



Payment Advice

[SAVE](#)[PRINT](#)

1. YOUR POLICY

Policy owner(s)

Policy number

Phone number

(Mobile)

Phone number

(Home)

Email*

*If we have sent you a form that has been filled in with your phone number and email address, please check that these details are still current. If not, please provide your current contact details.

2. COMPLETE FOR POLICIES OWNED BY TAL SUPER

Please nominate your contribution type

Employer voluntary contributions*

Employer Name:

Employer ABN:

or

Employer WPN:

*Employer contributions will only be accepted via SuperStream unless a specific exemption applies such as an insurance contribution made by an employer outside its normal payroll process.

Non-Employer contributions

☐

Personal

☐

Spouse (Not applicable to TAL Super members)

TAL Life Limited ABN 70 050 109 450 | AFSL 237848

Fund: TAL Super – is a plan within the Retail Division in the Mercer Super Trust
ABN 19 905 422 981

Trustee: Mercer Superannuation (Australia) Limited
ABN 79 004 717 533 | AFSL 235906

3. PAYMENT OPTIONS

Please select a payment option (credit/debit card or direct debit from your nominated account).

☐ **Credit/Debit card payment**

Account holder(s) name

Type of card ☐ Visa ☐ MasterCard

Expiry date

Card number

This authority covers ☐ This and future payments* ☐ This payment only

*I/We request that you debit the account above with any amounts which TAL Life Limited may charge me/us until further notice, which I/we will provide to you in writing. TAL will continue to debit your card beyond the credit card expiry date until you contact TAL and notify of your intention to cease the arrangement.

☐ **Direct debit request****

Account holder(s) name

Name of financial institution

BSB number

Account number

This authority covers ☐ This and future payments* ☐ This payment only

*I/We request that you debit the account above with any amounts which TAL Life Limited (User ID 245397) may debit or charge me/us through the Bulk Electronic Clearing System in accordance with the payment arrangement between us until further notice, which I/we will provide to you in writing.

By signing this form, I/we confirm and agree that:

- I am/we are the account holder(s)
- this Direct Debit Request is governed by the Direct Debit Request Service Agreement set out on page 4 of this form, and
- I am and TAL Life Limited are bound by all of those terms and conditions.

** TAL Super* Policies are not able to accept a SMSF bank account to pay premiums by Direct Debit. If you wish to pay premiums for your TAL Super policy through your SMSF please speak to your Financial Adviser.

4. PAYMENT FREQUENCY

If you have chosen to have future payments debited from your card or account (see Question 2), please indicate the frequency:

☐ Monthly ☐ Quarterly ☐ Half-yearly ☐ Yearly

5. AUTHORISATION

Signatory 1

Full name

Signing as

☐

Individual

☐

Director

Signature

Date

DD / MM / YYYY

Signatory 2

Full name

Signing as

☐

Individual

☐

Director

Signature

Date

DD / MM / YYYY

6. PRIVACY

In this section, the words 'we' and 'our' refer to both TAL and the Trustee.

The way in which we collect, secure, hold, use and disclose personal and sensitive information (your information) is explained in the 'Your Privacy' section of the PDS and in our privacy policies. These policies can be obtained online at www.tal.com.au/privacy-policy (all policies) and www.mercer.com.au/privacy.html (TAL Super policies only) or by contacting us.

If you have any questions about the way in which your information is managed, or would like a paper copy of our privacy policies, please contact us by phone on 1300 209 088 or by email to customerservice@tal.com.au.

SUBMITTING THIS FORM

Please return your completed form and any supporting documentation to:

TAL Life Limited
GPO Box 5380
Sydney NSW 2001

CONTACTING TAL



customerservice@tal.com.au



1300 209 088



1300 351 133



tal.com.au

SAVE

PRINT

DIRECT DEBIT REQUEST SERVICE AGREEMENT

This Agreement is issued by TAL Life Limited (TAL) User ID 245397 (including as an agent of the Trustee in relation to TAL Super), to enable you to understand your rights and responsibilities when making premium payments by direct debit. Together with your Direct Debit Request, it allows TAL to debit your nominated account to meet the premiums for your policy. Please keep this Agreement in a safe place for future reference.

TAL sends the request to debit your account to your nominated financial institution on the day your premium is due. This debit will appear as 'TAL' on your bank statements. It may take your financial institution between one and three business days to process this request and withdraw the funds from your account. Please ensure that you leave sufficient funds in your account until the debit has cleared, to avoid incurring a dishonour charge from your financial institution.

How to make changes

Please contact us and allow at least 7 days' notice before your next premium due date for either:

- altering any of your direct debit or financial institution details, or
- deferring, stopping or suspending any debits, or cancelling the Agreement completely. If you do any of these, you will need to make alternative arrangements for future premiums to be paid in order to continue your policy. Alternatively, you may request to stop or cancel one or more debits by contacting your financial institution. If you do this, you may incur a fee from your financial institution.

Our commitment to you

We will ensure that we:

- will give you at least 14 days' written notice if there are any changes to the terms of this Agreement, and
- will keep all information relating to your nominated financial institution account confidential, except where required for the purposes of conducting direct debits with your financial institution, in the event of a claim or relating to an alleged incorrect or wrongful debit, or where specifically required by the law. For further information about how we handle your information, please refer to our Privacy Policy which is available free of charge from www.tal.com.au/privacy-policy or on request by contacting us.

Your commitment to us

Please ensure that:

- you check your account details against a recent bank statement,
- the account you have nominated can accept direct debits through Bulk Electronic Clearing System (BECS). Please be aware that not all accounts allow direct debits through BECS. If you are unsure, please check with your financial institution before completing your direct debit request,
- all account holders for the nominated account agree to the debiting arrangement and this Agreement,
- there are sufficient funds available in the nominated account, on the due dates, to cover the premiums. If there are insufficient funds in your account, you may incur dishonour fees from your financial institution and your policy could be cancelled. If your premium is not paid by the due date, dishonour fees will not be charged by TAL if direct debits are returned, and
- you notify us if the nominated account is transferred or closed, or the account details change.

If a premium due date falls on a weekend or a public holiday, we will automatically debit the payment on the next business day. If you are unsure about which day your account has or will be debited, you should ask your financial institution. If you want to change or cancel the Agreement, or dispute a debit, please contact our Customer Care team. In the unlikely event of a dispute not being resolved satisfactorily, you can address a formal complaint to TAL Life Limited, Reply Paid GPO Box 5380 Sydney NSW 2001. Alternatively, you can contact your financial institution for assistance.