# UHL/UFL Product Portfolio
## Simplified Products - Faster Results™

### Whole Life

<table>
<thead>
<tr>
<th>Description/Features</th>
<th>Issue Ages</th>
<th>Min. Face</th>
<th>Max. Face</th>
<th>Policy Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provider Whole Life</td>
<td>0-80</td>
<td>$10,000</td>
<td>0-50: $150,000</td>
<td>$50</td>
</tr>
</tbody>
</table>

**Available Riders**
- Waiver of Premium; Child Rider; no-cost Terminal Illness Benefit;
- For $25,000+ Face Amounts: no-cost Common Carrier Accidental Death Benefit; Life Threatening Cancer Accelerated Benefit; and Charitable Gift Donation;
- For issue ages 0-17: no-cost Guaranteed Insurability Rider;

### Final Expense Series

**Express Issue WL (Graded Benefit)**

- 25-80
  - In MO: 25-75
  - In NE: 25-75
  - In NJ: 25-80 (MNT)
  - In PA: 25-74 (MNT)
  - $2,000

**Express Issue Deluxe**

- 20-80
  - $5,000
  - Child Rider;
  - Suitable for insulin-dependent diabetics.

**Express Issue Premier**

- 20-80
  - $5,000

- Suitable for insulin-dependent diabetics.

### Guaranteed Issue Whole Life

- 45-75
  - In NE: 45-65
  - $5,000

### Accidental Death

<table>
<thead>
<tr>
<th>Description/Features</th>
<th>Issue Ages</th>
<th>Minimum AD Face</th>
<th>AD Face Doubles In 20 Years To</th>
<th>Policy Fee</th>
<th>Available Riders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Protector AD</td>
<td>18-60</td>
<td>$50,000</td>
<td>$100,000</td>
<td>NA</td>
<td>NA</td>
</tr>
</tbody>
</table>

**Available Riders**
- No PHIs; 2-year graded death benefit.

### Term Life

**SI Term 20**

- 20-year level premium term; built-in table 4; PHI required.
  - 20-60
    - In WA: 20-60 (NT)
    - 25-55 (T)
  - $25,000

**SI Term 30**

- 30-year level premium term; built-in table 4; PHI required.
  - 20-55 (NT)
    - 20-50 (T)
  - $25,000

**SI Term 20 ROP (Band 1)**

- 20-year level premium term; PHI required; return of premium option is 80% of total annual premiums paid.
  - 25-60 (NT)
    - 25-45 (T)
  - $25,000

**SI Term 20 ROP (Band 2)**

- 20-year level premium term; PHI required; return of premium option is 100% of total annual premiums paid for 25-50 NT & 80% for 51-60 NT & 25-45 T.
  - 25-60 (NT)
    - 25-45 (T)
  - $100,000

**SI Term 20 DLX**

- 20-year level premium term; built in table 8; PHI required; Suitable for insulin-dependent diabetics.
  - 20-60
    - $25,000

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- Age Last Birthday.
- $20 minimum premium requirement for all products unless Monthly EFT.
- 1 Not available in GA, KY, MD, PA, or TN.
### Underwriting Guidelines

| Application: | App must be fully completed. All Proposed Insureds (ages 15 and above) and all owners must sign the application. It is unlawful for any person to sign another person’s name. However, if the Proposed Insured is under age 15, the parent/permanent legal guardian must sign the application. Any discrepancy detected will necessitate proof of signature (copy of driver's license or other signature-clad ID). Writing agents are expected to ask the applicant all questions as listed on the application and record all answers completely. |
| New Business Memo: | All applications must be submitted with a fully completed New Business Memo, including how the application was taken, applicant’s contact information and any special requests. Missing or incomplete information will cause delays in processing and commission payments. |
| Non-Tobacco Rate: | No use of any nicotine product (cigars, cigarettes, electronic cigarettes, pipes, smokeless tobacco including chewing tobacco, snuff, nicotine gum, nicotine patch or any other nicotine substitute) or vaping within the past 12 months. |
| Basic Eligibility Requirement: | Any Proposed Insured applying for coverage via any product offered by the Company is required to have an attending physician and must have established routine health care in order for the Company to make a proper assessment of insurability. |
| Personal History Interview: | Mandatory for all products except Guaranteed Issue WL and Protector AD accidental death benefit coverage. Must be completed solely by applicant without help from others. Phone number for PHIs: 1-866-333-6557 |
| HIPAA Authorization: | A signed HIPAA Authorization form is required for all applications. Must be signed by Proposed Insured. For all juvenile applications (aged 17 and under), the parent / permanent legal guardian should sign as “Representative”. The HIPAA form should not be signed by an agent unless he/she is applying for coverage. |
| MIB, Inc.: | A basic MIB search may be conducted. Any significant findings could result in additional underwriting requirements or additional questions for the applicant. |
| Prescription Drug Database Search: | May be conducted. Any significant findings could result in additional underwriting requirements or additional questions for the applicant. |
| Examinations: | No routine medical exams or bodily fluids testing required. The Company reserves the right, however, to request a medical exam or lab testing due to an applicant’s medical history or build. If any examination, urinalysis or blood testing is required, the underwriter will notify the writing agent as to the specifics. |
| Attending Physician Statement (APS): | Based on the applicant's medical history, MIB information or pharmacy report, an APS may be necessary. You may be asked to provide the APS at your client’s expense. It is imperative that complete contact information for the facility where the applicant’s medical records are housed be included in the application. An APS will only be accepted via fax directly from the provider’s office or in an envelope sealed by the provider if sent by USPS or overnight mail. The fax number to which an APS should be sent is 317-692-7636. |
| Foreign Nationals: | The Company will accept an application on a Proposed Insured who is not a naturalized US citizen provided the applicant is in the US legally and is here on a permanent basis with a valid Social Security number, a valid Visa or Green Card, and has been in the US for the past two years. |
| Military Risks: | The Company will accept an application on a Proposed Insured currently serving in the military in a non-combat unit, provided the applicant has not been called for combat duty nor is serving in a hazardous area. Forward a signed Military Personnel Financial Services Disclosure with the application. Forms: 200-673 (UHL); 18-673 (UFL). |
| Stranger-Owned Life Insurance (STOLI): | Applications will not be accepted for which any agreement or understanding exists that provides for any party to obtain an interest in any policy issued on the Proposed Insured who does not have an insurable interest in the life of the Proposed Insured.* |

