insured in future years. However, once you have refused three consecutive increases no further increase will be made.

Indexation is only available until you reach the maximum cover of \$1,000,000 and will not apply once a claim has been admitted or paid.

## Worldwide cover

Once issued, insurance cover is provided for worldwide residence and travel 24 hours a day, subject to any terms and conditions that the Insurer may apply at the time of acceptance.

Note that this PDS does not constitute an offer, invitation or recommendation by the Insurer or any other person to apply for insurance in any other jurisdiction.



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# Other important information



## When will my cover commence?

When you apply to be a member of the Plan, your insurance will commence from the date you are accepted by the Insurer.

You will be notified in writing of your acceptance into the Plan. In some cases, the Insurer will request further information before accepting your application.

## What information will I receive?

When your insurance cover under the Plan begins, you will be issued with a Welcome Letter outlining the full details of your insurance.

You will also receive an annual renewal notice from the Insurer confirming your insurance details, including your insured benefits and premium payable.

## When will my cover cease?

The insurance of a member will terminate on the earlier of:

- The death of the member;
- The date the member reaches age 65 (for TPD cover);
- The date the member reaches age 70 (for Life cover);
- The date a member ceases to be a member of the Plan;
- 60 days after the premium has fallen due and remains unpaid;
- The date the Plan is terminated ;
- Upon payment of the full sum insured in respect of the member.

You can also advise the Insurer if your cover is no longer required.

## How do I make a claim?

In the event of a claim, please notify the Insurer's Client Service Team on **1300 551 044** or writing in to GPO Box 4793 SYDNEY NSW 2001 as soon as possible.

We will send you a claim form, explaining in detail our requirements and the next steps required.

For example, we will require a certified Death Certificate (for Life cover claims), or medical evidence (for TPD cover

claims), together with the completed Claim Form. This will enable us to assess the claim as quickly as possible and, if approved, pay the benefit. All claims will be paid in Australian dollars.

## When will a benefit not be payable?

For **Life cover**, the insurance benefit will not be payable if death is a result of suicide occurring within 13 months following the commencement, reinstatement or increase of your insurance plan.

For **TPD cover**, a benefit will not be payable where it is caused by:

- Any intentional self-injury or suicide (whether felonious or not) attempts while sane or insane within 13 months from commencement, reinstatement or increase of your insurance cover; or
- The abuse of alcohol, illegal drugs or controlled substances (except when legally prescribed by a medical practitioner and taken or used as prescribed); or
- The member engaging in or taking part in service in the armed forces of any country other than service in the Citizen Forces within the Commonwealth of Australia.

## What are the risks in taking out insurance?

You should consider any risks that might apply before making an application under this PDS. Some of the risks may include:

- The insurance you take out may not meet your needs;
- The level of cover, or the terms that apply, may not be sufficient to give you the protection you require or desire;
- You may not be able to increase cover to the desired level because of health or other issues.



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## What are the tax considerations?

Your Life and TPD insurance premiums are not generally an allowable deduction from your assessable income.

Any benefit you receive from this insurance will in most instances, be tax free. As this may change in some circumstances, we recommend that you seek professional taxation advice as you may have to pay tax on the benefit.

The above tax information is a general statement only. It is based on the continuation of present taxation laws and their interpretation.

## Your duties and obligations

### Your duty of disclosure

When you enter a contract of insurance, the Insurance Contracts Act 1984 requires you to disclose 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 and terms to insure you. These matters must be disclosed before you enter, renew, vary, reinstate or extend an insurance contract.

However, this duty does not require you to disclose information:

- That reduces the risk to the Insurer; or
- That is of common knowledge; or
- That the Insurer knows or ought to know in the ordinary course of its business; or
- Where the Insurer waives your duty.

### Non-disclosure

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 void the contract within three years of entering into it. If your nondisclosure is fraudulent, the Insurer may void the contract from its inception at any time.

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

## Privacy

The Insurer recognises the importance of protecting personal information and is bound by the relevant legislation.

The Insurer collects personal information for the purposes of:

- Managing how we provide you with any product or service;
- Assessing and processing your application and any claims made;
- Identifying you and protecting against fraud; and
- Letting you know about other products or services that the Trustee and Insurer may offer.

The type of personal information the Insurer may collect includes your name, date of birth, address, banking details, preferred beneficiaries, health and employment information. If you do not provide the required information we may not be able to assess your application.

