



Supplementary Product Disclosure Statement ('SPDS')

Date of issue: 16 February 2004

This is an SPDS for the Aviva Protection Range Product Disclosure Statement ('PDS') dated 1 October 2003.

You must read this SPDS together with the Aviva Protection Range Product Disclosure Statement – dated 1 October 2003.

This SPDS and PDS cover two separate financial products: life insurance and superannuation.

The life insurance product is called the Aviva Protection Range and is issued by Norwich Union Life Australia Limited (ABN 34 006 783 295); Australian Financial Services Licence Number (effective 1 March 2004): 241686.

The superannuation product is called the Norwich Union Superannuation Trust and is issued by NULIS Nominees (Australia) Limited (ABN 80 008 515 633) ('The Trustee'); Australian Financial Services Licence Number (effective 1 March 2004): 236465

Norwich Union Life Australia Limited and NULIS Nominees (Australia) Limited take full responsibility for the PDS and SPDS.

This SPDS highlights the following:

- (i) Inclusion of the Australian Financial Services Licence Number (as indicated above)
- (ii) Each issuer takes full responsibility for the PDS (as indicated above),
- (iii) Inclusion of a new benefit: Medically Acquired HIV Infection under the Recovery Money and Income Protection Gold contracts,
- (iv) Replacement and inclusion of certain Medical Definitions in relation to Recovery Money and Income Protection contracts,
- (v) Changes to the features, definitions and exclusions,
- (vi) Changes to the level of cover for Executive policies, and
- (vii) Changes to the policy fee

Inclusion of new benefit

Critical Illness Benefit (standard) (Pages 9,14 and 17)

The critical illnesses covered are extended to include Medically Acquired HIV Infection (as defined).

Critical Conditions Benefit (standard) (Page 22)

The critical conditions covered are extended to include Medically Acquired HIV Infection (as defined).

Medical Definitions (commencing page 44)

Benign Intracranial Tumour (Page 44 replace with the following)

Means a non cancerous tumour on the brain giving rise to symptoms of increased intracranial pressure such as papilloedema, mental symptoms seizures and sensory impairment as confirmed by a consultant Neurologist. The tumour must result in permanent neurological deficit causing at least 25% impairment of whole person function.

The presence of the underlying tumour must be confirmed by imaging studies such as CT Scan or MRI (Magnetic Resonance Imaging). Cysts, granulomas, cholesteatomas, malfunctions in or of the arteries or veins of the brain, haematomas and tumours in the pituitary gland or spine are not covered.

Cancer (Page 44 replace with the following)

Means the presence of a malignant tumour, including leukaemia, malignant lymphoma and other haemopoietic malignancies.

The tumour must be confirmed by histological examination and must:

- Require major interventionist therapy including radiotherapy, chemotherapy, biological response modifiers or any other major treatment, or
- Be totally incurable

The following cancers are specifically excluded

- Tumours treated only by endoscopic procedures.
- Carcinoma in situ. This includes Dukes' A Stage Colorectal Cancer. Papillary Carcinoma in situ of the breast is covered under the Policy. Ductal Carcinoma in situ of the breast is covered if it results in the removal of the entire breast. The procedure must be performed specifically to arrest the spread of malignancy, and be considered appropriate and necessary treatment.
- Prostatic cancers which are histologically described as TNM Classification T1 (including T1 (a) or T1 (b)) or are of another equivalent or lesser classification.
- All skin cancers other than malignant melanoma of greater than Clark Level 2 depth or invasion equal to or greater than 1.5mm thickness.

Liver Disease (Page 45 replace with the following)

Means permanent liver failure, together with permanent jaundice, ascites, endephalopathy.

Liver damage secondary to alcohol usage or intravenous drug use is excluded.

