

# Insurance Reinstatement Form

**Please complete this form in black ink using BLOCK letters.**

Please complete this form if your insurance cover was cancelled as a result of 'inactivity' and you would like to reinstate your insurance cover. You can only reinstate your insurance cover within 60 days of your insurance cover cancelling. Your insurance cover is subject to the policy terms, governing rules of Perpetual WealthFocus Superannuation Fund and superannuation law.

Please post your completed form to us or email the form to [superandpension@perpetual.com.au](mailto:superandpension@perpetual.com.au).

**You can only complete this form if you are requesting to reinstate your insurance cover within 60 days of your insurance cover cancelling.**

**Please contact us if your insurance cover has cancelled outside of 60 days.**

## 1. Your personal details

member name	<input type="text"/>
member number	<input type="text"/>

## 2. Request to reinstate insurance cover and election to maintain insurance cover

By signing this form:

- I request to have insurance cover reinstated on my account; and
- I elect to maintain my insurance cover even if my account is inactive for a continuous period of 16 months.
- I understand that:
  - I will be charged backdated insurance premiums to ensure that my insurance cover remains continuous;
  - My insurance cover will be maintained where my account has sufficient funds to deduct the insurance premiums for the period of cover; and
  - I can reduce, cancel or apply to increase my insurance cover at any time.
- I confirm that I have considered the information including the Product Disclosure Statement and Insurance Book.

name	<input type="text"/>
signature	<input type="text"/>
date	<input type="text"/>

**Phone** 1800 011 022

**Mail** Perpetual WealthFocus Super and Pension,  
 Reply Paid 92151,  
 PO Box 617,  
 Parramatta NSW 2142

**Email** [superandpension@perpetual.com.au](mailto:superandpension@perpetual.com.au)

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