







- If your Life Cover claim is not approved, the Funeral Support Benefit payment will need to be refunded to us.

The Funeral Support Benefit is not payable if you have not nominated a beneficiary\* and are the sole policy owner (as there is no surviving policy owner).

### Child Funeral

We'll pay \$10,000 if an insured person's\* biological or legally adopted\* child aged 18 years or under dies.

- This benefit is only payable to the policy owner.
- For each child's funeral, we'll only pay the benefit once even if you have multiple policies with us.
- Once you've claimed on this benefit once, this benefit will cease.

### Financial Planning

After you've made a Life Cover claim, you can claim for reimbursement of any fees up to a maximum of \$3,000 (including GST) for:

- financial planning advice that you receive from a licensed Financial Advice Provider; and
- legal advice you receive from a Lawyer, with a Practising Certificate, relating to financial planning.

You must claim this benefit within one year of the Life Cover claim being paid out.

- Receipts are required to prove the cost of the financial planning.
- There will be only one payment made for each insured person\*.

### Counselling

After you've made a Life Cover claim and have received a referral by a registered doctor\* or medical specialist\*, we will reimburse up to \$2,500 per claim toward the cost of consultations with a:

- counsellor (registered with the New Zealand Association of Counsellors)
- psychologist, (registered with the New Zealand Psychologists Board) or
- psychiatrist (registered with New Zealand Medical Council).

The counselling must be for:

- the insured person\* and/or close relative of the insured person\*
- the support treatments and/or consultations directly related to a Life Cover claim.

The consultation and/or counselling must be paid for within three months.

- Receipts are required to prove the cost of consultations.
- There will be only one payment made for each insured person\*.

## Payment

[Information about your payments, such as how we calculate your payments and your options for how to pay.](#)

### calculating your payments

We base your payments on:

- the type of cover you have
- your amount of cover
- the insured person's\* gender, smoking habits and declared state of health
- the insured person's\* occupation and pastimes
- the cover remaining after a claim is paid for your Critical Conditions Cover.

Each year, on the anniversary of your policy, we'll automatically increase your payments. This reflects the insured person's\* increasing age plus the annual CPI\* increase to your cover (unless you have chosen to stop CPI\* increases or you are no longer eligible for CPI\*, see the section entitled 'increase your cover for inflation'.) CPI\* increases will stop if your cover limit reaches the maximum amount of cover allowed.

We'll notify you at least 20 days before a price increase.

	<p>If the insured person's* state of health deteriorates from year to year, it has no impact on what you pay.</p> <p>If you reinstate your policy, we will review any changes to your health and this may affect the price.</p>
which currency	All transactions are in New Zealand dollars.
payment frequency and due date	<p>Your payments follow a monthly cycle. They are due by the 25th of each month to pay for the following month's cover.</p> <p>Depending on the day you apply, your first two payments may be as little as one week apart or as much as five weeks apart.</p> <p>As an alternative, we can offer a six-monthly or an annual payment cycle. Contact us to arrange this.</p>
payment methods	You can pay by direct debit or credit card. You can switch between payment methods at any time. To pay by direct debit, you'll need a New Zealand bank account. Simply complete and return the direct debit form that you can download from our website.
additional bank charges	There are no extra charges if you pay by direct debit. If you pay by credit card, you'll pay an additional fee of 3.95%. If you pay in a currency other than New Zealand dollars, your bank may charge an additional fee for exchanging your currency.
payment holiday for financial hardship	<p>You can apply to us in writing to ask us for a payment holiday for up to 12 consecutive months. This means you won't need to make any payments, but no cover will be provided. This also means you won't be able to claim for any condition or event that occurs or is first diagnosed during the payment holiday.</p> <p>At any time during that 12-month period you can reinstate your policy on the existing terms without having to reapply.</p> <p>The payment holiday is only available if you are experiencing financial hardship. This includes:</p> <ul style="list-style-type: none"> <li>• redundancy*</li> <li>• bankruptcy</li> <li>• tertiary studies</li> <li>• overseas travel</li> <li>• leaving paid employment to become a full-time caregiver for partner or child</li> <li>• death of a spouse, partner, or child</li> <li>• natural disaster where the event affects an insured person's* ability to work</li> <li>• employer approved leave without pay or</li> <li>• any other event Pinnacle Life agrees to, at its sole discretion.</li> </ul> <p>To apply for the payment holiday, we'll need evidence to support your application.</p> <p>From the date you reinstate this policy or after 12 months of the payment holiday, payments will be payable on the same terms that applied before the payment holiday. We'll base the payments on the insured person's* current age and the premium rates that apply at that time.</p> <p>We won't approve your application for a payment holiday unless you have paid at least four monthly payments by the payment date since your last payment holiday ended. Over the life of the policy, the payment holiday can only be used for a maximum of 24 months.</p> <p>If your policy has lapsed due to non-payment (missing four payments in 24 months), you are not able to use the payment holiday to reinstate your policy. You must apply for a payment holiday before the 4th payment is missed.</p>
cover suspended for non-payment	We should receive your monthly payment on or before the 25th of each month. If we haven't received your payment by the 1st of the next month, we'll immediately put your cover on hold (suspend your cover).

If we suspend your cover we'll:

- notify you of the suspension at your last known contact address
- not pay any claim relating to a period in which cover was suspended
- restart your cover in the month following your next payment.

cover ended for non-payment

If you miss three of your monthly payments within a 24-month period without catching them up, your policy will end the next time you miss a payment. The three monthly payments don't need to be consecutive. If this happens:

- we'll notify you at your last known contact details
- your cover will stop on the 1st of the month following the last due date missed
- we won't refund any payments you have made to date.

