





Home Loan Compassionate Care claim form - Death

Home Loan Compassionate Care is here to help during this difficult time, so you can focus on the things that matter.

For support in completing this form, please contact us on **1800 319 457** between 8am and 5pm (AEST/AEDT), Monday to Friday. For more information about Home Loan Compassionate Care and eligibility, go to **commbank.com.au/compassionatecare**

Purpose of this form

The purpose of this form is to allow you to make a claim for benefits under Home Loan Compassionate Care, where the deceased person was a borrower on a CommBank home loan, or was the spouse or dependant of a borrower.

Your information is important to us. This form (see section 4) outlines what information will be collected and why, explains how the information will be used and who we will share the information with.

Before we can lodge a claim with the Insurer, you'll need to ensure that section 6 of this form has been signed by the Notifier and any borrower(s) completing this form, or their authorised representative(s). This ensures that we and the Insurer have your consent to process this claim and collect, use and share your information.

If your claim is submitted to the Insurer, they will contact the Notifier on our behalf for further information and assess whether you are eligible for Home Loan Compassionate Care benefits.

Meaning of terms used in this form

'You'	Refers to the person(s) signing this form.
	Refers to Commonwealth Bank of Australia ABN 48 123 123 124 AFSL and Australian credit licence 234945 (CommBank).
'Insurer'	Refers to AIA Australia Limited ABN 79 004 837 861 AFSL 230043 (AIA Australia), who provides the insurance cover for Home Loan Compassionate Care.
	Is the person lodging the claim to commence the claim assessment process, and who will be contacted if additional documents or information is required. If this person is not an authorised representative on the home loan (e.g. a borrower, Executor or Administrator), this person can submit information but we and the Insurer will not disclose details to them relating to the home loan.

BRANCH USE ONLY - Home Loan Compassionate Care

Please scan and email this form along with any certified ID documents required for the customer's proof of identification to the Home Loan Compassionate Care inbox. Do not accept medical documents from the Notifier as these should be submitted directly to the Insurer, if requested. The Insurer will contact and provide further instruction to the Notifier once they have received the claim. If you have any questions, please call the Home Loan Compassionate Care team on **1800 319 457** for assistance.

How to use this form

The following person(s) can lodge a claim for Home Loan Compassionate Care:

Tick all that	You are	Complete and read	Certified copies of documents
apply (✔)		the following	to be provided
	A borrower on a CommBank home loan and your spouse or dependant has passed away	All sections	No additional documents at this stage
	The Administrator/Executor of the	Sections 1, 2, 4, 5 and 6	Proof of ID* (e.g. driver licence
	deceased home loan borrower's estate		or passport)

If the deceased person was a CommBank home loan borrower and there is no Executor or Administrator appointed, the following parties can lodge a claim:

Tick all that apply (✔)	You are	Complete and read the following	Certified copies of documents to be provided
	A co-borrower on a CommBank home loan where the deceased was also a borrower	Sections 1, 2, 4, 5 and 6	No additional documents at this stage
	A family member of a deceased CommBank home loan borrower	Sections 1, 2, 4, 5 and 6	Proof of ID* (e.g. driver licence or passport)



* To find out what other documents are accepted as proof of ID, please see our identification checklist at **commbank.com.au/id** or visit a branch.

If you are not a CommBank customer and would like to send us your certified ID by post, you will also be required to complete our 'Certified Copies Identification' form. You will need to provide the original and a copy of acceptable identification documents to a prescribed person who is required to complete the actions as set out in the form. (For more details on acceptable identifications and prescribed persons, refer to Sections 4 & 5 of the Certified Copies Identification form.)

commbank.com.au/personal/apply-online/download-printed-forms/Certified Copies Identification Form.pdf



