

Application for salary continuance

Please use **BLOCK letters and black ink** when completing this form.

Return this completed form to:

legalsuper
 GPO Box 4952
 Melbourne VIC 3001
 DX145 Melbourne
 Phone: 1800 060 312
 Fax: 1800 614 431
 Email: mail@legalsuper.com.au

As an Employer-Sponsored or Personal/Self-Employed Member of **legalsuper**, you are entitled to apply for Salary Continuance insurance cover. Please ensure that you complete the enclosed *ING Group Risk - Personal Statement* form.

1. Current personal details

Membership number

Mr
 Mrs
 Ms
 Miss
 Dr
 Justice

Surname

Given names

Date of birth (dd/mm/yyyy)

Residential address (Cannot be a P.O. Box)

Town or Suburb

State

Postcode

Telephone number (Work)

Telephone number (Home)

Mobile number

Email

Occupation

Judge
 Barrister
 Solicitor/Lawyer
 Management staff
 Administration/Support staff

Other (please specify)

Employer's name

Date joined employer (dd/mm/yyyy)

Annual gross salary (Before tax)

2. Application for salary continuance insurance

Salary Continuance insurance is available in units of cover of \$100 per week (one unit represents \$100 benefit per week) up to a maximum level of cover of \$4,600 per week. The cost of Salary Continuance insurance varies depending on your age and gender.

The maximum benefit is 85% of your salary at the time of claiming the insurance. A waiting period of 30, 60 or 90 days applies.

The benefit is available for the period of 2 years, up to age 60, up to age 65. You can find full details of the premiums in the 'Salary Continuance Cover' section of the Product Disclosure Statement, which is available at www.legalsuper.com.au or by telephoning **1800 060 312**.

The easiest way to identify the maximum number of units you can apply for is to calculate 85% of your gross weekly wage (total weekly income before tax, multiplied by 0.85). Then round down to the nearest \$100, then divide that figure by 100. This will determine the number of units you can apply for (1 unit = \$100).

Members will be able to insure themselves for up to 85% (which includes up to 10% superannuation contribution per month) going back into your legalsuper account.

How many units of Salary Continuance insurance would you like to apply for? (Please cross)

1 unit 2 units 3 units 4 units 5 units

6 units 7 units 8 units 9 units 10 units

Other (please specify units, up to a maximum of 46 units)

Which waiting period do you want to choose? (Please cross)

30 days 60 days 90 days

Which payment period do you want to choose? (Please cross)

2 years to age 60 to age 65

Once you have completed this form, please complete the *ING Group Risk - Personal Statement* form enclosed with this application form. If you have also applied for death or death & total & permanent disability insurance within 30 days of completing this application and have already completed an *ING Group Risk - Personal Statement* form, you do not have to complete it again. As some of the questions you are required to answer on the Personal Statement may be sensitive in nature, you can send it to us in a separate sealed envelope if you wish, and we will pass it onto ING unopened.

Please also complete Sections 4 and 5.