## Changes

Changes you can make to your policy and how to go about making those changes.

change policy owner

When your policy is first issued, you are automatically both the policy owner and the insured person\*. You can change the owner of your policy to someone else at any time. To change the owner, complete the change of ownership form attached to this policy document. You can also find the change of ownership form on our website.

change beneficiary

When your policy is first issued, the policy owner will automatically be the beneficiary\* of the policy. You can change the beneficiary\* for your policy by completing a change of beneficiary\* form. You can find the change of beneficiary form on our website.

increase your cover for inflation

Each year on the anniversary of your policy, we'll automatically increase your cover. This helps your policy keep up with the pace of inflation. We'll base the increase on the Consumer Price Index\* (CPI\*) published by Statistics New Zealand in September of each year.

To stop the next CPI\* increase, just tell us in writing before your next policy anniversary. If you stop the CPI\* increase for three consecutive years, you will no longer be eligible for any future CPI\* increases.

We don't offer the CPI\* increase if you have previously claimed (or are eligible to claim) under this policy OR if a loading\* of more than 125% has been applied to your policy as a result of an insured person's\* state of health. CPI\* increases will stop if your cover limit reaches the maximum amount of cover allowed.

increase your cover for a special event

A special event allows you to increase your cover with no further questions asked about the insured person's\* state of health. We may request supporting evidence of the special event.

You qualify for a special event increase for Life Cover and Critical Conditions Cover if;

- the insured person\* is 59 or younger
- your policy has a loading\* of no more than 50% because of the insured person's\* health
- you haven't claimed and aren't eligible to claim under this policy (in other words, you're not planning to claim in the immediate future)
- your payments are entirely up to date.

The events we'll cover as a special event are if the insured person\*:

- has had their policy for 5, 10, 15, or 20 years – in which case you can increase your cover within 3 months of the 5th, 10th, 15th or 20th anniversary of this policy, or
- has married (including a civil union), divorced or become a parent (through birth or legal adoption\*) within the past six months or
- has started full-time secondary school or tertiary education for the first time within the past three months, or

- takes on the full-time care (for the first time) of a dependent relative\* within the past three months, or
- is 59 or younger and has taken out or increases a home loan or mortgage. The loan or mortgage must be associated with a residential property. (Loans or mortgages related to commercial premises or to a trust or business don't qualify as a special event) within the past three months, or
- has a child, spouse or de facto partner or Civil Union partner who dies or is diagnosed with a Terminal Illness\* or has started full-time secondary school or tertiary education for the first time within the past three months.

You cannot take up a special event increase if:

- you have previously claimed or are eligible to claim under this policy, or
- your policy has a loading\* of more than 50% because of the insured person's\* state of health.

What are the limits?

- You're entitled to three special event increases.
- You can have one special event increase per year.
- No single increase can exceed \$250,000 for Life Cover and \$100,000 (or 50% of the current value) for Critical Conditions Cover .
- The total of all increases cannot exceed 50% of the insured person's\* original cover.
- Where the special event relates to a mortgage, your increase in cover cannot exceed the amount by which your mortgage has increased.
- There are limits to the maximum cover you can have. Refer to the section 'how much cover you can buy'. If, at any time, you decrease your cover, the limits on increasing your cover for a special event will be recalculated on the new level of your cover.

increase your cover because you want to

You can apply at any time to increase your cover; however, we don't have to approve the increase. Our approval will depend on several factors, including your reason for the increase and the insured person's\* state of health. We'll also need to receive the insured person's\* written consent.

There are limits to the maximum amount of cover you can have. Refer to the section 'how much cover you can buy'.

A 13-month exclusion for suicide will apply to any increase in Life Cover.

If you increase your Critical Conditions Cover, you can't claim on the increased amount for three months.

From time to time, we may approach you with an offer to increase your cover on favourable terms.

decrease your cover

We'll always reduce your cover if you request it. There are no conditions or penalties.

A decrease in your cover will decrease your ongoing payments. This will apply from the next payment due after your request is processed.

stop smoking

If the insured person\* is currently insured as a smoker\*, you can ask to reduce your payments if they stop smoking.

- They must have stopped for 12 months or more.
- We'll need the insured person\* to complete a non-smoking declaration (which you can find on our website) before we can reduce your payments.

environmental changes

There may be circumstances in which we would need to apply a general increase to payments across all policies: for example, to offset against an increased cancer\* trend or other environmental factors. If this occurs, we'll notify you at least 30 days ahead of any increase.

law or tax changes

We can increase your payments to cover any additional costs we incur if the law or tax regulations (or their interpretation) change. If this happens, we'll notify you at least 30 days ahead of any

increase.

[pass back of changes](#)

If we ever make a change to our policy that's better for you, the new and better version will be added to your policy automatically, subject to:

- If you make a claim, we'll compare the updated part of the policy with your current one and use the one that's better for you. The new version will only apply if your claim happens after the date we made the change.
- Any special rules or exclusions already in your policy will remain the same, even if other parts improve.
- If the change means your premiums (what you pay) need to go up, that will happen the next time we review your payments.
- Once you've chosen this option, you won't be able to change your mind later.

## Eligibility

[Clarifying who can buy this policy and how much cover they can have.](#)

[who can buy this policy](#)

This policy can be purchased from Pinnacle Life by any person aged 18 to 74 who permanently resides in New Zealand, Australia, UK, Ireland, USA, Canada, Hong Kong, or Singapore and is:

- a New Zealand citizen or passport holder, or
- a holder of a New Zealand residency visa, or
- a holder of a New Zealand work permit for two years or more, or
- an Australian passport holder living in New Zealand.

To include Critical Conditions Cover, Income Protection Cover or Total and Permanent Disability Cover in this policy, you must be between the ages of 18 and 59 at the time the cover is included.