To help us keep your details up-to-date, please advise us of any information that appears inaccurate, especially your contact details. Email us at [enquiry@noblegroup.com.au](mailto:enquiry@noblegroup.com.au) or write to GPO Box 4793, SYDNEY NSW 2001 to access information we hold about you.

The personal information we collect from or about you may be provided to the following parties:

- To your own doctor or any other doctor, hospital or clinic with whom you have provided a medical authority for the purpose of obtaining details about your medical history;
- To the Insurer for the purpose of assessing your application. The Insurer may disclose this information to the Reinsurer and medical practitioners or other professionals it appoints to help it consider your claim;
- Any person the Trustee and or Insurer considers needs the information in order to process your application, assess any claim or resolve complaints;
- The Trustee and / or Insurer wishing to inform you about their products and services;
- As required or authorised by law or where you have given consent.

Subject to some exceptions allowed by law, you can gain access to your personal information.

To obtain a copy of the Trustee's or the Insurer's Privacy Policies, please call our Client Service Line on 1300551044, email us at: [enquiry@noblegroup.com.au](mailto:enquiry@noblegroup.com.au) or write to GPO Box 4793, SYDNEY NSW 2001 .

## Complaints resolution

The Insurer has established procedures to deal with member enquiries and complaints.

Enquiries should be made to the Client Service Line on **1300 551 044**.

Complaints should be made in writing to:

Dispute Resolution Officer  
GPO Box 4793  
SYDNEY NSW 2001



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## Financial Ombudsman Service

If we can't deal with your complaint to your satisfaction, you may have the right to refer the matter to the Financial Ombudsman Service (FOS).

FOS is an external and independent body whose role is to help financial industry clients resolve complaints they have been unable to resolve with the financial institution they are dealing with.

FOS can be contacted at:

Financial Ombudsman Service  
GPO Box 3  
MELBOURNE VIC 3001

Toll Free Number: 1300 780 808

Fax: (03) 9613 6399

Email: [info@fos.org.au](mailto:info@fos.org.au)

You should note that time limits may affect your ability to make a complaint to FOS. Generally a time limit of six years applies.



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# Family Life Protection Application

Issued: 5 November 2012

Before you sign this Application Form, you should read the Family Life Protection Product Disclosure Statement (PDS) containing a summary of the important information about the Family Life Protection product. This information will help you to understand the product(s) and decide whether the product(s) are appropriate for your needs.

## Your 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, is relevant to the insurer's decision whether to accept the risk of the insurance and, if so, on what terms. You have the same duty to disclose those matters to the insurer before you extend, vary or reinstate a contract of life insurance. Your duty, however, does not require disclosure of a matter:

- that diminishes the risk to be undertaken by the insurer
- that is of common knowledge

- that your insurer knows or, in the ordinary course of his/her business, ought to know
- as to which compliance with your duty is waived by the insurer.

## Non-disclosure

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.

Your duty of disclosure continues until your application for insurance cover has been accepted and your Welcome Letter issued by NobleOak.

### Part 1. Plan details

Do you currently hold a Family Life Protection Plan?

Yes    No

If yes, what is your policy number No:

### Part 2. Life Insured Details

Title: Mr Mrs Miss Ms Other

Gender: Male Female

Given name/s:

Surname:

Date of Birth:

Occupation:



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### Part 3. Life Insured's Address and Contact Details

Residential address	Postal address (if different from residential)
Suburb:	Suburb:
Postcode:	Postcode:
Email Address:	Mobile:
Phone (home):	Phone (work):

### Part 4. Additional details

Life Cover Sum Insured: \$	Total & Permanent Disablement Cover Sum Insured: \$
Height (cm):	Weight (kg):
Have you smoked tobacco or any other substance in the last 12 months?	

### Part 5. Nominated Beneficiaries

As a client of Family Life Protection you may nominate a dependant/s to receive your benefits on death. You may change your nomination/s at any time by notifying us in writing.

Title	Surname	First name	Relationship	% of Benefit
1				
2				
3				
4				
				100%



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## Part 6. Short Form Underwriting Statement

At the date of application:

Have you used any drugs (not prescribed by a medical doctor) in the last 12 months or do you consume more than 25 units of alcohol per week? Yes No

Have you ever had any disease or disorders of the heart, kidney, bladder, lungs, liver, stomach or bowel, or have you ever had high blood pressure, cancer, stroke, diabetes, epilepsy, any unintentional weight loss or any mental or nervous condition? Yes No

Do you have any other medical condition requiring ongoing treatment or medication or do you contemplate seeking any medical examination, advice or treatment, including surgery, in the near future for anything not already disclosed? Yes No