Medically Acquired HIV Infection (new definition, to be included on page 46)

Means accidental infection with Human Immunodeficiency Virus (HIV) where the virus was acquired in Australia by the life insured from one of the following necessary events conducted by a recognised and registered medical practitioner:

- A blood transfusion;
- Transfusion with blood products;
- Organ transplant to the life insured;
- Assisted reproductive techniques;
- A medical procedure or operation performed by a medical practitioner

Any event that potentially may give rise to a claim must be reported to us in writing within thirty (30) days of the event. This advice will require a supporting negative HIV Test performed on material taken after the event date. Blood product will need to be made available for independent testing.

Exclusion - Medically Acquired HIV Infection

No payment will be made where a Cure has become available prior to the event causing the infection or where the life insured has elected not to take any Vaccine available prior to the event.

"Cure" means any Australian Government approved treatment which renders HIV inactive and non-infectious.

"Vaccine" means any antigenic preparation approved by the Australian Government and recommended by a government authority for prophylactic use in the life insured's occupation to produce immunity to the Human Immunodeficiency Virus.

Paralysis (new definition, to be included on page 47), The definitions of Diplegia, Hemiplegia, Paraplegia & Quadriplegia are to be removed.

Means the total and permanent loss of function of 2 or more limbs due to spinal cord injury or disease or brain injury or disease. This includes but is not limited to Diplegia, Hemiplegia, Paraplegia, Quadriplegia and Tetraplegia.

Major Burns (Page 46 replace with the following)

Means tissue injury caused by thermal, electrical or chemical agents causing third degree burns to:

- 20% or more of the Body Surface Area as measured by the "rule of 9" of the Lund and Browder Body Surface Chart; or
- the whole of both hands, requiring surgical debridement and/or grafting; or
- the whole of the face, requiring surgical debridement and/or grafting.

Stroke (Page 47 replace with the following)

Means any cerebrovascular accident or incident producing neurological sequelae. Evidence of infarction of brain tissue, intracranial and/or subarachnoid haemorrhage or embolisation from an extracranial source is required. Transient ischaemic attacks, reversible ischaemic neurological deficit, cerebral symptoms due to migraine and intracranial bleeding caused by a trauma are each excluded.

Changes to the features, definitions and exclusions

Future Insurability (standard) (Page 5 replace with the following)

When significant events happen in life, you can increase your death Sum Insured without having to provide further medical evidence.

The death Sum Insured may be increased when:

- You marry.
- You have a child or legally adopt one.
- You take out a mortgage to buy your first home.
- You receive an increase in annual salary of at least 10%

You must apply for this increase within 30 days of the first renewal date following the defined event. We will require proof of the defined event.

You may only increase your death Sum Insured once under this feature in any twelve (12) month period. You may increase your Sum Insured by 25% or \$75,000 or 5 times the salary increase, whichever is lower. The maximum total amount you can increase your death Sum Insured under this feature over the life of the policy is the lesser of:

- The amount of death Sum Insured under your policy excluding CPI increases and increases effected under this feature; and
- \$1,000,000.

The feature cannot be exercised if at the time of your request:

- You are older than 50 years of age
- You have previously been accepted by us with special conditions affecting the premium rates
- The premiums are being waived under the Waiver of Premium Option, or
- You are currently entitled to make a claim for a Terminal Illness or Critical Illness Benefit under a policy you currently hold with us.

Future Insurability Critical Illness (standard) (This is a new feature, to be inserted on pages 11, 14 and 17 within "The features")

When significant events happen in life, you can increase your critical illness Sum Insured without having to provide further medical evidence.

The critical illness Sum Insured may be increased when:

- You marry.
- You have a child or legally adopt one.
- You take out a mortgage to buy your first home.
- You receive an increase in annual salary of at least 10%

You must apply for this increase within 30 days of the first renewal date following the defined event. We will require proof of the defined event.

You may only increase your critical illness Sum Insured once under this feature in any twelve (12) month period. You may increase your Sum Insured by \$25,000 or the original Sum Insured, whichever is lower. The maximum total amount you can increase your critical illness Sum Insured under this feature over the life of the policy is the lesser of:

- The amount of critical illness Sum Insured under your policy excluding CPI increases and increases effected under this feature; and
- \$1,000,000.