[how much cover you can buy](#)

You can buy as many policies from us as you wish. The maximum amount of cover the insured person\* can have cannot exceed:

- \$2.25 million across their Life, Mortgage and Accidental Death Cover policies, with Cover amounts of no more than
  - \$1.5 million for Life and/or Mortgage Cover
  - \$1 million Accidental Death Cover and Total Permanent Disability Cover
  - \$625,000 for Critical Conditions, Critical Illness or Serious Illness Cover and
- We'll be liable to pay out only the first \$1.5 million, \$1 million, and \$625,000 respectively if you exceed these amounts without our consent.

## Cancellation

[What happens if you want to cancel your policy](#)

[30-day free look](#)

If you change your mind and cancel this policy within 30 days of it first being issued, we'll immediately stop your cover and refund your payments.

[cancelling this policy](#)

After the 30-day free look, you can cancel this policy at any time; however, your payments are not refundable. The only exception is where you have paid for either six or 12 months in advance; in this case, we'll refund the amount you have pre-paid.

[no cash value](#)

This policy contains no savings or investments and does not share in the profits of Pinnacle Life. The policy has no cash value if cancelled.



## Claims

What you need to provide if you need to make a claim and who will receive the money.

information we need for all claims	<p>To make a claim, the policy owner or someone acting for them will need to contact us.</p> <p>We'll advise you of the exact requirements for your circumstances at the time of any claim. For all claims, we will need:</p> <ul style="list-style-type: none"><li>• proof of the insured persons'* date of birth</li><li>• proof of the owner or beneficiaries'* identity</li><li>• proof of the bank account you want the claim paid into.</li></ul>
information we need to assess a death claim	<p>For a <b>Death</b> claim, we'll need:</p> <ul style="list-style-type: none"><li>• a copy of the insured person's* death certificate, and</li><li>• a coroner's report if one has been issued.</li></ul>
information we need to assess a terminal illness claim	<p>For a <b>Terminal Illness</b> claim we'll need:</p> <ul style="list-style-type: none"><li>• a written opinion from a medical specialist*. This should state:<ul style="list-style-type: none"><li>◦ the nature of the insured person's* illness</li><li>◦ when it was first diagnosed, and</li><li>◦ that they are likely to have 12 months or less to live as a result of this illness.</li></ul></li></ul>
information we need to assess a Critical Conditions claim	<p>For a <b>Critical Conditions</b> claim, we'll need:</p> <ul style="list-style-type: none"><li>• a written opinion from a medical specialist* confirming that the insured person* has suffered one or more of the Critical Conditions covered under this policy, when it first occurred and/or when it was diagnosed.</li></ul>
claiming on other benefits	<p>To claim on the other benefits of your policy, contact our team. We will support you through the process and advise you on what information we need.</p>
who we pay	<p>You can nominate a beneficiary* to receive the proceeds of any Life or Critical Conditions claim under this policy. If you don't have a beneficiary* or the beneficiary* is deceased, we will pay you, the policy owner.</p> <p>For information about how to claim on other benefits on your policy, refer to other benefits in the 'Your Life Cover' section.</p>

## Legal and regulatory

Our legal and regulatory responsibilities to you, as well as your responsibilities to us.

your privacy	<p>We understand how important your privacy is to you. All information you provide to us will be held securely and confidentially. We'll use this information only to process your application, to administer your policy and, ultimately, to pay any claim. There may be occasions when we collect your personal information from a third party. We do this when it is authorised by the Privacy Act 2020 or when you give us permission to do so. You may contact us at any time to access or correct any information we have about you.</p> <p>From time to time, we may communicate with you to get your feedback and update you on the products and services we offer, and we may offer you other products. If you don't want us to contact you in this regard, just drop us an email, <a href="mailto:ask@pinnaclelife.co.nz">ask@pinnaclelife.co.nz</a>.</p>
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<a href="#">New Zealand law</a>	New Zealand legislation governs this policy. Any legal action for this policy must be carried out in New Zealand.
<a href="#">our statutory fund</a>	All payment transactions for this policy that we receive from you (or pay to you) will be through our 'Rimu Statutory Fund'. New Zealand law requires us to have a statutory fund to protect your interests by ensuring accounting transparency.
<a href="#">your responsibilities</a>	<p>You must be absolutely truthful with us. We rely on your information to issue your policy and pay any claim.</p> <ul style="list-style-type: none"> <li>• If you are not absolutely truthful or if you don't disclose all relevant information, we may void* or change the terms of your policy.</li> <li>• If your claim includes false or incomplete information we won't be liable to pay any claim and we can, at our discretion, void* your policy.</li> <li>• If, after we pay any claim, we find that it includes false or incomplete information, you must pay back all claim payments.</li> </ul>

## Definitions

### Meanings of words and terms that we have used in this document.

<a href="#">activities of daily living</a>	<p>An activity of daily living is one of the following:</p> <ul style="list-style-type: none"> <li>• Moving to, from and within a bed, chair or wheelchair, or moving from place to place by walking, using a wheelchair or with the help of a walking aid</li> <li>• Dressing and undressing (including grooming and fitting with artificial limbs)</li> <li>• Bathing and showering</li> <li>• Eating and drinking</li> <li>• Using a toilet for normal personal hygiene</li> </ul>
<a href="#">beneficiary</a>	<p>This beneficiary is the person to whom we'll pay a Life or Critical Conditions claim. When your policy is first issued, you, the policy owner, are automatically nominated as the beneficiary. You can change the beneficiary to someone else; see the section entitled 'change beneficiary'.</p> <p>The beneficiary can only be a natural person and must be over the age of 18.</p> <p>If the beneficiary is deceased, the policy owner automatically becomes the beneficiary.</p>
<a href="#">Consumer Price Index (CPI)</a>	The CPI is an index published by Statistics New Zealand. We use the results published for September.
<a href="#">dependent relative</a>	A dependent relative could be the mother, father, brother, sister, son, daughter, father-in-law, mother-in-law, grandfather, grandmother, grandchild, spouse, de facto partner, or Civil Union partner. We'll include other relatives if you can show a relationship exists that is the same as one of the relationships above (e.g. Whāngai).
<a href="#">doctor</a>	<p>This means a doctor or medical practitioner licensed to practice medicine legally within New Zealand.</p> <p>For the purposes of this policy, a doctor can't be you or the insured person*, or any relation, business associate, employer or employee of you or the insured person*.</p>
<a href="#">insured person</a>	An insured person is a person whose life or health is covered under this policy.
<a href="#">legally adopted</a>	Legally adopted means subject to an adoption order under the Adoption Act 1955 or an overseas adoption order which is outlined in section 17 of that Act.