### Sample Build Chart

<table>
<thead>
<tr>
<th>Height</th>
<th>Provider</th>
<th>All other plans except Guaranteed Issue WL and EI Deluxe or Graded Benefit plans</th>
<th>Express Issue 30 Days</th>
<th>Simple Term 20 DLX</th>
</tr>
</thead>
<tbody>
<tr>
<td>5'0&quot;</td>
<td>190 lbs</td>
<td>210 lbs</td>
<td>240 lbs</td>
<td></td>
</tr>
<tr>
<td>5'2&quot;</td>
<td>200 lbs</td>
<td>225 lbs</td>
<td>255 lbs</td>
<td></td>
</tr>
<tr>
<td>5'4&quot;</td>
<td>215 lbs</td>
<td>240 lbs</td>
<td>270 lbs</td>
<td></td>
</tr>
<tr>
<td>5'6&quot;</td>
<td>230 lbs</td>
<td>255 lbs</td>
<td>290 lbs</td>
<td></td>
</tr>
<tr>
<td>5'8&quot;</td>
<td>245 lbs</td>
<td>270 lbs</td>
<td>305 lbs</td>
<td></td>
</tr>
<tr>
<td>5'10&quot;</td>
<td>260 lbs</td>
<td>285 lbs</td>
<td>325 lbs</td>
<td></td>
</tr>
<tr>
<td>6'0&quot;</td>
<td>275 lbs</td>
<td>305 lbs</td>
<td>340 lbs</td>
<td></td>
</tr>
<tr>
<td>6'4&quot;</td>
<td>305 lbs</td>
<td>340 lbs</td>
<td>385 lbs</td>
<td></td>
</tr>
</tbody>
</table>

*For applicants outside these ranges use graded benefit plans. For state variations may apply.

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**UHL/UFL Product Portfolio**

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**Height**

- 5'0" 190 lbs 210 lbs 240 lbs
- 5'2" 200 lbs 225 lbs 255 lbs
- 5'4" 215 lbs 240 lbs 270 lbs
- 5'6" 230 lbs 255 lbs 290 lbs
- 5'8" 245 lbs 270 lbs 305 lbs
- 5'10" 260 lbs 285 lbs 325 lbs
- 6'0" 275 lbs 305 lbs 340 lbs
- 6'4" 305 lbs 340 lbs 385 lbs

**Provider**

- All other plans except Guaranteed Issue WL and EI Deluxe or Graded Benefit plans

**Express Issue 30 Days**

- Express Issue 30 Days

**Simple Term 20 DLX**

- Simple Term 20 DLX

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**Terms To Keep In Mind**

**Insured:** The person whose life is covered by a policy as shown on the application.

**Policyowner:** The person who actually owns the policy and generally has the right to make changes (may or may not be the Insured).

**Beneficiary:** The person or entity to whom the policy proceeds will be paid upon the death of the Insured (generally can be changed by the Policyowner at any time).

**Payor:** The person or entity who is making the premium payments on the policy.

**Policy:** A contract between the Company and the Policyowner.

**Policy Maturity Date:** The date on which coverage under a policy terminates and the maturity proceeds (if any) become payable to the Policyowner.

*State variations may apply.

Product and rider/benefit availability varies by state.
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