

BILL PROTECTOR

AMERICAN EXPRESS® BILL PROTECTOR
POLICY WORDING AND PRODUCT
DISCLOSURE STATEMENT (PDS)



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General advice

This document contains important information required under the Corporations Act 2001 (Cth) (the Act) and has been prepared to assist You in understanding American Express Bill Protector insurance and making an informed choice about Your insurance requirements. It is up to You to choose the cover You need. It is important that You carefully read and understand this document before making a decision.

The information in this Product Disclosure Statement (PDS) does not take into account Your individual objectives, financial situation or needs. It's up to You to decide if this product is right for You.

1 What Is American Express Bill Protector?

This section contains some helpful information about Your Policy. It does not form part of Your Policy and it cannot be relied on as a full description of the cover provided. Please refer to Part B - Policy Terms and Conditions further on in this booklet for full terms, conditions and exclusions.

What is American Express Bill Protector?

American Express Bill Protector has been designed to help cover the cost of Your monthly bills if You become Involuntarily Unemployed or if You can't work because of Sickness or Accidental Injury. These benefits are designed to help You pay Your bills while You concentrate on recuperating and returning to employment. The Policy allows You to select an amount from \$500 up to \$2,500 of cover per month to suit Your needs.

The benefit is paid monthly and will continue to be paid as follows for:

- + up to 3 months in the Event that You become Involuntarily Unemployed; and
- + up to 6 months if You can't work because of Sickness or Accidental Injury.

For full terms and conditions You should read Part B - Policy Terms and Conditions.

Who can be covered under American Express Bill Protector?

- +Australian residents from eighteen (18) years of age up to and including sixty (60) years of age.
- +Your Policy may be renewed up to and including sixty-four (64) years of age.

How much does American Express Bill Protector cost?

The cost for this product depends on the level of cover You choose and whether You want to cover just You or Your Spouse/ Partner as well. Your Policy Schedule shows the actual cost of Your Policy.

Indicative monthly premiums are as follows:

Benefit	Level 1	Level 2	Level 3	Level 4	Level 5
Monthly Premium					
You Only	\$13.95	\$24.95	\$35.95	\$46.95	\$57.95
Spouse/Partner Only	\$13.95	\$24.95	\$35.95	\$46.95	\$57.95
You and Your Spouse/Partner	\$26.90	\$48.90	\$70.90	\$92.90	\$114.90
INDEXATION OPTION You may choose at any time to add the Indexation Option to Your cover. Indexation Option means Your cover and Your premium will automatically increase annually by 5% based on Your original nominated benefit level. Your increase in cover and premium will occur on the anniversary of Your Policy Commencement Date. Indexation Option is limited to a maximum benefit amount of \$10,000.					

Summary of benefits

The following Summary of Benefits Table summarises the benefits offered by American Express Bill Protector and can be used as a quick reference tool. The benefit limits vary according to the level of cover selected.

Benefit Table	Level 1	Level 2	Level 3	Level 4	Level 5
Accidental Injury Benefit Provides payments, for up to six (6) months if an Accidental Injury prevents You from engaging in Your Permanent Employment.	\$500 monthly	\$1,000 monthly	\$1,500 monthly	\$2,000 monthly	\$2,500 monthly
Sickness Benefit Provides payments, for up to six (6) months, if Sickness prevents You from engaging in Your Permanent Employment.	\$500 monthly	\$1,000 monthly	\$1,500 monthly	\$2,000 monthly	\$2,500 monthly
Involuntary Unemployment Benefit Provides payments, for up to three (3) months, as a result of Your Involuntary Unemployment.	\$500 monthly	\$1,000 monthly	\$1,500 monthly	\$2,000 monthly	\$2,500 monthly
Life Events Benefit	\$500				

2 About Chubb Insurance Australia Limited (Chubb)

Chubb Insurance Australia Limited (ABN 23 001 642 020, AFS Licence No. 239687) (Chubb) is the insurer of this product. In this PDS, “We”, “Us”, “Our” means Chubb Insurance Australia Limited.