loading	A loading is when we charge a higher premium to cover the insured person*.
medical specialist	<p>A medical specialist means a practising medical specialist, who is licensed to practise his or her medical specialty within New Zealand, Australia, UK, Ireland, USA, Canada, Hong Kong or Singapore. Their specialty qualifies him or her to make a prognosis related to the terminal illness or to diagnose a medical condition, illness, disability or injury covered under this policy of an insured person*.</p> <p>For the purposes of this policy, a medical specialist can't be you or the life insured, or any relation, business associate, employer or employee of you or the life insured.</p>
smoker/non-smoker	If an insured person* has smoked a cigarette or any other substance during the last 12 months or has used a vape or electronic cigarette, they're a smoker. If not, they're a non-smoker*.
void	If we void your policy, we'll consider that your policy has never existed, payments you have made will not be refunded and we will not pay any claims.
we, our, us	We, our or us means Pinnacle Life.
you, your	You or your means the policy owner.

## Critical Conditions Definitions

accidental HIV infection (medically or occupationally acquired)	<p>A confirmed diagnosis of Human Immunodeficiency Virus (HIV) resulting from:</p> <ul style="list-style-type: none"> <li>• The accidental or violent transmission of the virus during the course of the life insured person's* normal occupation or</li> <li>• through one of the following medical procedures performed in New Zealand by a registered health professional. <ul style="list-style-type: none"> <li>◦ a transfusion of blood or blood products;</li> <li>◦ an organ transplant where the insured person* was the recipient;</li> <li>◦ assisted reproductive techniques; or</li> <li>◦ other medical procedure or operation performed by a Medical Practitioner/Paramedical Practitioner or Dentist at a registered medical facility</li> </ul> </li> </ul> <p>We require a statement from an appropriate medical specialist* that provides documented proof of the incident and confirms that the infection is medically or occupationally acquired.</p> <p>Proof of a new HIV infection (sero-conversion) must be registered within six months of the accident or violent act and be supported by a negative HIV test taken within ten days of the incident.</p> <p>Any incident giving rise to a potential claim must be reported to the relevant authority or employer. We encourage you to report any incident giving rise to a potential claim to us within 30 days.</p> <p>The definition will not be met if:</p> <ul style="list-style-type: none"> <li>• the New Zealand government or relevant government body has approved a medical treatment or cure which renders the virus inactive and non-infectious</li> <li>• the infection arises from a deliberate, self-inflicted or induced cause, or from sexual activity (whether as part of your occupational duties or otherwise), or from the use of drugs not medically prescribed to you</li> <li>• in practising your own occupation, you have not made reasonable efforts to comply with any New Zealand Government guidelines in relation to preventing infection of health care workers; or you have not taken an approved vaccine that is recommended by the relevant government body for use in your own occupation and is available prior to the event which causes infection.</li> </ul>
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<p>advanced diabetes (with at least one complication of specified severity)</p>	<p>Means an appropriate medical specialist* has confirmed that at least one of the following complications have occurred as a direct result of diabetes:</p> <ul style="list-style-type: none"> <li>• Severe diabetic retinopathy resulting in visual acuity (whether aided or unaided) and corrected of 6/36 or worse in both eyes; or</li> <li>• Severe diabetic neuropathy causing motor and/or autonomic impairment; or</li> <li>• Diabetic gangrene leading to the surgical removal of a whole hand or whole foot; or</li> <li>• Severe diabetic nephropathy causing chronic irreversible renal impairment as measured by an estimated glomerular filtration rate less than 30 mL/min/1.73m<sup>2</sup> (CKD stage 4, International Chronic Kidney Disease classification).</li> </ul>
<p>Alzheimer's disease</p>	<p>Means the unequivocal diagnosis of Alzheimer's disease by an appropriate medical specialist*.</p>
<p>aplastic anaemia</p>	<p>Bone marrow failure that results in anaemia, neutropaenia and thrombocytopenia; and that requires treatment with at least one of the following:</p> <ul style="list-style-type: none"> <li>• Blood product transfusion, or</li> <li>• Marrow stimulating agents, or</li> <li>• Immunosuppressive agents, or</li> <li>• Bone marrow transplantation.</li> </ul>
<p>benign tumour of the brain or spinal cord (with permanent neurological impairment or requiring specified treatment)</p>	<p>A non-cancerous tumour in the brain or spinal cord that results in neurological damage and functional impairment which an appropriate medical specialist* considers to be permanent; or requires removal through surgery.</p> <p>This excludes cysts, granulomas, cholesteatomas, malformations in or of the arteries of the brain, haematomas, and tumours on the pituitary gland.</p> <p>The underlying tumour must be confirmed by imaging studies such as a CT scan or MRI.</p>
<p>blindness (severe and permanent)</p>	<p>The severe and irreversible loss of sight in both eyes, whether aided or unaided to the extent that:</p> <ul style="list-style-type: none"> <li>• visual acuity is less than 6/60 in both eyes after correction, or</li> <li>• field of vision is reduced to 10 degrees or less of arc, or</li> <li>• a combination of visual defects resulting in the same degree of visual impairment as either blindness definition above.</li> </ul>
<p>cancer (excluding specified early-stage cancers)</p>	<p>Cancer means the confirmed diagnosis in the insured person* of the presence of one or more malignant tumours characterised by the uncontrolled growth and spread of malignant cells, and the invasion and destruction of normal tissue beyond the basement membrane as confirmed histologically by a pathologist.</p> <p>The term malignant tumour also includes leukaemia, sarcoma, multiple myeloma, lymphoma and inaccessible brain tumours described as malignant on neuroimaging.</p> <p>The following are specifically excluded:</p> <ul style="list-style-type: none"> <li>• Tumours which are histologically classified as 'pre-malignant', 'non-invasive', 'high-grade dysplasia', 'borderline' or 'having low malignant potential'.</li> <li>• All carcinoma in situ except for carcinoma in situ of the breast where total mastectomy was performed specifically to arrest the spread of malignancy and where it was considered the appropriate and necessary treatment.</li> <li>• All prostatic cancers, unless having progressed to T2 on the TNM Clinical Staging System; or histologically classified as having a Gleason Score of 7 or higher; or having resulted in the surgical removal of the prostate (where it was considered by treating doctors* to be the appropriate and necessary treatment).</li> <li>• All melanomas less than 1mm thickness as determined by histological examination and which is also less than Clark Level 3 depth of invasion.</li> <li>• All Hyperkeratosis or Basal Cell Carcinoma (BCC) of skin and Squamous Cell Carcinoma (SCC) of skin unless having spread to the bone, lymph node, or another distant organ.</li> </ul>