Section 1 – About the deceas	ed person		
Title			
☐ Mr ☐ Mrs ☐ Miss ☐ M	s 🗆 Other 🔙		
Full legal name:			
First name	Middle name(s)		Last name
Residential address (PO Box is r	not acceptable)		
	Chaha	Destanda	Country
	State	Postcode	Country
Date of birth (DD/MM/YYYY)	Date of death (DD/MM	1/YYYY)	
Did this person hold any Commi	Bank home loans in their r	name?	
☐ Yes			
□ No			
Is this person a spouse or deper	ndant of a CommBank hor	ne loan borrower?	
Yes please ensure you comple	ete the borrower's details in	Section 3 as these bo	orrowers may be eligible to have
Compassionate Care applied to the	eir loans.		, ,
☐ No, you do not need to comple	te Section 3.		
Section 2 – About you (the No	otifier)		
		al all'All and all all and a second	
We and the insurer will	contact this person if any a	aditional documents o	or information is required.
Title			
☐ Mr ☐ Mrs ☐ Miss ☐ M	s 🗆 Other	Mobile num	hber
Full legal name:	0 L 01.101 L		
First name	Middle name(s)		Last name
Residential address (PO Box is r	act acceptable)		
Tresidential address (FO DOX IS I			
		Destesde	Q
	State	Postcode	Country
Postal address (if this is differen	t to your residential addre	ss)	
	State	Postcode	Country
Date of birth (DD/MM/YYYY)	Email address		
And the Constitution of the color			
Are you the Executor of the decea	sea person?		
Yes			
No What would woull be up to a surround	٥ مانند، ام مد		
Who would you like us to correspo			
☐ Contact me directly on this claim			alian alana dalah alaha an mula bahali
Contact may be not wearness and other	e, triend or family member, v	vno can access inform	lation about this claim on my benair:
Contact my legal representative	n name (if applicable)		
☐ Contact my legal representative Legal Representative or Law firm	n name (if applicable)		
	n name (if applicable)		
	n name (if applicable)		
Legal Representative or Law firm	n name (if applicable)		
Legal Representative or Law firm	n name (if applicable)		
Legal Representative or Law firm Full legal name	n name (if applicable)		
Legal Representative or Law firm Full legal name		Poetcodo	Country
Legal Representative or Law firm Full legal name Postal address	n name (if applicable) State	Postcode	Country
Legal Representative or Law firm Full legal name		Postcode	Country Mobile number

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Section 2 - About you (the Notifier) (continued)



By completing this section, you confirm you have received consent from your legal representative/friend/family member to share their details with us.

Section 3 – About the Borrower(s)

Date of birth (DD/MM/YYYY)

Only complete this section if you or dependant.	ou are a CommBank h	ome loan borrower	and the deceased p	person was your spouse
Borrower 1				
The deceased person was my: ☐ Spouse ☐ Dependant				
Are you the Notifier in Section 2? Yes, I have provided my details already No please provide your details below				
Title □ Mr □ Mrs □ Miss □ Ms □ C	other			
Full legal name: First name	Middle name(s)		Last name	
1 iist name	wildle flame(s)		Last Hame	
Residential address				
			State	Postcode
Date of birth (DD/MM/YYYY)				
Borrower 2				
The deceased person was my: ☐ Spouse ☐ Dependant				
Are you the Notifier in Section 2? ☐ Yes, I have provided my details already ☐ No please provide your details below				
Title □ Mr □ Mrs □ Miss □ Ms □ C	other			
Full legal name:				
First name	Middle name(s)		Last name	
Posidential address (PO Box is not age	untable)			
Residential address (PO Box is not acce	praniej			
	State	Postcode	Country	

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Section 4 - Privacy Statement

It is important for you to understand that we and the Insurer have separate privacy policies. For further information on how we and the Insurer manage privacy please refer to our privacy policy at **commbank.com.au/privacy** and the Insurer's privacy policy at **aia.com.au/privacy**

Important information about your privacy and how we and the Insurer collect, use and share your information

We and the Insurer must follow the Privacy Act and Australian Privacy Principles (APPs).