Our contact details are:

Head Office: Grosvenor Place, Level 38, 225 George Street, SYDNEY NSW 2000
Postal Address: GPO BOX 4907
SYDNEY NSW 2001
Telephone: 1800 810 624
Facsimile: (02) 9335 3411
E-mail: CustomerService.AUNZ@chubb.com

Chubb is the world’s largest publicly traded property and casualty insurance company. With operations in 54 countries, Chubb provides commercial and personal property and casualty insurance, personal accident and supplemental health insurance, reinsurance and life insurance to a diverse group of clients. As an underwriting company, We assess, assume and manage risk with insight and discipline. We service and pay Our claims fairly and promptly. The company is also defined by its extensive product and service offerings, broad distribution capabilities, exceptional financial strength and local operations globally. Parent company Chubb Limited is listed on the New York Stock Exchange (NYSE: CB) and is a component of the S&P 500 index. Chubb maintains executive offices in Zurich, New York, London and other locations, and employs approximately 31,000 people worldwide.

Chubb, via acquisitions by its predecessor companies, has been present in Australia for over 50 years. Its operation in Australia (Chubb Insurance Australia Limited) provides specialised and customised coverages, including Marine, Property, Liability, Energy, Professional Indemnity, Directors & Officers, Financial Lines, Utilities, as well as Accident & Health insurance, to a broad client base. Chubb is a major insurer of many of the country’s largest companies. With five branches and over 500 staff in Australia, it has a wealth of local expertise backed by its global reach and breadth of resources.

More information can be found at www.chubb.com/au

The promoter of this product is **American Express Australia Limited** (ABN 92 108 952 085, AFS Licence No. 291313) (American Express). American Express receives a commission from Chubb for referring You to Us. In referring You to Us, American Express acts on Our behalf and not on Your behalf.

General Insurance Code of Practice

We are a signatory to the General Insurance Code of Practice (the Code). The objectives of the Code are to further raise standards of service and promote consumer confidence in the general insurance industry. Further information about the Code and Your rights under it is available at www.codeofpractice.com.au and on request.

3 Important Information About This Policy Wording And PDS

Other documents may form part of Our Policy Wording and PDS and if they do, We will tell You in the relevant document.

Please check these documents to make sure all the information in them is correct. Please let Us know straight away if any alterations are needed or if You change Your address or payment details. For certain types of cover under the Policy, We will require You to provide receipts and other documentary evidence to Us before We pay a claim. You should keep those documents in a safe place.

4 Cooling Off Period

You have fourteen (14) days from the date We confirmed, electronically or in writing, that You are covered under Your Policy to decide if the Policy meets Your needs. You may cancel Your Policy simply by calling Us on 1800 810 624 or advising Us in writing within those fourteen (14) days to cancel it. If You do this, We will refund any premiums You have paid during this period. These cooling off rights do not apply if You have made or You are entitled to make a claim during this period.

5 Duty Of Disclosure

Your duty of disclosure

Before You enter into this contract of insurance, You have a duty of disclosure under the Insurance Contracts Act 1984.

The duty applies until We first agree to insure You, and where relevant, until We agree to any subsequent variation, extension, reinstatement or renewal (as applicable).

Answering Our questions

In all cases, if We ask You questions that are relevant to Our decision to insure You and on what terms, You must tell Us anything that You know and that a reasonable person in the circumstances would include in answering the questions.

It is important that You understand You are answering Our questions in this way for Yourself and anyone else that You want to be covered by the contract.

Variations, extensions and reinstatements

For variations, extensions and reinstatements, You have a broader duty to tell Us anything that You know, or could reasonably be expected to know, may affect Our decision to insure You and on what terms.

Renewal

Where We offer renewal, We may, in addition to or instead of asking specific questions, give You a copy of anything You have previously told Us and ask You to tell Us if it has changed. If We do this, You must tell Us about any change or tell Us that there is no change.

If You do not tell Us about a change to something You have previously told Us, You will be taken to have told Us that there is no change.

What You do not need to tell Us

You do not need to tell Us something that:

- +reduces the risk We insure You for; or
- +is common knowledge; or
- +We know or should know as an insurer; or
- +We waive Your duty to tell Us about.

If You do not tell Us something

If You do not tell Us something You are required to tell Us, We may cancel Your contract or reduce the amount We will pay You if You make a claim, or both.

If Your failure to tell Us is fraudulent, We may refuse to pay a claim and treat the contract as if it never existed. You have this duty until We agree to insure You.

You have the same duty before You renew, extend, vary or reinstate an insurance contract.