	<ul style="list-style-type: none"> <li>• Chronic lymphocytic leukemia Rai Stage 0.</li> <li>• All cancers of the thyroid, unless having progressed to at least TNM classification T2N0M0 or where a total thyroidectomy has been undertaken and was considered to be an appropriate and necessary treatment.</li> <li>• All cancers of the bladder, unless having progressed to at least TNM classification T1N0M0.</li> <li>• Cutaneous lymphoma confined to the skin.</li> <li>• Dermatofibrosarcoma protuberans confined to the skin and that has not spread to the lymph nodes or distant sites.</li> <li>• Polycythemia Rubra Vera, unless requiring cytoreductive therapy and/or surgery.</li> <li>• Essential thrombocytopenia, unless requiring cytoreductive therapy or surgery.</li> <li>• Pituitary Neuroendocrine Tumours (PitNETs) unless invasion of surrounding bone structures or metastasis is unequivocally proven histologically and/or radiologically by Magnetic Resonance Imaging (MRI).</li> <li>• Thymoma gland tumours without evidence of invasion and destruction of surrounding tissue</li> </ul> <p>The diagnosis must be confirmed by a doctor* or medical specialist*</p>
cardiomyopathy – severe and permanent	<p>Impaired ventricular function from various causes resulting in either:</p> <ul style="list-style-type: none"> <li>• permanent and irreversible physical impairments to the degree of at least Class 3 of the New York Heart Association classification of cardiac impairment, or</li> <li>• a persistent left ventricular ejection fraction of less than or equal to 35% despite optimal medical therapy.</li> </ul> <p>Cardiomyopathy directly related to alcohol abuse is excluded.</p>
chronic kidney failure – with specified treatment	<p>End stage renal failure presenting as chronic irreversible failure of both kidneys to function, which requires permanent renal dialysis or renal transplantation.</p> <p>The definition will also be met if, despite the need for regular dialysis or a kidney transplant as confirmed by a nephrologist, the insured chooses renal supportive care.</p>
chronic liver failure	<p>End stage irreversible liver failure with permanent jaundice, chronic ascites or hepatic encephalopathy. Liver disease caused by alcohol or drug abuse is specifically excluded.</p>
chronic lung failure	<p>Means chronic irreversible lung disease that has progressed to an advanced stage with either a PaO<sub>2</sub> consistently less than 55mmHg or requiring long term oxygen therapy of at least 15 hours per day, as certified by an appropriate medical specialist*.</p>
coronary artery bypass graft surgery	<p>The actual undergoing of bypass graft surgery, either through an open-heart operation or through a ‘key-hole’ surgical technique, to one or more blocked coronary arteries. The procedure should be considered medically necessary by a cardiologist</p>
dementia with significant cognitive impairment	<p>The unequivocal diagnosis of dementia resulting in permanent, irreversible and significant cognitive impairment. Significant cognitive impairment means the permanent deterioration in the insured person’s* Mini-Mental State Examination (MMSE) score to 20 or less, or equivalent severity using another appropriate cognitive assessment tool.</p>
encephalitis - with permanent neurological impairment	<p>The diagnosis of acute inflammatory disease of the brain tissue (viral, bacterial or autoimmune) resulting in:</p> <ul style="list-style-type: none"> <li>• permanent neurological impairment and</li> <li>• a permanent and irreversible inability to perform at least one of the activities of daily living* without the assistance of another person.</li> </ul> <p>The diagnosis must be confirmed by an appropriate medical specialist*.</p>
heart attack	<p>The death of a portion of the heart muscle due to a sudden lack of adequate blood supply to that area, where the diagnosis is supported by the typical rise and/or fall of cardiac biomarker blood tests</p>

(Troponin T, Troponin I or CK-MB) with at least one level above the 99th percentile of the upper reference limit and:

- Acute symptoms of coronary ischaemia (e.g. chest pain); or
- ECG changes indicative of new ischaemia (new ST-segment-T wave changes, pathological Q waves or new left bundle branch block);

If a heart attack cannot be confirmed using the above metrics, we'll consider a claim based on evidence that the attack has reduced the 'Ejection Fraction' (the volume of blood pumped out of the heart chamber with each heartbeat) to less than 50%, measured 90 or more days after the attack.

