

YOUR COVER

In consideration of the Premium being paid and subject to the terms, conditions and exceptions set out below and attached, MARAC Insurance Limited (also referred to in this document as MARAC, we, our, and us) will indemnify you or your nominee for the benefits set out in this policy for any insured event that occurs within New Zealand.

A. Life Cover

If you pass away, we will pay the Death Benefit. Amount payable – the benefit shall be a lump sum calculated as the monthly benefit as nominated on this policy (and if amended by us in accepting this policy, the amended amount) multiplied by the number of whole months outstanding on this policy.

B. Accidental Death Cover

If you have paid all applicable premiums and this policy has run for more than 3 months from the start date as shown on this policy, we will cover you for Accidental Death. Amount payable – 10 times the monthly benefit as nominated on this policy (and if amended by us in accepting this policy, the amended amount). Accidental Death in this clause means death caused solely by injuries inflicted by a sudden and violent event external to the insured.

C. Accident Cover

If you are unable to attend to your usual business or employment as a result of accidental bodily injury we will pay the nominated benefit. Amount payable – the monthly benefit as nominated on this policy (and if amended by us in accepting this policy, the amended amount) calculated on a daily basis provided that we shall not be liable for the first 14 days of such disablement. In this clause an accident means a sudden and violent event external to the insured. The benefit will cease once you return to your usual business or employment.

D. Disability Cover

If you are unable to attend to your usual business or employment resulting from any illness which is not excluded, provided the illness does not manifest within 28 days of the commencement of this policy we will pay the nominated benefit. Amount payable – the monthly benefit as nominated on this policy (and if amended by us in accepting this policy, the amended amount) calculated on a daily basis provided that we shall not be liable for the first 14 days of such disablement. The benefit will cease once you return to your usual business or employment.

E. Redundancy Cover

If you are working for salary or wages for a minimum of 30 hours a week (this does not include, for example, self employed persons or working directors) we will cover you for redundancy resulting in unemployment. Redundancy means a termination of employment resulting from an excess of human resources resulting from mechanisation, rationalisation, or from a decrease in business activity, including the closing down of an enterprise or changes of plant, methods, materials or products, or reorganisation or like cause requiring a permanent reduction in the number of workers employed on other than a casual, temporary or seasonal basis. The Redundancy Benefit is available only if:

- i. prior to the termination of your employment you had been in continuous permanent full-time employment for three calendar months; and
 - ii. you continue to actively seek alternative employment.
- Amount payable – the monthly benefit as nominated on this policy (and if amended by us in accepting this policy, the amended amount) calculated on a daily basis, provided that we shall not be liable for:
- iii. statutory holidays of any period of unemployment during which the monthly benefit is payable; or
 - iv. the first 30 days of unemployment;
 - v. any amount in respect of unemployment in excess of 180 days.

F. Business Interruption Cover

If you have operated the same business for a period of 6 months prior to any claim being lodged, we will cover you for losses caused by interruption to the business operated by you due to you being unable to carry on your normal business activity as a result of total physical loss or damage to the business premises, prevention of access to the business premises or failure of the essential services to the business premises required for its normal safe operation. Amount payable – the monthly benefit as nominated on this policy (and if amended by us in accepting this policy, the amended amount) calculated on a daily basis provided that we shall not be liable for:

- i. the first 30 days of any period of business interruption; or
- ii. any amount in respect of business interruption in excess of 180 days.

G. Bankruptcy Cover

If you are adjudged bankrupt by the High Court during the term of this policy pursuant to a Creditors' Petition under the Insolvency Act 1967, and were self-employed and had been trading in the same style and same business for not less than 3 years prior to the commencement of this policy we will pay the amount payable for Bankruptcy Cover. Amount payable – six times the monthly benefit as nominated on this policy (and if amended by us in accepting this policy, the amended amount) subject to a maximum amount payable of \$10,000. In the event of a claim, you must provide written evidence from a chartered accountant and related court documents together with any other information and documentation that we reasonably require to prove the validity of your claim for Bankruptcy Cover.

H. Suspension Cover

If you are suspended from permanent employment which is a direct result of a lawful strike, lock-out or strike related action outside your place of employment, providing that your employer is lawfully entitled to withhold your remuneration for the period of your suspension we will pay the amount payable for Suspension Cover. Amount payable – the monthly benefit as nominated on this policy (and if amended by us in accepting this policy, the amended amount) calculated on a daily basis during the period of suspension provided that we shall not be liable for:

- i. the first 30 days following your suspension; or
- ii. any amount in respect of suspension in excess of 180 days.