6 Updating Our PDS

We may update the information contained in Our PDS when necessary. A paper copy of any updated information is available to You at no cost by calling Us on 1800 810 624.

We will issue You with a new PDS or a supplementary PDS where the update is to rectify a misleading or deceptive statement or when an omission is materially adverse from the point of view of a reasonable person deciding whether to buy this product.

7 Privacy Statement

Chubb Insurance Australia Limited (Chubb) is committed to protecting Your privacy. This document provides You with an overview of how We handle Your personal information. Our Privacy Policy can be accessed on Our website at www.chubb.com/au.

Personal information handling practices

Collection, use and disclosure

We collect Your personal information (which may include sensitive information) when You are applying for, changing or renewing an insurance policy with Us or when We are processing a claim in order to help Us properly administrate Your insurance proposal, Policy or claim.

Personal information may be obtained by Us directly from You or via a third party such as Your insurance intermediary or employer (e.g. in the case of a group insurance policy).

When information is provided to Us via a third party We use that information on the basis that You have consented or would reasonably expect Us to collect Your personal information in this way and We take reasonable steps to ensure that You have been made aware of how We handle Your personal information.

The primary purpose for Our collection and use of Your personal information is to enable Us to provide insurance services to You. Sometimes, We may use Your personal information for Our marketing campaigns, in relation to new products, services or information that may be of interest to You.

We may disclose the information We collect to third parties, including service providers engaged by Us to carry out certain business activities on Our behalf (such as assessors and call centres in Australia). In some circumstances, in order to provide Our services to You, We may need to transfer personal information to other entities within the Chubb Group of companies (such as the regional head offices of Chubb located in Singapore, UK or USA), or third parties with whom We or those other Chubb Group entities have sub-contracted to provide a specific service for Us, which may be located outside of Australia (such as in the Philippines or USA). Please note that no personal information is disclosed by Us to any overseas entity for marketing purposes.

In all instances where personal information may be disclosed overseas, in addition to any local data privacy laws, We have measures in place to ensure that those parties hold and use that information in accordance with the consent You have provided and in accordance with Our obligations to You under the Privacy Act 1988 (Cth).

Your choices

In dealing with Us, You agree to Us using and disclosing Your personal information as set out in this statement and Our Privacy Policy. This consent remains valid unless You alter or revoke it by giving written notice to Our Privacy Officer. However, should You choose to withdraw Your consent it is important for You to understand that this may mean We may not be able to provide You or Your organisation with insurance or to respond to any claim.

How to contact Us

If You would like a copy of Your personal information, or to correct or update it, please contact Our customer relations team on 1800 815 675 or email CustomerService.AUNZ@chubb.com.

If You have a complaint or would like more information about how We manage Your personal information, please review Our Privacy Policy for more details or contact the Privacy Officer, Chubb Insurance Australia Limited, GPO Box 4907, Sydney NSW 2001, Tel: +61 2 9335 3200 or email Privacy.AU@chubb.com.

In return for You paying Us a premium, as set out in Section 1, We insure You for the Events described in the Policy Wording and PDS, subject to the terms, conditions and exclusions of Your Policy. Please keep this document, Your Policy Schedule and any other documents that We tell You form part of Your Policy in a safe place in case You need to refer to them in the future.

8 Words With Special Meanings

Throughout this document, certain words begin with capital letters. These words have special meaning and are included in the Definitions, in Section 9 of this Policy Wording and PDS. Please refer to the Definitions for their meaning.

Any reference to an Act, legislation or legislative instrument in this document also refers to that Act, legislation or legislative instrument as amended and may be in force from time to time.

9 Definitions

Accidental Injury means a bodily injury resulting from an accident and which is not an illness and which:

- (a) is caused by violent, external and visible means; and
- (b) occurs as a result of an accident occurring during Your Period of Insurance; and
- (c) results within twelve (12) months of the Accident; and
- (d) includes Sickness directly resulting from medical or surgical treatment rendered necessary by the Accident; and
- (e) bodily injury caused by You being directly and unavoidably exposed to the elements as a result of an accident.

Commencement Date means the date We agree to provide insurance under the Policy as shown on Your Policy Schedule.

Dependent Child means Your unmarried dependent child (including step or legally adopted child) who is up to twenty one (21) years of age and primarily dependent upon You for maintenance and support.