If the above evidence is inconclusive or superseded by technological advances, we will consider other appropriate and medically recognised tests that unequivocally diagnose that a myocardial infarction of the degree of severity or greater as outlined above has occurred.

The following are excluded:

- Other acute coronary syndromes including but not limited to angina pectoris
- Other causes of troponin increase in non-obstructive coronary arteries including myocarditis or coronary spasm where there is no evidence of infarction
- Heart muscle injury as a result of an elective procedure for coronary artery disease; and
- Any cardiomyopathy\* including Takotsubo cardiomyopathy\*.

heart valve surgery	<p>The undergoing of surgery to replace or repair heart valves because of heart valve defects or abnormalities.</p> <p>This does not include triple vessel angioplasty*, intra-arterial procedures or non-surgical techniques.</p>
Idiopathic Parkinson's disease	<p>The unequivocal diagnosis of idiopathic Parkinson's disease by an appropriate consultant neurologist where the condition cannot be controlled by medication and is characterised by the clinical manifestation of one or more of the following:</p> <ul style="list-style-type: none"> <li>• rigidity</li> <li>• tremor</li> <li>• akinesia.</li> </ul> <p>All other types of Parkinsonism are excluded.</p>
invasive meningococcal disease – with significant, permanent functional impairment	<p>Means the unequivocal diagnosis of Meningitis and/or meningococcal disease including meningococcal septicaemia causing either:</p> <ul style="list-style-type: none"> <li>• a 25% 'whole person' impairment that is permanent; or</li> <li>• the total and irreversible inability to perform at least one of the activities of daily living* without the assistance of another adult person</li> </ul>
intensive care treatment – requiring specified treatment and length of stay	<p>Means the insured person* requires continuous mechanical ventilation by means of tracheal intubation for seven consecutive days (24 hours per day) in an authorised intensive care unit of an acute care hospital because of sickness or injury.</p> <p>ICU admission due to self-inflicted injury, alcohol abuse or drug overdose are excluded.</p>
loss of hearing in both ears (profound and permanent, including requiring cochlear implant)	<p>A confirmed diagnosis of profound, irreversible hearing loss in both ears with any one of the following:</p> <ul style="list-style-type: none"> <li>• best corrected hearing threshold of 91 decibels or greater in the better ear, averaged at frequencies from 500 hertz to 3,000 hertz; or</li> <li>• requiring or undergoing cochlear implant due to loss of hearing in both ears.</li> </ul> <p>The diagnosis must be made by an appropriate medical specialist*</p>
loss of limbs – total and permanent	<p>The complete and irreversible loss of use of two limbs.</p> <p>Where limb means the whole hand, whole foot, whole arm or whole leg.</p>

	For the purpose of this definition 'loss of use' means the inability to use the affected limb in a meaningful or practical way, such as holding, grasping, typing, carrying, standing or walking.
major burns - of specified severity and requiring specified treatment	Full thickness burns to at least: <ul style="list-style-type: none"> <li>• 20% of the total body surface area as measured by The Rule of Nines or the Lund &amp; Browder Body Surface Chart, or</li> <li>• 100% of the face requiring surgical debridement and/or grafting, or</li> <li>• 100% of both hands requiring surgical debridement and/or grafting.</li> </ul>
major organ transplant surgery	The insured person* is undergoing or has been placed on the organ transplant waiting list in New Zealand or Australia for a transplant from a human donor of one or more of the following complete organs: <ul style="list-style-type: none"> <li>• kidney</li> <li>• liver</li> <li>• heart</li> <li>• lung</li> <li>• pancreas</li> <li>• small bowel</li> <li>• bone marrow.</li> </ul>
motor neurone disease	The unequivocal diagnosis of motor neurone disease by an appropriate consultant neurologist and confirmed by neurological investigations. Motor neurone disease caused by drug and alcohol abuse is specifically excluded.
multiple sclerosis – with specified severity	The unequivocal diagnosis of multiple sclerosis by an appropriate medical specialist* resulting in: <ul style="list-style-type: none"> <li>• the permanent inability to perform without assistance at least one of the activities of daily living*, or</li> <li>• a score of at least 7.5 under the expanded disability status scale (EDSS).</li> </ul>
muscular dystrophy	The unequivocal diagnosis of muscular dystrophy by an appropriate consultant neurologist. Muscular dystrophy caused by drug and alcohol abuse is specifically excluded.
out of hospital cardiac arrest - unrelated to a medical procedure	The abrupt and complete loss of heart function, breathing and consciousness; unrelated to a medical procedure and occurring out of hospital because of: <ul style="list-style-type: none"> <li>• Cardiac asystole; or</li> <li>• Ventricular fibrillation with or without ventricular tachycardia</li> </ul> <p>The cardiac arrest must be documented by an electrocardiogram or other medical evidence considered reasonable e.g., ambulance or hospital medical report.</p>
paralysis – total and permanent	Means total and permanent loss of use of two or more limbs caused by permanent damage to the nervous system. This includes, but is not limited to, Hemiplegia, Diplegia, Paraplegia, and Quadriplegia/Tetraplegia. The diagnosis must be confirmed by a doctor* or medical specialist* <ul style="list-style-type: none"> <li>• Hemiplegia - means the total and permanent loss of use of one side of the body (such as one arm and one leg of the same side) caused by permanent damage to the nervous system.</li> <li>• Diplegia - means total and permanent loss of use of symmetrical parts of the body (such as both arms or both sides of the face) caused by permanent damage to the nervous system.</li> <li>• Paraplegia - means the total and permanent loss of use of both legs caused by permanent damage to the nervous system. Quadriplegia/Tetraplegia - means the total and permanent loss of use of both arms and both legs caused by permanent damage to the nervous system.</li> <li>• Quadriplegia/Tetraplegia - means the total and permanent loss of use of both arms and both legs caused by permanent damage to the nervous system.</li> </ul>
pneumonectomy	Means the actual undergoing of surgery to remove an entire lung.

