



YOUR VOICE AT WORK



We've got you covered  
against **Personal  
Accident** injuries  
outside work

(LOCAL) **3832 3303**

(REGIONAL) **1800 657 141**

The SDA provides a **FREE Accident Insurance Policy** for all financial members - **NO Medical** required, **NO forms** to complete and **NO premium** to pay!

The policy provides protection for members outside working hours, this way the member has 24 hour cover ... **WorkCover** while at work and the **SDA Accident Insurance** cover at all other times.

## Accidents Can Happen



The Scheme covers you in the event of:

- ✚ Death;
- ✚ Total incapacity to work in the job in which were trained and/or educated to perform; and
- ✚ Other defined injuries as listed over.



## Benefits Payable

EVENT	ACCIDENT DESCRIPTION	AMOUNT
1	Death - Members with Dependants.....	\$40,000
	Death - Members without Dependants.....	\$12,000
2	Permanent Paraplegia .....	\$40,000
3	Permanent Quadraplegia .....	\$40,000
4	Permanent Total Loss of sight of both eyes.....	\$40,000
5	Permanent Total Loss of sight of one eye.....	\$40,000
6	Permanent Total Loss of use of two limbs.....	\$40,000
7	Permanent Total Loss of one limb .....	\$40,000
8	Permanent Total Loss of the lens of both eyes .....	\$40,000
9	Permanent Total Loss of the lens of one eye .....	\$20,000
10	Permanent Total Loss of hearing in	
	(a) both ears .....	\$30,000
	(b) one ear .....	\$ 6,000
11	Third degree burns and/or resultant disfigurement received from fire or chemical reaction which extend to cover more than 40% of the entire external body .....	\$20,000
12	Permanent Loss of Use of four fingers and thumb of either hand .....	\$28,000
13	Permanent Total Loss of use of four fingers of either hand .....	\$16,000
14	Permanent Total Loss of use of one Thumb of either Hand	
	(a) both joints .....	\$12,000
	(b) one joint .....	\$ 6,000
15	Permanent Total Loss of use of Fingers of either Hand	
	(a) three joints.....	\$ 4,000
	(b) two joints .....	\$ 2,800
	(c) one joint .....	\$ 2,000
16	Permanent Total Loss of use of Toes of either Foot	
	(a) all - one Foot.....	\$ 6,000
	(b) great - both joints.....	\$ 2,000
	(c) great - one joint.....	\$ 1,200
	(d) other than great, each Toe .....	\$ 400
17	Fractured leg or Patella with established non-union ....	\$ 4,000
18	Shortening of leg by at least 5cm .....	\$ 2,800
19	Achilles Tendon Rupture involving a complete tear .....	\$ 2,000
20	Permanent partial disablement not otherwise provided for under Events 9 to 19 .....	Maximum* - \$30,000

(\*Such percentage of the Capital Sum Insured as the Insurers in their absolute discretion shall determine and being in Our opinion not inconsistent with the Compensation provided under Events 9 to 19. The Maximum amount payable under Event 20 is 75% of the Capital Sum Insured shown in the Policy Schedule).



## Broken Bones Benefit

Injury resulting in breaks or simple fractures to:

EVENT	ACCIDENT DESCRIPTION	AMOUNT
(a)	Neck or spine (full break).....	\$ 500
(b)	Hip, pelvis.....	\$ 500
(c)	Skull, shoulder blade .....	\$ 500
(d)	Collar bone, upper leg.....	\$ 500
(e)	Upper arm, kneecap, forearm, elbow, lower leg, jaw, wrist, cheek, ankle, hand or foot.....	\$ 500
(f)	Vertebrae, ribs (per rib) .....	\$ 250
(g)	Thumbs, fingers, toes (per thumb, finger or toe) .....	\$ 250
	Maximum compensation any one injury.....	\$1000

## Emergency Transport Benefits

In the event that the Insured Person suffers Accidental Bodily Injury, the Insurer will reimburse the cost of such reasonable road, air or water transportation costs up to a maximum of \$2,500 per accident. Provided always that the Insurer will not be liable for:

- (a) Any costs that We are prohibited by law from paying.
- (b) Any costs that are recoverable from any other source

## Accidents Not Covered

The policy does not apply to any event arising directly or indirectly out of:

- X** War injury
- X** Any aerial activities except as a powered aircraft passenger
- X** Intentional self-injury, suicide or criminal or illegal act
- X** Pregnancy, childbirth or miscarriage
- X** Sexually transmitted disease or AIDS/HIV
- X** Training or participating as a professional in any sport
- X** Racing in or on any motor powered device
- X** Radioactive contamination



## Other Conditions

The details contained in this brochure are an outline only. The Union is bound by the full terms and conditions of the policy which is available for inspection by members at the Union office.

## Personal Papers

The Union suggests that you file this brochure with your personal papers, so that in the event of an accident, your spouse or next of kin will be aware of this policy which covers all financial members of the SDA.



## What You Save

The SDA Accident Insurance scheme is absolutely FREE for every financial member of this Union.

The buying power of over 200,000 members nationally, enables the SDA to cover you for FREE.

If you had to insure yourself with a similar type of policy, it would cost you approximately \$260.00 each year for a member with dependants or \$200.00 each year for a member who does not have dependants.

## ***Making A Claim***

A claim under the SDA Accident Insurance policy must be submitted within 30 days to:

**The Shop, Distributive and Allied Employees'  
Association (Queensland Branch)  
PO Box 490, Spring Hill, Qld. 4004**



**The benefits of the SDA scheme are NOT affected if you have other insurance cover.**

## **Your Secretary, Chris Ketter says ...**

*“We are a positive, progressive Union, working for the betterment of our members. The Accident Insurance Scheme shows how the SDA cares for its members 24 hours a day.*

*“The SDA provides an extensive range of benefits and services for our members; the Accident Insurance cover is just one of many.*

*“Call our office for further details on how you can take advantage of these services”.*



Authorised by: **CHRIS KETTER**, State Secretary  
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