Doctor means a legally registered medical practitioner who is not You or Your relative.

Event(s) means an occurrence that could give rise to a claim for a benefit under Your Policy. Any one occurrence or series of occurrences attributable to one source or originating cause is deemed to be one Event.

Income means Your weekly pre-tax and pre-personal deductions revenue averaged during the period of twelve (12) months immediately preceding the date of Your Accidental Injury, or over such shorter period as You have been employed in Your usual work in Australia.

Insured Person means any person who is named as a Main Insured or Spouse/Partner on the Policy Schedule and in respect of whom premium has been paid or agreed to be paid.

Involuntary Unemployed and/or **Involuntarily Unemployed** means:

Employees

1. For an employee, termination of Your Permanent Employment where You:
 - (a) have been retrenched or made redundant at the instigation of Your employer; and
 - (b) have registered as unemployed with CentreLink or an equivalent government authority or can provide other evidence of unemployment satisfactory to Us; and
 - (c) are actively seeking work.

Self Employed

2. For Self-Employed, termination of Your Permanent Employment where You;
 - (a) are Self-Employed or in a partnership and Your termination from Permanent Employment arises from the business ceasing to operate due to the business being placed in the control of an insolvency or bankruptcy administrator;
 - (b) have registered as unemployed with CentreLink or equivalent government authority or can provide other evidence of unemployment satisfactory to Us; and
 - (c) are actively seeking work.

Main Insured means the person named as a Main Insured on the Policy Schedule and who pays the premiums to Us in respect of an Insured Person.

Maximum Age means age sixty-four (64) years.

Period of Insurance means one (1) calendar year from the Commencement Date or the latest Renewal Date, whichever the later.

Permanent Employment means:

- (a) in the case of an employee Your permanent regular employment of no less than twenty (20) hours per week in continual, and gainful employment for salary or wages that does not include seasonal, intermittent or a specified period of contract work; or
- (b) Self-Employment that does not include seasonal, intermittent or a specified period of contract work.

Policy means Your Policy Wording and Product Disclosure Statement (PDS), Policy Schedule and any other document that We tell You forms part of Your Policy describing the insurance contract between You and Us.

Policy Schedule means the document We send You which contains details of the cover provided to You by Us.

Policy Wording means this document.

Pre-Existing Medical Condition means:

- (a) any condition for which a Doctor was consulted or for which treatment or medication was prescribed prior to the Commencement Date; or
- (b) a condition, the manifestation or symptoms of which a reasonable person in the circumstances would be expected to be aware of at the Commencement Date.

Where an Upgrade is the addition of a Spouse/Partner, all references in this definition to Commencement Date should be read as being Upgrade Effective Date in relation to the Spouse/Partner.

Product Disclosure Statement (PDS) means this document.

Renewal Date means one (1) year from the Commencement Date and subsequent anniversaries of that date.

Self-Employment and **Self-Employed** means earning an Income directly from Your own business, trade or profession rather than earning a salary or wage from an employer.

Sickness means any illness or disease first manifesting itself during the Period of Insurance shown on Your Policy Schedule, and which is diagnosed by a Doctor.

Spouse/Partner means the person named as Spouse/Partner on the Policy Schedule and who must be the Main Insured's husband or wife, de-facto or life partner (including a same sex partner) with whom the Main Insured has continuously cohabited for a period of three (3) months or more.

University means an accredited university that does not include any other institution of higher learning.

Upgrade means an increase in a level of benefit or the addition of another Insured Person, or both.

Upgrade Effective Date means the date We agree to provide an Upgrade of Your Policy and which is shown on Your Policy Schedule recording that Upgrade.

Waiting Period means the period of time for and in respect of which no benefits are payable.

We/Us/Our means the insurer Chubb Insurance Australia Limited (ABN 23 001 642 020, AFS Licence No. 239687).

You/Your means the person who is named as the Main Insured on the Policy Schedule and also includes those named as Spouse/Partner on the Policy Schedule in respect of whom premium has been paid or agreed to be paid.

10 Selecting Your Cover

Certain eligibility criteria apply. We tell You when You apply whether You meet this criteria e.g.

