

Supplementary Personal Statement

Financial Questionnaire

1 September 2011

OnePath Life Limited (OnePath Life)

ABN 33 009 657 176 AFSL 238 341

OnePath Custodians Pty Limited (OnePath Custodians)

ABN 12 008 508 496 AFSL 238 346 RSE L0000673

OnePath MasterFund (Fund)

ABN 53 789 980 697 RSE R1001525

GPO Box 4129, Sydney NSW 2001

Group Risk Administration

Phone 1800 199 414

Fax 02 9234 8072

Email group.riskuw@onepath.com.au

Web onepath.com.au

Details of Life Insured

Plan name	<input type="text"/>		
Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Ms
	<input type="checkbox"/> Miss	<input type="checkbox"/> Dr	Other <input type="text"/>
Surname	<input type="text"/>		
First name	<input type="text"/>		
Date of birth (dd/mm/yyyy)	<input type="text"/>		
Type(s) of cover	<input type="text"/>		
Sum(s) insured	\$ <input type="text"/>	Date of application(s) (dd/mm/yyyy)	<input type="text"/>
Member number	<input type="text"/>		
Phone	Home <input type="text"/>	Work	<input type="text"/>
	Mobile <input type="text"/>		
Email	<input type="text"/>		
Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Marital status	<input type="checkbox"/> Single	<input type="checkbox"/> De facto	<input type="checkbox"/> Married
		<input type="checkbox"/> Widow/Widower	
Smoker	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Type of cover

Personal/Family Protection	Sections A, B and G	Key Person/Business	Sections A, C, E and G
Loan/Business	Sections A, C, D and G	Share Purchase/Partnership, Buy/Sell and Business	Sections A, C, F and G

Section A – Income Details

1. Please state the life insured's total remuneration package from all sources for the last three financial years.

	3 years ago 30/06/20	2 years ago 30/06/20	last year 30/06/20
Salary	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Salary Sacrifice	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Bonus	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Directors' Fees	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Profit Share	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Total remuneration value	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>

2. Please state details for the following:

Assets	
Dwelling/Property	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Motor/Vehicles	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Investments (incl. rental)	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Shares	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Other	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Total Assets	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Liabilities	
Mortgages	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Personal Loans	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Investment Loans	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Other Liabilities	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Total Liabilities	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Section A – Income Details – continued

3. Have you ever been, or are you currently in the process of being declared bankrupt or insolvent? ☐ Yes ☐ No

If **yes**, please provide details.

Date declared bankrupt(dd/mm/yyyy) / /

Date discharged(dd/mm/yyyy) / /

Circumstances of bankruptcy:

Section B – Personal/Family Protection Cover

1. How many dependants does the life insured have?

2. How has cover been calculated?

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3. What is the purpose of the cover? Go to Section G (Declaration).

Section C – Business, Loan, Keyperson, Share Purchase, Partnership and Buy/Sell

1. What is the Company or partnership name?

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2. What is the nature of the business including industry?

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3. Number of employees and total payroll? (excluding you and your spouse)

Full-time

Part-time

Total payroll \$

4. How long has the business been operating for?

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5. Years of service by the life insured?

6. What percentage of the business does the life insured own? %

7. Is the life insured a shareholder in the company? ☐ Yes ☐ No

If **yes**, please advise percentage of shares and current value.

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8. What is the current value of the business and how was this calculated?

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9. Please advise financial results for the last three years.

	3 years ago 30/06/20	2 years ago 30/06/20	last year 30/06/20
Trade Turnover	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Gross Profit	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Net Profit (before tax)	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Gross Assets	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Gross Liabilities	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Total	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Please go to

Loan Cover Go to Section D

Key Person Go to Section E

Share Purchase, Partnership, Buy/Sell Cover? Go to Section F

Section D – Loan Cover

1. Please provide loan details.

Lender

Amount \$

Duration

Interest rate %

2. How is the loan being repaid? ☐ Capital ☐ Interest

(please provide a copy of signed loan agreement when sum insured is in excess of \$2,000,000)

3. Is lender effecting this policy? ☐ Yes ☐ No

If **yes**, to whom?

Section E – Key Person Cover

1. What proportion of the firm's net profit is attributed to the life insured? %

2. What qualifications, knowledge or expertise does the life insured have and why is the company so dependent on them?

3. How many other key persons are in the business and what are their roles?

4. Is insurance being effected on these key persons? ☐ Yes ☐ No

If **yes**, please provide details.

5. Has the board of directors authorised this insurance? ☐ Yes ☐ No

If **no**, what authorisation has been given?

6. What would be the revenue impact in the event of the insured's death and how has this been calculated?

Section E – Key Person Cover – continued

7. Is there a service agreement in place for the life insured? ☐ Yes ☐ No

If **yes**, please provide a copy.

Section F – Share Purchase, Partnership Or Buy/Sell Cover

1. Are policies being effected on other partners? ☐ Yes ☐ No

If **yes**, please provide details.

2. Is there a share purchase or buy/sell agreement? ☐ Yes ☐ No

If **yes**, please provide details.

3. What was the life insured's share of profits for the last three financial years?

3 years ago	<input type="text"/>	<input type="text"/>	<input type="text"/>	%	<input type="text" value="30/06/20"/>
2 years ago	<input type="text"/>	<input type="text"/>	<input type="text"/>	%	<input type="text" value="30/06/20"/>
Last year	<input type="text"/>	<input type="text"/>	<input type="text"/>	%	<input type="text" value="30/06/20"/>

Section G – Declaration

I, the life to be insured, declare that the answers to the questions on this Supplementary Personal Statement are true and complete to the best of my knowledge. I understand that the information I provide on this form in conjunction with any other statements made in connection with this application for life insurance will be used by OnePath Life, to decide whether to extend life insurance cover to the policy owner in respect of my life.

Name of Life Insured

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Signature

(sign clearly within box)

X

Date (dd/mm/yyyy)

/	/
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Name of Accountant

signed when sum insured
exceeds \$2,000,000

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Signature

(sign clearly within box)

X

Date (dd/mm/yyyy)

/	/
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Address

--

Suburb/Town

--

State

--

Postcode

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Phone

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Your Duty of Disclosure continues until the contract of life insurance has been accepted by the insurer and confirmation is issued in writing. Please ensure all changes in health and circumstances since completion of the original Application Form and Personal Statement are fully advised. OnePath Life will manage this additional personal information in accordance with the Privacy Statement set out in the Product Disclosure Statement.