I. Hospitalisation Cover

If you are hospitalised or confined to a bed at home at the written direction of a registered medical practitioner we will pay you the amount payable for Hospitalisation Cover. Amount payable – the monthly benefit as nominated on this policy (and if amended by us in accepting this policy, the amended amount) calculated on a daily basis for each 24 hour period of confinement to a hospital or bed at home. No benefit is payable for the first 7 days of such confinement.

TERMS AND CONDITIONS OF THIS LIFESTYLE PROTECTION INSURANCE POLICY

CONDITIONS AND LIMITATIONS

You are covered under this policy subject to the following limits and conditions:

1. Amounts payable under this policy are subject to a maximum monthly benefit as listed and a total aggregate policy limitation of \$100,000.

MAXIMUM MONTHLY BENEFITS

| Policy Term | Maximum Monthly Benefit |
|-------------|-------------------------|
| 12 Months | \$4,600 |
| 24 Months | \$2,500 |
| 36 Months | \$1,800 |
| 48 Months | \$1,500 |
| 60 Months | \$1,300 |

2. This policy and all benefits payable under it terminate at 4pm on the day the period of insurance expires as specified on this policy. No admitted claims or benefits payable can extend beyond this expiry date.
3. Renewal of this policy may be offered to you at our sole discretion providing you have not reached 65 years of age.
4. You must inform us immediately if you change your name or address.
5. All benefits payable under this policy shall be payable as specified on the front of this policy.

EXCLUSIONS AND CONDITIONS

No amount shall be payable in respect of:

1. Any event attributable either wholly or in part to:
 - a) Infectious diseases such as Human Immunodeficiency Virus (HIV), Severe Acute Respiratory Syndrome (SARS), any other infectious diseases that could potentially cause death, or any infection caused by any sexually transmitted disease;
 - b) The normal effects of pregnancy, childbirth, menopause, abortion or miscarriage parental leave;
 - c) Medical or surgical treatment including cosmetic surgery (except where such treatment is rendered necessary by an insured event);
 - d) Suicide or intentional self injury or deliberate and reckless exposure to exceptional danger (except in an attempt to save human life);
 - e) Any psychological, mental or nervous condition or disorder (this includes but is not limited to depression, anxiety, or any stress related condition);
 - f) Alcoholism, chemical or drug dependency;
 - g) Redundancy which is notified or occurs within 60 days of commencement of this policy.
2. Any event consequent upon:
 - a) War, terrorism and related risks;
 - b) Redundancy due to cessation of work where the work is of a seasonal, contractual, self-employed or temporary nature or where you are employed for a specified period by reference to specified work and become unemployed at the expiration of the period or on completion of the work;
 - c) Redundancy, Business Interruption, Bankruptcy, Suspension or Hospitalisation that you knew or ought to have known was possible, probable or likely at the commencement of this policy.
3. Any event happening to you whilst engaging in:
 - a) Air travel other than as a passenger or air crew in an aircraft fully licensed for the carriage of passengers;
 - b) Exceptionally dangerous recreational activities including but not limited to parachuting, motor racing of any kind (including motorboat racing), hang-gliding, paragliding, mountaineering and scuba diving;
 - c) Professional sporting activities;
 - d) A criminal act; or
 - e) Driving a vehicle under the influences of intoxicating liquor, narcotics or drugs.
4. No claim shall be payable as a consequence or in any way attributable to any medical condition which was diagnosed or in respect of which the symptoms were known prior to the inception date of this policy.

HOW TO MAKE A CLAIM

If you think you may need to make a claim please call us on freephone 0800 45 10 10 as soon as possible after the event and we will send you a claim form. You will need to complete the claim form and may be required to undergo medical tests in order to qualify for a benefit.

If any claim is fraudulent or dishonest in any respect, all benefits under this policy will be forfeited.

ABOUT PROTECTING YOUR PRIVACY

This policy collects personal information about you to evaluate the insurance you seek. The recipient and holder of the information is MARAC Insurance Limited, MARAC House, Cnr Gillies Avenue & Teed Street, Newmarket, Auckland. The collection of this information is required pursuant to the common law duty to disclose all material facts relevant to the insurance sought and is mandatory. The failure to provide this information may result in your policy being declined. You have right of access to, and correction of this information subject to the provisions of the Privacy Act 1993. The information will be held at the office of MARAC Insurance Limited, MARAC House, Cnr Gillies Avenue & Teed Street, Newmarket, Auckland. The information may be used for the purposes of marketing by MARAC.

RATING

MARAC Insurance Limited has registered a notice of election not to be rated and is not required to have a rating pursuant to section 9 of the Insurance Companies (Ratings and Inspections) Act 1994.