- +You must be at least eighteen (18) years old when You apply.
- +You must not be over sixty (60) years of age when You apply, with renewal to sixty-four (64) years of age.
- +You must be an Australian resident.

Who can be covered

Main Insured only or Spouse/ Partner only Cover	Cover for one (1) adult only.
Main Insured and Spouse/ Partner Cover	Cover for two (2) adults.

You also need to identify the level of cover that is appropriate to Your needs.

The cover

Premiums

We take a number of factors into account when calculating Your premium which could include the risk profile, the level of cover You have chosen and whether the Policy covers the Main Insured only, or the Main Insured and Spouse/Partner.

Your premium is paid in advance and includes any amounts payable that take into account Our obligation (actual or estimated) to pay any relevant compulsory government charges, taxes, levies (including stamp duty and GST) in relation to the Policy.

We will tell You, when You apply, what premium is payable, when it needs to be paid and how it can be paid.

If You will be paying Your premium by instalment payments and an instalment remains unpaid for at least fourteen (14) days, We may refuse to pay a claim arising after the instalment was due.

If an instalment remains unpaid for thirty-one (31) days, Your Policy will be automatically cancelled without written notice from Us to You unless We elect to cancel earlier by providing You with written notice.

Accidental Injury Benefit or Sickness Benefit

If You:

- have suffered an Accidental Injury or Sickness which entirely prevents You from engaging in Your Permanent Employment for more than thirty (30) consecutive days; and
- were in Permanent Employment immediately prior to that Accidental Injury or manifestation of the Sickness; and
- remain under the continuous care and follow the advice of a Doctor,

We will pay You the Accidental Injury Benefit or Sickness Benefit shown on Your Policy Schedule current at the time of the accident causing the Accidental Injury or manifestation of the Sickness and You are entirely prevented from engaging in Your Permanent Employment. We will start the payment of benefits after the Waiting Period ends.

Payments for the Accidental Injury Benefit or Sickness Benefit will cease when:

- You return to work; or
- We have made six (6) monthly benefit payments for the Accidental Injury Benefit or Sickness Benefit, in the aggregate in any one (1) Period of Insurance; whichever occurs first.

There is a thirty (30) day Waiting Period applicable to the Accidental Injury Benefit and Sickness Benefit commencing on the date You are unable to engage in Your Permanent Employment. If You have returned to Your Permanent Employment within three (3) months of the date of Your original Accidental Injury or manifestation of Your Sickness and, as a result of Your original Accidental Injury or Sickness, You are again prevented from engaging in Your Permanent Employment, this will be deemed one (1) Event and the thirty (30) day Waiting Period will not apply.

Involuntary Unemployment Benefit

In the Event You become Involuntarily Unemployed while this Policy is in force and You remain Involuntarily Unemployed for a period in excess of thirty (30) consecutive days, We will pay You the Involuntary Unemployment Benefit shown on Your Policy Schedule current at the time You became Involuntarily Unemployed. If You remain Involuntarily Unemployed during this time We will pay benefits for up to a maximum of three (3) months in respect of any one (1) Period of Insurance.

- (a) the Involuntary Unemployment Benefit will not be paid if:
- (b) Your termination was due to wilful misconduct or retirement; or
- (c) the Involuntary Unemployment is due to the seasonal nature of Your employment, a project or specific period of employment is completed; or
- (d) You voluntarily resign; or
- (e) You were Involuntarily Unemployed at or immediately prior to the Commencement Date of You taking this option or at any time during the first ninety (90) days after the Commencement Date; or
- (f) Your business is being closed or sold; or
- (g) circumstances of which You were reasonably aware would lead to bankruptcy and which existed prior to the Commencement Date of You taking out this Policy; or You return to work; or
- (h) payments have been made for three (3) months in any one (1) Period of Insurance.

If You Upgrade Your level of cover, any Upgrade of Your Involuntary Unemployment Benefit Option will not commence until ninety (90) days after the Upgrade Effective Date. Where the Upgrade is the addition of a Spouse/Partner, the Involuntary Unemployment Benefit will not be paid if that person was Involuntarily Unemployed at or immediately prior to the Upgrade Effective Date or at any time during the first ninety (90) days after the Upgrade Effective Date.

If You are Involuntarily Unemployed or entirely prevented from engaging in Your Permanent Employment for a period of less than one (1) month in the period where benefits are payable, We will pay one-thirtieth (1/30th) of the monthly benefit.