Do you have HIV or AIDS (or have you engaged in any activities which would reasonably be expected to increase your risk to contracting the AIDS virus)? Yes No

Has any member of your immediate family (mother, father, sister or brother) suffered from Huntington's disease, polycystic kidney disease, or muscular dystrophy, or have two or more of your immediate family suffered from, prior to age 60: cancer, heart attack, heart disease, kidney disease or stroke? Yes No

If also applying for TPD cover please complete the following:

Are you working less than 25 hours per week or unable to perform all the duties of your current occupation? Yes No

Have you ever required treatment or had symptoms for longer than 5 days for any of the following; muscular-skeletal disorders; back pain, neck pain, arthritis, joint pain? Yes No

Please complete the Declaration below. Note that if you have answered 'Yes' to any of the questions in Part 4, 5 or 6 you will also need to complete a Personal Underwriting Statement.

## Part 7. Declaration, Agreement and Consent

### Privacy Policy

A copy of the NobleOak Privacy Policy can be obtained by email to enquiry@noblegroup.com.au. By completing this form, you consent to any personal information, including information that may be of a sensitive nature we collect about you in the normal course of our business, being used as in the manner set out in the NobleOak Privacy Policy. This PDS also includes a Privacy Statement.

### General Declarations

- I have received the Family Life Protection Product Disclosure Statement (PDS) and acknowledge the Privacy Statement in the PDS. I consent to the collection, use and disclosure of my information (including sensitive information).
- I have read and understood the Duty of Disclosure in this Application Form. I declare that the statements made in this application for insurance are true and complete. I understand that if I have not fully disclosed all known information relevant to this insurance application prior to the issue of the Welcome Letter then NobleOak may elect

not to pay a claim or reduce the payment of a claim or cancel cover.

- I understand that insurance cover applied for in this application will not become effective until my application has been accepted by NobleOak, the premium has been paid and the Welcome Letter issued.
- I declare that the statements made in this application for insurance including this Application Form and any other questionnaires are true and complete.

.....  
Signature of Life Insured

.....  
Date



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# Direct Debit Request

## Direct Debit Request

Request and authority to debit the account named below to pay Noblelink Financial Services Limited

### 1. Request and authority to debit

Surname or company name:

---

Given names or ACN/ABN/ARBN:

---

("you") request and authorise Noblelink Financial Services Limited [User ID Number 246884] to arrange through its own financial institution, for any amount Noblelink Financial Services Limited may debit or charge you to be debited through the Bulk Electronic Clearing System from an account held at the financial institution identified below and paid to the Debit User, subject to the terms and conditions of the Direct Debit Request Service Agreement (and further instructions provided below).

### 2. Insert the name and address of financial institution at which account is held

Financial Institution Name:

---

Address:

---

Suburb:

State:

Postcode:

---

### 3. Insert details of account to be debited

Name Of Account:

---

BSB number:

Account number:

---

### 4. Acknowledgement

By signing this Direct Debit Request you acknowledge having read and understood the terms and conditions governing the debit arrangements between you and Noblelink Financial Services Limited as set out in this Request and in your Direct Debit Request Service Agreement.

---

### 5. Payment details

Frequency of payment: Monthly \_\_\_\_ Annually \_\_\_\_

---

### 6. Insert your signature and address

Signature:

---

(If signing for a company, sign and print full name and capacity for signing e.g. director)

---

Address:

---

Suburb:

State:

Postcode:

---

Date:     /     /



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# Direct Debit Request Service Agreement

## Definitions

**Account** means the account held at your financial institution from which we are authorised to arrange for funds to be debited.

**Agreement** means this Direct Debit Request Service Agreement between you and us.

**Banking Day** means a day other than a Saturday or a Sunday or a public holiday listed throughout Australia.

**Debit Day** means the day that payment by you to us is due.

**Debit payment** means a particular transaction where a debit is made.

**Direct Debit** request means the Direct Debit Request between us and you.

**Us or we** means Noblelink Financial Services Limited (the Debit User) you have authorised by signing a direct debit request.

**You** means the customer who signed the direct debit request.

**Your financial institution** is the financial institution where you hold the account that you have authorised us to arrange to debit.

## 1. Debiting your account

1.1 By signing a direct debit request, you have authorised us to arrange for funds to be debited from your account. You should refer to the direct debit request and this agreement for the terms of the arrangement between us and you.