The feature cannot be exercised if at the time of your request:

- You are older than 50 years of age
- You have previously been accepted by us with special conditions affecting the premium rates
- The premiums are being waived under the Waiver of Premium Option, or
- You are currently entitled to make a claim for a Terminal Illness or Critical Illness Benefit under a policy you currently hold with us.

This option is only available where the initial critical illness Sum Insured is \$1,000,000 or less.

In respect of Recovery Money and Flexible Recovery Money (including Executive versions) the critical illness Sum Insured cannot exceed the amount of death Sum Insured.

Maximums (Page 12 replace with the following)

Death Sum Insured: There are no maximum limits in respect of death cover.

Disability Sum Insured: A maximum disability Sum Insured of \$2,500,000 applies.

Critical Illness Sum Insured: The maximum level of critical illness cover is \$1,500,000 in aggregate with us and under any similar policy with any other insurer. Additional critical illness cover will not be issued in excess of this aggregate limit. The critical illness Sum Insured cannot exceed the amount of death Sum Insured.

Exclusions (Page 7, replace 3rd paragraph with the following)

Neither the Disability Benefit nor the Waiver of Premium Option will be payable in the event of attempted suicide, self-inflicted illness or injury or participation in insurrection.

Exclusions (Page 12, replace 5th paragraph with the following)

Neither the Disability Benefit nor the Waiver of Premium Option will be payable in the event of attempted suicide, self-inflicted illness or injury or participation in insurrection.

Exclusions (Page 15, replace 4th paragraph with the following)

Neither the Disability Benefit nor the Waiver of Premium Option will be payable in the event of attempted suicide, self-inflicted illness or injury or participation in insurrection.

Scheduled Injury Benefit (standard) (Page 22 replace with the following)

If you sustain any of the following injuries, we will pay you a Scheduled Injury Benefit equal to your monthly Sum Insured even if you are working. The Scheduled Injury Benefit is paid monthly in advance commencing upon receipt of the claim form verifying the injury, and will stop on the earlier of the expiry of the Scheduled Injury Benefit Payment Period, or the last day of the Benefit Period, whichever occurs first.

Total and Permanent Loss of:	Payment period (months)
Use of your legs or your legs and arms due to spinal cord injury or disease resulting in paralysis	60
Both feet or both hands or sight in both eyes	24
Any combination of two of a hand, a foot and sight in one eye	24
One leg or one arm	18
One hand or one foot or sight in one eye	12
The thumb and index finger of same hand	6

Fracture of the:	Payment period (months)
Thigh	3
Pelvis	3
Skull (except bones of face or nose)	2
Upper arm	2
Shoulder bone	2
Jaw	2
Leg (excluding ankle)	2
Knee cap	2
Forearm (above the wrist)	1 1/2
Collarbone	1 1/2

Schedule Injury Benefits commence upon receipt of the claim form verifying the Scheduled Injury. If you are Totally Disabled at the end of the payment period, you must wait until your Waiting Period expires before Total Disability benefits become payable.

Increasing Claim Benefit (optional at an additional cost) (Page 23 replace with the following)

After you have been receiving a benefit for 12 months, the amount of benefit will be increased by the lesser of 10% p.a. or the increase in the Consumer Price Index (CPI).

Total Disability or Totally Disabled (Page 27 replace with the following)

Means that solely because of Injury or Sickness:

- (a) you are not capable of doing at least one of the important duties of your regular occupation; and
- (b) you are not working in any gainful occupation; and
- (c) you are following the advice of a medical practitioner.

An important duty is one that involves 20% or more of your overall tasks.

However if you have been receiving payments under the Total Disability Benefit for two years (including as a result of the Recurrent Claim Benefit), then part (a) of the above definition is replaced by: "you are unable to work in any occupation for which you are reasonably suited by training, experience or education; and".