Life Events Benefit

If, during the Period of Insurance, one (1) of the following life events occurs:

- (a) You get married;
- (b) the birth of Your child;
- (c) You adopt a child(ren);
- (d) You relocate more than 200km from Your usual place of domestic residence;
- (e) You change employer;
- (f) You purchase a new home to be Your usual place of domestic residence;
- (g) You get divorced; or
- (h) Your Dependent Child commences University.

We will pay each Insured Person \$500 for one (1) of the above life events, occurring in any one Period of Insurance Period of Insurance. The amount payable under this benefit is the amount shown under Life Events Benefit on Your Policy Schedule.

The Life Events Benefit will not be paid:

- 1) in respect of any life events listed above that occurred prior to the Commencement Date or, in the case of a Spouse/Partner, any applicable Upgrade Effective Date or at any time during the first ninety (90) days after the Commencement Date or, in the case of a Spouse/Partner, any applicable Upgrade Effective Date;
- 2) in respect of (e) You change employer, if Your employment is of a seasonal nature, casual employment or a project or for a specific period.
- 3) in respect of (h) Your Dependent Child commences University, the benefit will only apply the first time the Dependent Child commences University and no other benefit will be payable for (h) Your Dependent Child commences University for the duration of the Policy, in respect of that Dependent Child.

11 General Conditions

Commencement and period of Your Policy

Your Policy begins on the Commencement Date or on the latest Renewal Date, whichever is the later, and continues for one (1) calendar year (being the Period of Insurance) after which time it expires, or until it is cancelled.

Renewal of Your Policy

This insurance may be renewed for further consecutive yearly periods upon payment of the premium. Payment of Your premium is deemed to be acceptance of an offer of renewal for a further yearly period.

If You continue to pay Your premium, then unless Your Policy is cancelled or We advise You prior to the Renewal Date that We will not be renewing, a policy on the same terms and conditions automatically comes in to existence for one (1) year from the Renewal Date.

Expiry of Your Policy

Your Policy expires at the end of the Period of Insurance. We may decide not to renew Your Policy. If We decide not to renew Your Policy, We will send You an expiry notice at least fourteen (14) days before the expiry of Your Policy.

If Your Policy is cancelled or otherwise terminated, the Period of Insurance will be from the Commencement Date or Renewal Date, whichever is the later, up to and including the date of cancellation or termination.

Australian law

You must be an Australian resident to be covered by this Policy unless specifically agreed otherwise by Us. You must notify Us if You are no longer an Australian resident during the Period of Insurance.

Your Policy is governed by the laws of the State or Territory of Australia in which You normally reside and any disputes in connection with Your Policy will be conducted in their courts.

Australian currency

All payments by You to Us and Us to You or someone else under Your Policy must be in Australian currency.

12 Exclusions

Your Policy will not apply to and We shall not pay benefits with respect to any loss, damage, liability, Event, or injury which:

- (a) arises directly or indirectly out of:
 - i. deliberately self-inflicted injury or suicide;
 - ii. any criminal or illegal act; or
 - iii. any mental health disorder, including anxiety disorders, depression, stress, adjustment disorders, eating disorders, emotional or behavioural disorders, disorders related to fatigue including chronic fatigue syndrome, myalgia, drug or alcohol abuse, psychosomatic disorders, or any treatment complications; or
 - iv. You being under the influence of intoxicating liquor, including having a blood alcohol content over the prescribed legal limit whilst driving, or being under the influence of any other drug unless it was prescribed by a Doctor and taken in accordance with the Doctor's advice; or
 - v. You engaging in any professional sport meaning Your livelihood is substantially dependent on Income received as a result of Your playing sport; or
 - vi. You engaging in any motor sports as a rider, driver and/or a passenger; or
 - vii. any consequences of war (whether declared or not), invasion or civil war, taking part in a riot or civil commotion; or
 - viii. You being a pilot or crew member of any aircraft, or engaging in any aerial activity except as a passenger in any properly licensed aircraft; or
 - ix. Pre-Existing Medical Conditions You may have.
- (b) occurs after You exceed the Maximum Age. All cover shall cease upon You exceeding the Maximum Age. This will not prejudice any entitlement to claim benefits which has arisen before You exceeded the Maximum Age.
- (c) occurs after You have received the maximum benefit six (6) monthly payments under the Accidental Injury or Sickness Benefit or three (3) monthly payments under the Involuntary Unemployment Benefit, in any one Period of Insurance.