<p>pulmonary hypertension (Idiopathic and Familial) – of specified severity</p>	<p>Means unequivocal diagnosis of pulmonary arterial hypertension, either idiopathic or familial in origin, with irreversible physical impairment of at least Class III of the World Health Organisation Functional Classification of Pulmonary Hypertension.</p> <p>If the WHO Functional Classification scales are reviewed or superseded, we will consider other appropriate and medically recognised tests that unequivocally diagnose that a pulmonary hypertension of the degree of severity or greater as outlined above has occurred.</p>
<p>severe rheumatoid arthritis - with specified treatment</p>	<p>The confirmed diagnosis of severe rheumatoid arthritis that:</p> <ul style="list-style-type: none"> <li>• has not responded to at least six months of intensive treatment with conventional therapy (including non-biologic disease-modifying anti-rheumatic drugs), and</li> <li>• has not adequately responded (as measured by current continuing Pharmac authority criteria) to a minimum of 12 weeks of treatment with at least one biologic disease-modifying anti-rheumatic drug or JAK inhibitor.</li> </ul> <p>Degenerative osteoarthritis and all other arthritis are excluded.</p>
<p>stroke - in the brain resulting in specified impairment</p>	<p>The rapid loss of brain function caused by a lack of blood flow to the brain because of blood vessel blockage or haemorrhage (blood loss).</p> <p>You're covered if the insured person* has suffered a stroke, where neurological symptoms have persisted for more than 24 hours and where there is resulting brain tissue infarction or intracranial or subarachnoid haemorrhage clearly evidenced by MRI, PET, angiogram, CT scan or other relevant diagnostic technique.</p> <p>Your cover does not extend to these less severe, non-permanent or reversible disturbances of brain function:</p> <ul style="list-style-type: none"> <li>• Transient ischemic attack, sometimes called a 'mini stroke', caused by a disturbance of blood supply to part of the brain</li> <li>• Motor or sensory disorders including for example loss of sensation, impaired speech or vision, paralysis, tremor or muscle weakness</li> <li>• Migraine or headaches</li> </ul> <p>Your cover also does not extend to brain tissue damage or disturbances in brain function caused by a head injury.</p>
<p>systemic lupus erythematosus (SLE) – with confirmed lupus nephritis of specified severity</p>	<p>Means the unequivocal diagnosis of SLE by an appropriate medical specialist*.</p> <p>The criteria for diagnosis should be based on the American College of Rheumatology (ACR) criteria and at least 4 of the classification criteria must be met.</p> <p>In addition, the diagnosis of SLE must be confirmed by renal changes as measured by a renal biopsy, that it is class 3 to 6 of the WHO classification of lupus nephritis and be associated with persisting proteinuria (more than 2+).</p> <p>If these criteria are reviewed or superseded, we will consider other appropriate and medically recognised tests that unequivocally diagnose lupus of the degree of severity or greater as outlined above has occurred.</p>
<p>severe systemic sclerosis</p>	<p>Means the unequivocal diagnosis of systemic sclerosis by an appropriate medical specialist* causing the total and irreversible inability to perform any one of the activities of daily living* without assistance of another adult person.</p>
<p>thoracic or Abdominal Aorta (excluding its branches) repair–</p>	<p>Means the repair or correction of any narrowing, dissection, rupture or aneurysm of the thoracic or abdominal aorta (but not any of its branches) either through open thoracic or abdominal surgery or Endovascular Aneurysm Repair (EVAR).</p> <p>Angioplasty and other non-surgical techniques are excluded.</p>



with specified treatment	
triple vessel angioplasty	The actual undergoing of coronary artery angioplasty that's considered medically necessary to correct or treat a narrowing or blockage of three or more coronary arteries within the same procedure.
total and permanent loss of speech	The total and permanent loss of the ability to produce intelligible speech. Loss of speech due to psychological reasons is excluded.

## Contact Us

Contact us with questions about your policy.

contact us	Any time by emailing <a href="mailto:ask@pinnaclelife.co.nz">ask@pinnaclelife.co.nz</a> Call us on 0800 22 22 23 or internationally on +64 9 522 5515. <a href="http://www.pinnaclelife.co.nz">www.pinnaclelife.co.nz</a>
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SAMPLE

## Insured person's details

first name	Susie	middle name	
last name	Sample	phone number	021456789
email address	sample@sample.co.nz		
address	335 Willis Street	suburb	
city	Wellington	postal code	6011
country	New Zealand	doctors name	

