

Underwriting Questions

Is Automatic Premium Loan Desired?

Yes No

Do you have existing life insurance policies or annuity contracts?

Yes No

Will the proposed insurance replace or change any existing life insurance policies or annuities?

Yes No

If "Yes", to the above questions, please provide the company name and submit necessary replacement forms.

If any answer to questions 1 through 5 is Yes, you are not eligible for coverage.

1. Within the last twenty four (24) months, have you been receiving kidney dialysis, require 24 hour continuous oxygen use (excluding CPAP), have an implanted defibrillator or received or been advised by a member of the medical profession to get an organ transplant?

Yes No

2. Within the last twenty four (24) months have you been diagnosed with or treated by a member of the medical profession for Alzheimer's, dementia or memory loss?

Yes No

3. Currently diagnosed as having, or receiving treatment by a member of the medical profession for invasive cancer (excluding Stage A Prostate Cancer, Carcinoma in Situ, and Squamous Cell/Basal Cell Carcinoma)?

Yes No

4. Are you currently bedridden, confined to a hospital, nursing home, mental care facility, long term care facility, hospice or been diagnosed with a terminal illness?

Yes No

5. Have you been diagnosed by a member of the medical profession as having the Human Immunodeficiency Virus (HIV), ARC or AIDS?

Yes	No
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Save and Continue