Health insurance exclusion

Your Policy does not cover any Event or occurrence which may be deemed as the carrying on of a "Health Insurance Business" as defined under the Private Health Insurance Act 2007 (Cth) nor any benefit which would breach s126 of the Health Insurance Act 1973 (Cth), including the payment of medical expenses in Australia when a Medicare benefit is payable.

These general exclusions are in addition to the special conditions outlined in Section 10.

13 Cancellation Of Your Policy

Your Policy may be cancelled in one of three (3) ways:

1. When You can cancel

You can cancel Your Policy at any time by calling Us on 1800 810 624 or telling Us in writing.

If You:

- (a) pay Your premium by instalments and wish to cancel, We will cancel on the date to which You have paid Your premium in advance.
- (b) do not pay Your premium by instalments, the cancellation will take effect at 4pm Australian Eastern Standard Time on the day We receive Your notice of cancellation. We will refund the premium for Your Policy, less an amount which covers the period for which You were insured. However, We will not refund any premium if We have paid or are obliged to pay a benefit under Your Policy.

2. When We can cancel

We can cancel Your Policy by giving You written notice to the address on file and in accordance with the Insurance Contracts Act 1984 (Cth), including where You have:

- (a) breached the Duty of Disclosure;
- (b) breached a provision of Your Policy (including one requiring payment of premium);
- (c) made a fraudulent claim under any policy of insurance;

If We cancel, We will refund the premium for Your Policy less an amount to cover the period for which You were insured.

3. Automatic cancellation

Your Policy may be cancelled automatically and without any written notice from Us:

- (a) when You exceed the Maximum Age. This will be confirmed in writing. Any unused premium paid will be refunded; or
- (b) if You have not paid Your premium within thirty one (31) days of when it is due. The cancellation takes effect from the date the premium You have paid Us ceases to cover the insurance under this Policy.

14 Claims

You should advise Us as soon as possible of an occurrence or Event which could lead to a claim.

Procedure for making a claim

If You or Your legal representative wishes to make a claim You or they must:

- (a) complete a claim form (which is available from Us by calling 1800 810 624) and attach to the claim form:
 - i. any reports that have been obtained from the police, a carrier or other authorities about an accident, loss or damage; and
 - ii. any other documentary evidence required by Us under Your Policy
- (b) provide Us with the completed claim form and accompanying documents within thirty (30) days of the Event taking place which gives rise to a claim, or as soon as reasonably practical;
- (c) give Us at Your, or Your legal representative's, expense all medical and other certificates and evidence required by Us that is reasonably required to assess the claim;
- (d) help Us to make any recoveries. We have the right to sue any other party in Your name to recover money payable under the Policy or to choose to defend any action brought against You. You must provide reasonable assistance to Us.

We may also have You medically examined at Our expense when and as often as We may reasonably require after a claim has been made to determine if Your condition has changed.

Processing and payment of claims

We will take all reasonable steps to pay a valid claim promptly.

Making claims after Your Policy is cancelled

If Your Policy is cancelled this does not affect Your rights to make a claim under Your Policy if the Event occurred before the date of cancellation.

15 Complaints And Dispute Resolution

We take the concerns of Our customers very seriously and have detailed complaint handling and internal dispute resolution procedures that You can access. Please note that if We have resolved Your initial complaint to Your satisfaction by the end of the 5th business day after We have received it, and You have not requested that We provide You a response in writing, the following complaint handling and internal dispute resolution process does not apply. This exemption to the complaints process does not apply to complaints regarding a declined claim, the value of a claim, or about financial hardship.

Stage 1 – Complaint handling procedure

If You are dissatisfied with any aspect of Your relationship with Chubb including Our products or services and wish to make a complaint, please contact Us at:

The Complaints Officer
Chubb Insurance Australia Limited
GPO Box 4065
Sydney NSW 2001
Tel: 1800 815 675
Email: Complaints.AU@chubb.com

The members of Our complaint handling team are trained to handle complaints fairly and efficiently.

Please provide Us with Your claim or Policy number (if applicable) and as much information as You can about the reason for Your complaint.