Conditions of cover (Page 32 replace Conditions 3 and 4 with the following)

3. Conditions Specific to Accidental Critical Injury

"Accidental Critical Injury" means you suffer one of the following critical injuries, for the first time, as a result of and within 90 days of an Accident:

Blindness, Coma, Deafness, Major Burns, Major Head Trauma, Paralysis and total and irrecoverable loss of the use of two limbs, as defined on pages 44 to 47.

The benefit payable is the lower of \$500,000 and the proposed disability Sum Insured or critical illness Sum Insured, as appropriate. The Buy Back Options do not apply to Accidental Critical Injury.

4. Conditions specific to Accidental Total Disability

"Total Disability" has the same meaning as in the relevant policy document. No benefit is payable:

- if the Total Disability arises from an act of war, or
- in respect of any Pre-existing condition, or
- if the occupation or pastimes of the person to be insured would not be accepted for cover by us under our normal underwriting guidelines.

The benefit payable is the lower of \$5,000 per month and the proposed disability Sum Insured. The benefit is payable each month that you remain continuously Totally Disabled after the end of the applied for waiting period, up to a maximum of twelve months.

The total monthly benefit will not exceed 75% of Pre-Disability Earnings for Income Gold or Excell and the life insured's actual Business Expenses, taking into account all other disability benefits payable

Level of Cover requirements for Executive policies (Pages 7, 12, 15 & 16)

Level of Cover (Page 7 replace with the following)

Minimums

Aviva Protection – Life

There is no minimum Sum Insured requirement.

Aviva Protection – Executive Life

The minimum death Sum Insured is \$500,000.

Level of Cover (Page 12 replace with the following)

Minimums

Aviva Protection – Recovery Money

A minimum critical illness Sum Insured of \$10,000 applies.

Aviva Protection – Executive Recovery Money

A minimum critical illness Sum Insured of \$10,000 and a minimum death Sum Insured of \$500,000 apply.

Level of Cover (Page 15 replace with the following)

Minimums

Aviva Protection – Flexible Recovery Money

A minimum critical illness Sum Insured of \$10,000 applies.

Aviva Protection – Flexible Executive Recovery Money

A minimum critical illness Sum Insured of \$10,000 and a minimum death Sum Insured of \$500,000 under the Aviva Protection - Life apply.

Level of Cover (Page 17 replace with the following)

Minimums/Maximums

There are no minimum Sum Insured requirements for the Aviva Protection – Stand Alone Recovery Money contract, but for the Aviva Protection – Executive Stand Alone Recovery Money contract a minimum Sum Insured of \$500,000 applies.

The maximum Sum Insured is \$1,500,000 in aggregate with us and under any similar policy with any other insurer.

Additional critical illness cover will not be issued in excess of this aggregate limit.

Policy fee (Page 35 replace with the following)

Policy fee

An annual policy fee applies to the policies, with the current fee applying until 31/12/2004. The policy fee can be periodically amended, but never at a rate greater than the rate of increase in the Consumer Price Index (CPI) since any previous amendment in the policy fee for equivalent policies.

The policy fees are:

Life (including Executive version)	\$89.60
Recovery Money (including Executive version)	\$89.60
Flexible Recovery Money (including Executive version)	\$0.00
Stand Alone Recovery Money (including Executive version)	\$89.60
Income (all policies)	\$89.60

Amendment to Aviva Protection Range application form



I/We have received and read the Supplementary Product Disclosure Statement dated 16/02/2004, to the Aviva Protection Range Product Disclosure Statement dated 1 October 2003.

Life Insured (Name)

Signature

Date

Policy Owner (Name)

Signature

Date

Please return with your application or as otherwise instructed

Norwich Union Life Australia Limited (ABN 34 006 783 295) Australian Financial Services Licence Number (effective 1 March 2004): 241686

Norwich Union Superannuation Trust: NULIS Nominees (Australia) Limited (ABN 80 008 515 633) ('The Trustee') Australian Financial Services Licence Number (effective 1 March 2004): 236465

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