Why we and the Insurer collect your information and what it is used for

We and the Insurer collect, use and exchange information about the deceased person, the relevant home loan borrower(s), the notifier(s) and their home loan account(s).

The information is used to:

- Confirm the identity of the notifier, borrower(s) and the deceased person
- Identify and review eligible home loans of the borrower(s) and the deceased person
- · Confirm the claim meets eligibility requirements
- Assess and manage the claim, which may require collecting sensitive information, such as health information
- Contact you, for example, when we or the Insurer need further documents or to tell you the result of the claim
- Manage our relationship with you and improve our service to you and your experience with us
- Minimise risks and identify or investigate fraud and other illegal activities
- Comply with laws, for example the Anti-Money Laundering and Counter-Terrorism Financing Act 2006, Taxation Administration Act 1953 and Income Tax Assessment Act 1936, and assist government or law enforcement agencies

We and the Insurer may also collect, use and exchange your information for other reasons where the law allows.

You may decline to share certain personal information with us or the Insurer, in which case we may not be able to proceed with your Home Loan Compassionate Care claim.

Sharing your information

We and the Insurer may share your information with third parties for the reasons listed above or where the law otherwise allows. These third parties include:

- Other members of the CBA Group
- AIA Australia Limited
- People who act on your behalf for example, a person with a Power of Attorney
- People who help us process claims for example, assessors and investigators
- Other people with the same account for example, co-borrowers
- Other banks and financial institutions for example, if we need to process a claim for a mistaken payment
- · Auditors, insurers and re-insurers
- Government and law enforcement agencies or regulators
- Organisations that help identify illegal activities and prevent fraud

Your personal information, which you have provided in support of a claim, will not be sent overseas.

Our policy and the Insurer's policy tells you about other ways and reasons your information may be collected, used or shared. They also contain information about how to access your information and correct it if it's wrong.

Visit **commbank.com.au/privacy** for our most up to date privacy policy or as for a copy at any CommBank branch.

Visit aia.com.au/privacy for the Insurer's most up to date privacy policy.

To find more information about how we manage your privacy complaint, please also refer to our privacy policy as it contains information about how an individual may complain about a breach of the Australian Privacy Principles.

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Section 5 - Acknowledgements

Read these acknowledgements and if you agree, sign Section 6.

- You confirm that the information you've given or will give as part of this claim notification is true and correct
- You've read this form and you give us and the Insurer permission to collect, use and share your information as disclosed in section 4 and in our and the Insurer's respective privacy policies
- To assess this claim, you give us permission to share with the Insurer supporting documents such as the deceased person's death certificate
- You give permission for us and the Insurer to contact the Notifier about your claim
- You acknowledge that, if this claim is accepted, all borrowers under the home loan, will be notified of the acceptance of the claim
- You acknowledge that, if a claim is made after the maximum benefit has been reached for the deceased person, we may
 disclose the existence of this claim to the new claimant, without disclosing the details of the claim. To find out more about the
 maximum benefit, please refer to commbank.com.au/compassionatecare

Section 6 – Signature(s) of Notifier and Borrowers					
In this section, the Notifier (in Section 2) and all Borrowers (in Section 3) must sign this form.					
Notifier We and the Insurer will contact this person if any additional documents or information is required.					
Full Legal Name(s)					
Signature Date (DD/MM/YYYY)					
X					
Borrower(s)					
Borrower 1 Full Legal Name(s) Borrower 2 Full Legal Name(s)					
Signature Date (DD/MM/YYYY) Signature Date (DD/MM/Y	YYY)				
X X					
Next steps:					
Attend any CommBank Branch with certified copies of all required supporting documentation. If you bring the original document, we can certify the documents in Branch.					
OR					
Mail this form with certified copies of all required supporting documentation to:					
Processing Services Home Loan Compassionate Care					
PO Box 334					
Silverwater NSW 2128 Australia					
Please don't send original documents – certified copies will do.					

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