

DIRECT DEBIT REQUEST SERVICE AGREEMENT

<u>Applies to your Freedom Insurance Products</u> – the terms on this page apply if you hold a Freedom Insurance product only; if you hold a **Budget Direct Life or Ozicare product**, please refer to the terms on following the page instead.

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 Genus Life Insurance Services (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 88 44 88.**
- 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:

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

you may also incur fees or charges imposed or incurred by us; and 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 Genus Life Insurance Services is liable to pay goods and services tax (GST) on a supply made in connection with this agreement, then you agree to pay Genus Life Insurance Services 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 88 44 88 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: 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; your account details which you have provided to us are correct by checking them against a recent account statement; and 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: to the extent specifically required by law; or 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 Genus Life Insurance Services, GPO Box 2548 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.

DIRECT DEBIT REQUEST SERVICE AGREEMENT

Applies to your Budget Direct Life and/or Ozicare Life Products – the terms on this page apply if you hold a Budget Direct Life and/or Ozicare Life Product; if you hold a Freedom Insurance product, please refer to the terms on the previous page instead.

This is your Direct Debit Service Agreement with Genus Life Insurance Services Pty Ltd ABN 89 631 536 537 (as agent for Hannover Life Re of Australasia Ltd ABN 37 062 395 484 (Hannover)). It explains what your obligations are when undertaking a Direct Debit arrangement with us. It also details what our obligations are to you as your Direct Debit provider. Please keep this agreement for future reference. It forms part of the terms and conditions of your Direct Debit Request (DDR) and should be read in conjunction with your DDR authorisation.

"Account" means the account held at your financial institution from which we are authorised to arrange for funds to be debited. "Address" means Genus Life Insurance Services, GPO Box 2548, Sydney, NSW, 2001.

"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 or our" means Genus Life Insurance Services Pty Ltd ABN 89 631 536 537 with User ID 635925 (in its own capacity and as agent for Hannover) (**Debit User**) you have authorised by requesting a Direct Debit Request.

"you" means the customer who has signed or authorised by other means the Direct Debit Request.

"your financial institution" means the financial institution nominated by you on the DDR at which the account is maintained.

1. Debiting Your Account

- 1.1 By providing a Direct Debit Request or by providing us with valid instruction, 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 if we have sent to the address nominated by you a payment schedule which specifies the amount payable by you to us and when it is due.
- 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. Amendments by Us

2.1 We may vary any details of this agreement of a Direct Debit Request at any time by giving you at least fourteen (14) days written notice.

3. Amendments by You

3.1 You may change*, stop, or defer a debit payment, or terminate this agreement by providing us with at least 7 banking days notifying us in writing to our Address, or arranging it through your own financial institution, which is required to act promptly on your instructions. *Note: in relation to the above reference to 'change', your financial institution may 'change' your debit payment only to the extent of advising us of your new account details.

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 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 clear 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.

Dispute

- 5.1 If you believe that there has been an error in debiting your account, you should take up the matter directly with us by notifying us in writing to our Address. Alternatively, you can take it up directly with your financial institution.
- 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 in writing.

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
- with your financial institution before providing the Direct Debit Request if you have any queries about 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 about anything relating to this agreement, you should write to our Address.

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

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

DIRECT DEBIT REQUEST SERVICE AGREEMENT

Credit Card Authority Policy Number: Frequency of payment: Fortnightly Monthly Annually Please debit my: Visa MasterCard Credit Card Number: Exp: Name as it appears on card: This authority enables Genus Life Insurance Services to debit your credit card every month if monthly payments are indicated, or fortnightly or annually, until you advise Genus Life Insurance Services in writing to cancel this authority. Please note that if your product is a Budget Direct Life or Ozicare Life product, Genus is acting as agent for Hannover Life Re of Australasia Ltd ABN 37 062 395 484. Given Name/s: Surname: Address: Suburb: State: Postcode: Cardholder's Signature: Date: Phone:

DIRECT DEBIT REQUEST SERVICE AGREEMENT

Direct Debit Request

Request and authority to debit the account named below to pay Genus Life Insurance Services
1. Request and authority to debit
Policy Number:
Surname or company name:
Given names or ACN/ABN/ARBN:
("you") request and authorise Genus Life Insurance Services (which for Freedom Insurance policies, has User ID 324550; and in respect of Budget Direct or Ozicare policies, has User ID 635925 and is acting as agent for Hannover Life Re of Australasia Ltd ABN 37 062 395 484) to arrange through its own financial institution, for any amount Genus Life Insurance Services 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:
Phone:
Given Name/s:
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 Genus Life Insurance Services as set out in this Request and in your Direct Debit Request Service Agreement.
5. Payment details
Frequency of payment: Fortnightly 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:
Phone:
Date: / /