We will investigate Your complaint and keep You informed of the progress of Our investigation. We will respond to Your complaint in writing within fifteen (15) business days provided We have all necessary information and have completed any investigation required. In cases where further information or investigation is required, We will work with You to agree reasonable alternative time frames and, if We cannot agree, You may request that Your complaint is taken to Stage 2 and referred to Our internal dispute resolution team. We will otherwise keep You informed about the progress of Our response at least every ten (10) business days, unless You agree otherwise.

Please note if Your complaint relates to Wholesale Insurance (as defined in the General Insurance Code of Practice), We may elect to refer it straight to Stage 2 for review by Our Internal Dispute Resolution team.

Stage 2 – Internal dispute resolution procedure

If You advise Us that You wish to take Your complaint to Stage 2, Your complaint will be reviewed by members of Our internal dispute resolution team, who are independent to Our complaint handling team and are committed to reviewing disputes objectively, fairly and efficiently.

You may contact Our internal dispute resolution team by phone, fax or post (as below), or email at:

Internal Dispute Resolution Service
Chubb Insurance Australia Limited
GPO Box 4065
Sydney NSW 2001
Tel: +61 2 9335 3200
Fax: +61 2 9335 3411
Email: DisputeResolution.AU@chubb.com

Please provide Us with Your claim or Policy number (if applicable) and as much information as You can about the reason for Your dispute.

We will keep You informed of the progress of Our review of Your dispute at least every ten (10) business days and will respond to Your dispute in writing within fifteen (15) business days, provided We have all necessary information and have completed any investigation required. In cases where further information or investigation is required, We will work with You to agree reasonable alternative time frames. If We cannot agree, You may refer Your dispute to the Financial Ombudsman Service Australia (FOS) as detailed under Stage 3 below, subject to its Terms of Reference. If Your complaint or dispute falls outside the FOS Terms of Reference, You can seek independent legal advice or access any other external dispute resolution options that may be available to You.

Stage 3 – External dispute resolution

If You are dissatisfied with Our internal dispute determination, or We are unable to resolve Your complaint or dispute to Your satisfaction within forty-five (45) days, You may refer Your complaint or dispute to FOS, subject to its Terms of Reference.

FOS is an independent external dispute resolution scheme approved by the Australian Securities and Investments Commission. We are a member of this scheme and We agree to be bound by its determinations about a dispute. Where a dispute is covered by the FOS Terms of Reference, the General Insurance Division of FOS offers a free and accessible dispute resolution service to consumers.

You may contact FOS at any time at:

Financial Ombudsman Service Australia
GPO Box 3
Melbourne VIC 3001
Tel: 1800 367 287
Fax: +61 3 9613 6399
Email: info@fos.org.au
www.fos.org.au

If You would like to refer Your dispute to FOS You must do so within 2 years of the date of Our internal dispute determination. FOS may still consider a dispute lodged after this time if FOS considers that exceptional circumstances apply.

16 Financial Claims Scheme And Compensation Arrangements

We are an insurance company authorised under the Insurance Act 1973 (Cth) (Insurance Act) to carry on general insurance business in Australia by the Australian Prudential Regulation Authority (APRA) and are subject to the prudential requirements of the Insurance Act.

The Insurance Act is designed to ensure that, under all reasonable circumstances, financial promises made by Us are met within a stable, efficient and competitive financial system.

Because of this We are exempted from the requirement to meet the compensation arrangements Australian financial services licensees must have in place to compensate retail clients for loss or damage suffered because of breaches by the licensee or its representatives of Chapter 7 of the Corporations Act 2001 (Cth). We have compensation arrangements in place that are in accordance with the Insurance Act.

In the unlikely event that We were to become insolvent and were unable to meet Our obligations under the Policy, a person entitled to claim may be entitled to payment under the Financial Claims Scheme. Access to the Scheme is subject to eligibility criteria. Please refer to <https://www.fcs.gov.au> for more information.

Chubb Insurance Australia Limited

ABN: 23 001 642 020 AFSL: 239687

Grosvenor Place

Level 38, 225 George Street

Sydney NSW 2000

Tel: 1800 810 624

Fax: +61 2 9335 3411

Email: CustomerService.AUNZ@chubb.com

www.chubb.com/au

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