1.2 We will only arrange for funds to be debited from your account as authorised in the direct debit request.

1.3 If the debit day falls on a day that is not a banking day, we may direct your financial institution to debit your account on the following banking day. If you are unsure about which day your account has or will be debited you should ask your financial institution.

## 2. Changes by us

2.1 We may vary any details of this agreement or a direct debit request at any time by giving you at least fourteen (14) days' written notice.

## 3. Changes by you

3.1 Subject to 3.2 and 3.3, you may change the arrangements under a direct debit request by contacting us on the Client Service Line on 1300 551 044.

3.2 If you wish to stop or defer a debit payment, you must notify us in

writing at least seven (7) days before the next debit day. This notice should be given to us in the first instance.

3.3 You may also cancel your authority for us to debit your account at any time by giving us seven (7) days' notice in writing before the next debit day. This notice should be given to us in the first instance.

## 4. Your obligations

4.1 It is your responsibility to ensure that there are sufficient clear funds available in your account to allow a debit payment to be made in accordance with the direct debit request.

4.2 If there are insufficient clear funds in your account to meet a debit payment:

(a) you may be charged a fee and/or interest by your financial institution;

(b) you may also incur fees or charges imposed or incurred by us; and

(c) you must arrange for the debit payment to be made by another method

or arrange for sufficient funds to be in your account by an agreed time so that we can process the debit payment.

4.3 You should check your account statement to verify that the amounts debited from your account are correct.

4.4 If Noblelink Financial Services Limited is liable to pay goods and services tax (GST) on a supply made in connection with this agreement, then you agree to pay Noblelink Financial Services Limited on demand an amount equal to the consideration payable for the supply multiplied by the prevailing GST rate.

## 5. Dispute

5.1 If you believe that there has been an error in debiting your account, you should notify us directly on the Client Service Line on 1300 551 044 and confirm that notice in writing with us as soon as possible so that we can resolve your query more quickly.

5.2 If we conclude as a result of our investigations that your account has been incorrectly debited we will respond to your query by arranging for your financial institution to adjust your account (including interest and charges) accordingly. We will also notify you in writing of the amount by which your account has been adjusted.

5.3 If we conclude as a result of our investigations that your account has not been incorrectly debited we will respond to your query by providing you with reasons and any evidence for this finding.

5.4 Any queries you may have about an error made in debiting your account should be directed to us in the first instance so that we can attempt to resolve the matter between us and you. If we cannot resolve the matter you can still refer it to your financial institution which will obtain details from you of the disputed transaction and may lodge a claim on your behalf.

## 6. Accounts

You should check:

(a) with your financial institution whether direct debiting is available from your account as direct debiting is not available on all accounts offered by

financial institutions;

(b) your account details which you have provided to us are correct by checking them against a recent account statement; and

(c) with your financial institution before completing the direct debit request if you have any queries about how to complete the direct debit request.

## 7. Confidentiality

7.1 We will keep any information (including your account details) in your direct debit request confidential. We will make reasonable efforts to keep any such information that we have about you secure and to ensure that any of our employees or agents who have access to information about you do not make any unauthorised use, modification, reproduction or disclosure of that information.

7.2 We will only disclose information that we have about you:

(a) to the extent specifically required by law; or

(b) for the purposes of this agreement (including disclosing information in connection with any query or claim).

## 8. Notice

8.1 If you wish to notify us in writing about anything relating to this agreement, you should write to Noblelink Financial Services Limited, GPO Box 4793, SYDNEY NSW 2001.

8.2 We will notify you by sending a notice in the ordinary post to the address you have given us in the direct debit request.

8.3 Any notice will be deemed to have been received on the third banking day after posting.



**NOBLEOAK**

*with you for life*



## Product Disclosure Statement

This Product Disclosure Statement Contains important information about Family Life Protection.

### Issued by the Insurer

NobleOak Life Limited ABN 85 087 648 708  
Australian Financial Services Licence Number 247302

Level 1, 50 York Street, Sydney NSW 2000  
GPO Box 4793, Sydney NSW 2001

### Trustee:

Noblelink Financial Services Limited ABN 66 112981718  
(Australian Financial Services Licence Number 286798)

Level 1, 50 York Street, Sydney NSW 2000  
GPO Box 4793, Sydney NSW 2001

### Where can I get more information?

If you have any question about the Family Life Protection, please contact NobleOak:

Phone: 1300 551 044

Email: [enquiries@noblegroup.com.au](mailto:enquiries@noblegroup.com.au)

Website: [www.nobleoak.com.au](http://www.nobleoak.com.au)



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