## How you answered your application

when you applied for this policy on [07 October 2024](#) we asked you, [Susie](#), the following questions. Included below are the answers you gave us;

you are	Female
have you smoked tobacco or any other substance in the past 12 months?	No
you live in	New Zealand
you have a	NZ passport / NZ citizenship
your birthdate is	05 June 1985
your height is	170cm
your weight is	65kg
Have you had <b>cancer</b> of any kind, including melanoma, skin cancer, a malignant tumour, leukaemia, lymphoma, any tumour of the brain or spinal cord, or non-invasive forms of cancer such as CIS or had any abnormal cervical smear such as CIN?	No
Have you ever been diagnosed with <b>Diabetes</b> , a pre-diabetic condition, or Impaired Glucose Tolerance?	No
Do you have any <b>blood disorder</b> including haemophilia, anaemia or haemochromatosis?	No
Have you ever been diagnosed with high <b>blood pressure</b> ?	No
Have you ever been diagnosed with high <b>cholesterol</b> ?	No
Have you ever had a <b>heart or vascular</b> problem including a stroke, heart attack, rheumatic fever, heart murmur, heart valve problem, chest pain or heart palpitations?	No
Have you had any <b>gastro-intestinal</b> problems associated with your liver, gall bladder, stomach, bowel or colon, including hepatitis B or C?	No
Have you been diagnosed with a <b>kidney or bladder</b> problem including kidney failure, nephritis, pyelitis or lupus nephritis?	No
Have you ever been diagnosed with a <b>breathing or lung</b> problem including Covid-19, asthma, emphysema, chronic obstructive airways disease, TB, cystic fibrosis or sleep apnoea?	No
Have you ever been diagnosed with a <b>neurological</b> disorder including paralysis, RSI, chronic fatigue, chronic pain, epilepsy, MS, Parkinson's, eye problem or hearing impairment?	No
Have you ever been diagnosed with a <b>muscular-skeletal</b> or joint problem including arthritis, gout, lupus, osteoporosis or tendonitis?	No
Within the past 5 years have you had a <b>mental health</b> or psychological condition including depression, anxiety or stress that required professional advice, treatment or time off work?	No
Do you usually drink more than 8 standard <b>alcoholic drinks</b> in a single session or more than 28 alcoholic drinks in a typical week?	No

In the past 5 years, have you injected or otherwise used <b>illegal drugs</b> ?	No
To the best of your knowledge, are you infected with <b>HIV</b> or are you carrying antibodies to HIV, or have you ever engaged in any high risk activity related to HIV?	No
Do you have plans to travel outside New Zealand, within the next 12 months?	No
Aside from what you've already told us, do you have any other medical condition for which you're currently <b>seeking medical advice</b> , receiving treatment, awaiting surgery or undergoing tests?	No
Do you earn your living from any of these <b>risky occupations</b> ?	
a helicopter pilot, charter pilot or aerial photographer	No
a person handling explosives	No
a person working externally more than 15m above ground	No
a professional boxer	No
a professional hunter	No
a professional racing driver	No
a professional scuba diver	No
a professional stunt person	No
a steeplechase jockey	No
an underground miner	No
an agricultural pilot	No
an offshore oil, gas or petroleum worker	No
none of these	Yes
Have you ever had a <b>parent, brother or sister</b> who, prior to age 60, was diagnosed with cancer, heart disease, stroke, diabetes, kidney disease, multiple sclerosis (MS); muscular dystrophy, Parkinson's, motor neurone disease, Huntington's disease or familial polyposis?	No
Do you participate in any of these <b>recreational activities</b> ?	
competitive boxing	No
competitive car, bike or powerboat racing	No
hang gliding or other self launch flying	No
micro-light or ultra-light flying	No
mountaineering, outdoor rock climbing or abseiling	No
private fixed wing or helicopter flying exceeding 100hrs per year	No
scuba diving deeper than 40 meters or any cave or wreck diving	No
skydiving or parachuting	No
trans-ocean racing	No
recreational quad-biking or trail-bike riding	No
white water rafting exceeding 80hrs per year	No
rugby (any code) or soccer	No
none of these	Yes

## Declaration

You must be absolutely truthful with us and disclose all information that is relevant to our decision to provide you cover. If not, we may refuse to pay any claim, and/or change the terms of this policy, or be entitled to void this policy.

- I, [Susie Sample](#), confirm that effective [07 October 2024](#)
- the information in this application is true and correct, and
  - I am not aware of any other information which could lead me to have a shortened lifespan or to suffer any of the illnesses or conditions covered under this policy, and
  - I am aware of no other medical, lifestyle or family history information which might be relevant to Pinnacle Life's decision to offer me cover, and
  - I have read and understood this policy, and I agree to abide by the terms as set out in this policy document, and
  - I will notify Pinnacle Life of any changes that occur to my state of health or lifestyle or family history before the new policy start date if there is any delay to the start date of my policy, and
  - I understand that Pinnacle Life may review my application even after my policy becomes active. Pinnacle Life may contact me within 14 days with questions and will notify me if my answers change the terms and conditions of the policy.
- I, [Susie Sample](#) cannot confirm, because:
- There are other circumstances which might be relevant to Pinnacle Life's decision to provide me cover. I would like Pinnacle Life to contact me.



Freeport Authority No. 114353

pinnaclelife.co.nz



Pinnacle Life  
PO Box 1471  
Auckland 1140

### Change the owner of your policy Fold last and seal down

Only the current policy owner(s) can authorise this change of ownership. If there are more than 2 policy owners, you can print off and use as many of these forms as you need. If you want to add an owner and continue being one yourself, you will need to fill in your details as both a current and a new owner. To own this policy, you must be at least 18 years old. A Trust cannot own a policy but the Trustees can, provided that all the Trustees are owners. In this case, we'll need a copy of the Trust deed.

**All the owners' signatures must be witnessed but owners cannot witness each other's signatures.**

PINNACLE LIFE ONLY

policy number	date registered	
date of change	authorised signature	
<b>current owner 1</b>		<b>current owner 2</b>
owner's name	owner's name	
signature	signature	
witness' name	witness' name	
witness' signature	witness' signature	
witness' occupation	witness' occupation	
witness' address	witness' address	
<b>new owner 1</b>		<b>new owner 2</b>
new owner's name	new owner's name	<small>Fold up first</small>
address	address	
occupation	occupation	
email address	email address	
mobile phone number	mobile phone number	
signature	signature	
witness' name	witness' name	
witness' signature	witness' signature	