

**Class of Policy:** Personal Accident - Declaration  
**The Insured:** Public Service Association Of New South Wales

**Policy No:** 2200100829  
**Invoice No:** 55074  
**Our Ref:** PUBLICSERV

## Family Members Personal Accident

Name Of Insured Public Service Association of NSW

Description Of Business Principally Trade Union, Property Owners and all other associated activities.

Period Of Insurance From 31 December 2018 at 4.00 pm  
 To 31 December 2019 at 4.00 pm  
 Both Local Standard Time

Nominated Persons Nominated Spouses/Partner and Dependent Children of the Public Service Association Member (s)

Scope of Cover Whilst engaged in official business and/or related travel (including direct travel to and from such activities) on behalf of, and authorised by the Insured.

Age Limitation Between the ages of 16 and 65

Aggregate Limits of Liability General \$ 5,000,000  
 Non-Charter Aircraft Travel \$ 1,000,000

### Cover Sections

<b>Section A: Death &amp; Capital Benefits, Events 1-19</b> Nominated Spouses/Partner	\$60,000
Section B: Weekly Injury Benefits, Event 20	Not included
Section C: Weekly Sickness Benefits, Event 22	Not Included

Policy Wording Group Injury & Sickness AH610/7 S/O PDS JM 09/00064.6

Endorsements Bed Care Patient, as defined, for not less than twenty four (24) consecutive hours Aggregate Period is up to one hundred and four (104) weeks - \$50 per day

Domestic Home Help-Non Income Earners as defined Aggregate Period is fifty two (52) weeks For non-income earners, 80% of the actual expenses incurred up to a maximum of \$150 per week

### Category A Insured Persons

The Events Injury, as defined	Compensation Per
-------------------------------	------------------

# Schedule of Insurance

<b>Class of Policy:</b> Personal Accident - Declaration	<b>Policy No:</b> 2200100829
<b>The Insured:</b> Public Service Association Of New South Wales	<b>Invoice No:</b> 55074
	<b>Our Ref:</b> PUBLICSERV

	Person
(c) Death	50%
1. Permanent Paraplegia	100%
2. Permanent Quadriplegia	100%
3. Permanent Total Disablement	50%
4. Permanent Total Loss of use of both hands or both feet	50%
5. Permanent Total Loss of sight of both eyes	50%
6. Permanent Total Loss of hearing <ul style="list-style-type: none"> <li>• Both Ears</li> <li>• One Ear</li> </ul>	38% 10%
7. Permanent Total Loss of speech	38%
8. Permanent Total Loss of use of one hand or one	25%
9. Permanent Total Loss of sight of one eye	25%
10. Permanent Total Loss of use of a thumb and one finger	8%
11. Permanent Total Loss of use of a thumb, either hand	5%
12. Permanent Total Loss of use of one or more fingers	2.5%

### Category A Additional Benefits

13. Bed Care Patient, as defined, for not less than twenty four (24) consecutive hours Aggregate Period is up to one hundred and four (104) weeks	\$ 50 per day
14. Domestic Home Help- Non Income Earners as defined Aggregate Period is up to fifty two (52) weeks	For non-income earners, 80% of the actual expenses incurred up to a maximum of \$150 per week
15. Home Tutorial – Non income Earners as defined Aggregate Period is up to fifty two (52) weeks	For non-income earners, 80% of the actual expenses incurred up to a maximum of \$150 per week

### Category B Insured Person

The Events Injury, as defined	Compensation Per Person
(c) Death	50%
3. Permanent Paraplegia	100%

# Schedule of Insurance

**Class of Policy:** Personal Accident - Declaration  
**The Insured:** Public Service Association Of New South Wales

**Policy No:** 2200100829  
**Invoice No:** 55074  
**Our Ref:** PUBLICSERV

4. Permanent Quadriplegia	100%
5. Permanent Total Disablement	Nil
6. Permanent Total Loss of use of both hands or both feet	50%
7. Permanent Total Loss of sight of both eyes	50%
8. Permanent Total Loss of hearing 7. Both Ears 8. One Ear	38% 10%
3. Permanent Total Loss of speech	38%
4. Permanent Total Loss of use of one hand or one	25%
5. Permanent Total Loss of sight of one eye	25%
6. Permanent Total Loss of use of a thumb and one finger	8%
7. Permanent Total Loss of use of a thumb, either hand	5%
8. Permanent Total Loss of use of one or more fingers	2.5%

## Category B Additional Benefits

9. Bed Care Patient, as defined, for not less than twenty four (24) consecutive hours Aggregate Period is up to twenty six (26) weeks	\$ 50 per day
10. Domestic Home Help- Non Income Earners as defined Aggregate Period is up to twenty six (26) weeks	For non-income earners, 80% of the actual expenses incurred up to a maximum of \$150 per week
11. Home Tutorial – Non income Earners as defined Aggregate Period is up to twenty six (26) weeks	For non-income earners, 80% of the actual expenses incurred up to a maximum of \$150 per week