## Pre-Qualification Questionnaire Your Guide to More Accurate Quotes



Unisex Guidelines for Height/ **Unisex Guidelines** Applicant's Name for Height/Weight Through Age 70 Date of Birth Select 1. Have you (proposed insured) used any form of tobacco Preferred **Preferred** (cigarettes, pipe, cigars, chew, nicotine gum, or patches) in the last: 4-7 120 129 4-8 125 134 60 months ( ) No Yes (If "yes," Select Preferred is not available) 4-9 129 139 144 4-10 134 24 months ( ) No Yes 4-11 139 149 (If "yes," Preferred NT/Preferred Tobacco is not available) 5-0 143 154 2. Has insured ever been rated or declined for insurance? 5-1 148 159 No Yes (if so, why?) 5-2 164 153 5-3 158 169 5-4 163 175 5-5 168 180 If "yes" quote should be based on Standard rate class. (You 173 186 5-6 may want to contact your Regional Sales Manager before submitting as a TeleLife case.) 5-7 179 192 5-8 184 197 \_ Weight \_\_\_\_\_ If weight is 203 5-9 190 within the limits on the table, you may quote the appropriate class. Weight outside of the table would qualify for Standard 195 209 5-10 5-11 201 215 6-0 206 221 4. Have you ever been treated for high blood pressure? 212 227 6-1 ( ) No Yes 6-2 218 234 (If "yes," Select Preferred and Preferred may be available 6-3 224 240 for all ages) 6-4 230 246 Has any member of your family (parent or sibling) had a 6-5 236 253 history of or died from breast, colon, prostate, ovarian, melanoma, or lung cancer; heart disease or any cardiac 6-6 242 260 related condition prior to age 60? 6-7 249 266 ) No Yes 6-8 255 273 If "yes", Select Preferred is not available if the applicant's 6-9 280 261 age is below 60. Preferred consideration available if parent 6-10 268 287 or sibling is living and the applicant's age is below 60.\* 6-11 274 294 6-11 210 294 190 323

	Weight Over Age 70			
	Select Preferred		Preferred	
	MIN	MAX	MIN	MAX
4-7	95	129	86	142
4-8	98	134	89	147
4-9	102	139	92	152
4-10	105	144	96	158
4-11	109	149	99	163
5-0	113	154	102	169
5-1	116	159	106	175
5-2	120	164	109	180
5-3	124	169	113	186
5-4	128	175	117	192
5-5	132	180	120	198
5-6	136	186	124	204
5-7	140	192	128	211
5-8	145	197	132	217
5-9	149	203	135	223
5-10	153	209	139	230
5-11	158	215	143	237
6-0	162	221	147	243
6-1	167	227	152	250
6-2	171	234	156	257
6-3	176	240	160	264
6-4	181	246	164	271
6-5	186	253	169	278
6-6	190	260	173	286
6-7	195	266	178	293
6-8	200	273	182	300
6-9	205	280	187	308
6-10	210	287	191	316
6-11	216	294	196	323

<sup>\*</sup> Generally applicants age 60 and above will not be negatively impacted by a family history of cancer, heart disease, or any cardiac-related condition. Incidences of death of more than one family member may still have an impact on the underwriting decision.

Standard risk medically and no ratable occupational hazard. No other adverse underwriting considerations per underwriting judgment, to include; cancer, heart disease, stroke, diabetes, or alcohol/substance abuse.

Any alcohol or drug abuse, a DUI/reckless driving conviction in last 5 years, or two or more moving violations in last 3 years excludes insured from Select Preferred.

Any alcohol or drug abuse, a DUI/reckless driving conviction in last five years, or 3 or more moving violations in last 5 years excludes insured from Preferred.

No hazardous sports or avocations, such as hang gliding, ballooning, motorized racing, parachuting, or SCUBA diving within the last three years. Recreational SCUBA diving up to depths of 75 feet is acceptable. Exclusions will be permitted for qualification, where jurisdiction approved.

Citizen of U.S. (including Puerto Rico) or Canada or proof of permanent residence. Required minimum residency of at least 2 years.

Not a private pilot or participant in aviation activities. Pilot and crew members on regularly scheduled passenger flights on major airlines are acceptable if not engaged in any other flying activities. Exclusions will be permitted for qualification, where jurisdiction approved.