AssurityBalance® Century+

Individual Disability Income Insurance

FOR AGENT USE ONLY. Not for use with consumers.
Product availability, features and rates may vary by state.

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Important Notice

Underwriting Guide for AssurityBalance® Century+ Individual Disability Income Insurance

This policy is underwritten by Assurity Life Insurance Company, Lincoln, Nebraska, and may contain reductions of benefits, limitations and exclusions. For costs and complete details of the coverage, please contact Assurity Life Insurance Company or review the policy. **The specific policy is your ultimate authority for any questions about this product.**

This is a generic underwriting guide. **Product availability, features and rates may vary by state**. Your state may require a state-specific contract and/or application. State-specific applications are available on AssureLINK at https://assurelink.assurity.com in the Product Center for each product by selecting the Applications/Forms option on the left.

This is an underwriting guide for policy Form No. I H0920. Any prior guide does not apply to this product.

This underwriting guide is for agent use only. It is not for use with consumers.

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General Underwriting Guidelines

Multi-Life Discount
A discount will be applied when three or more policies are issued at the same time to an employee-employer group set up as a list bill. Eligible products and applicable discounts are as follows: Century+ Individual Disability Income, 15 percent; Business Overhead Expense (BOE), 5 percent. If Century+ and BOE are issued on the same insured, both policies count toward the three policy minimum.

The same discount may also be available for employer-employee groups desiring automatic bank withdrawal versus a list bill with approval from an Underwriting Manager or the Director of Underwriting prior to the submission of applications. In considering such a request, the following information will be required:

- Documentation establishing a significant level of employer support such as an employee communication from an officer of the company announcing the opportunity to apply for coverage, the details for doing so, and why the employer is making the opportunity available.
- Employer-provided documentation establishing the employer-employee relationship which includes each applicant, such as a current payroll ledger, a quarterly income tax withholding statement, or other employee tax reporting statements for the company.

The multi-life discount will continue for any insureds leaving a multi-life group and will be extended to any employees joining the group. If list bill is not used, it is the agent's responsibility to notify Assurity when subsequent applications are submitted for an established employer group after initial setup, as well as provide continuing evidence of significant employer support and a payroll ledger documenting the applicant's employment.

Avocations
Individuals involved in aviation, auto racing, hang gliding, sky diving, skin/scuba diving or similar activities on an amateur basis can be considered for coverage in most cases. The agent must report the activity on the application and complete the appropriate questionnaire. Usually, a policy amendment rider (exclusion rider) will be attached to the policy if the application is approved.

Non-U.S. Citizens
Applications may be taken for U.S. citizens who permanently reside in the U.S. or for permanent resident aliens who have lived in the U.S. for at least two years and do not plan to return to their native country on a permanent basis. The applicant's resident alien card number must be submitted with the application for a permanent resident alien. A photocopy of the resident alien card can be included in case it is required.

Personal History Interviews
Personal history interviews are ordered by the underwriting department for all applications with total monthly benefits exceeding $2,000 (for all applications in California, regardless of monthly benefit). However, at the underwriter's discretion, an interview may be ordered on any amount, if necessary. Please inform every applicant that he/she may receive a phone call regarding an interview.

Collection Limits

Premium may be collected with the application when:

- the amount of insurance applied for, combined with in-force coverage, does not exceed $5,000 monthly benefit; and
- the applicant has answered all application health questions with no indication of adverse conditions or is scheduled to be medically examined.

Premium should not be collected with the application when:

- the amount of insurance applied for, combined with in-force coverage, exceeds $5,000 monthly benefit; or
- completion of application questions identifies substantial adverse health conditions.

Replacement Guidelines

If existing disability income insurance is to be replaced, the following states require that a replacement form be completed and submitted with the application, and that a completed copy be left with the applicant:

Arkansas	Illinois	New Jersey	Utah
Colorado	Iowa	Oklahoma	Vermont
Connecticut	Kentucky	Pennsylvania	Virginia
Delaware	Maine	Rhode Island	Washington
Florida	Massachusetts	South Carolina	West Virginia
Idaho	New Hampshire	Texas	Wisconsin

Backdating Policy Issue Date

Assurity will backdate the policy issue date 30 days prior to application's signature date to "save age" (i.e. allow for a lesser age to qualify for a lesser rate). However, Assurity will not backdate the policy issue date to "save eligibility" (i.e. allow for a lesser age to meet eligibility requirements).

Occupational Underwriting Guidelines

General Occupational Guidelines

Full-Time, Part-Time and Seasonal Occupations

- Applicants must be employed on a full-time basis (at least 30 hours per week) at the time of application.
- Applicants exclusively employed in seasonal occupations are not eligible for coverage.
- Applicants engaged in more than one occupation, even on a part-time or seasonal basis, will be classified according to their most hazardous occupation.

Self-Employed Occupations

Business Owner Upgrade

One occupation class upgrade is allowed for business owners meeting the following criteria:

- at least 10 percent ownership,
- self-employed for at least three years,
- net income of at least $30,000, and
- not a medical professional, farmer or roofing contractor.

Applicants upgrading from 1A to 2A are not eligible for 10-year, to-age-65 or to-age-67 benefit periods.

Business in the Home

Self-employed applicants conducting business in their home 50 percent of the time or less will be underwritten with normal guidelines and eligible for full benefits.

Self-employed applicants conducting business more than 50 percent of the time in their home will be underwritten with the following guidelines:

- the applicant must be employed full time in the current home-based occupation for at least two years;
- the applicant must provide income verification including copies of two most recent years' tax returns, both business and personal, with all schedules and W-2 forms;
- full benefits are available based on the applicant's occupation class;
- for issue ages 18 through 55, all benefit periods are available;
- for issue ages 56 through 60, 1-year, 2-year or 5-year benefit period is available; and
- at the underwriter's discretion, Assurity may make offers on cases that would have ratings and/or exclusion riders.

NOTE: W-2 employees working in the home more than 50 percent of the time will be underwritten with normal guidelines and eligible for full benefits.

Newly Self-Employed Applicants

Newly self-employed applicants without a full calendar year's tax return from self-employment will be required to demonstrate prior full-time employment in a related field. No offers for coverage will be made to newly self-employed applicants without related experience. Any offers made will be based on the following guidelines:

- income considered in underwriting will be half of the applicant's documented average annual income over the last two years;
- standard cases only – no exclusion riders or ratings;
- issue ages 18 through 55 are eligible;
- 1-year, 2-year or 5-year benefit period is available;
- 90, 180 or 365-day elimination period is available;
- policy maximum is $2,000 monthly benefit and SDIR maximum is the monthly benefit based on half of the average of the applicant's documented annual income over the last two years; and
- Automatic Benefit Increase Rider, Catastrophic Disability Benefit Rider, Critical Illness Benefit Rider, Guaranteed Insurability Rider, Return of Premium Benefit Rider and Supplemental Disability Income Rider (SDIR) are available.

After newly self-employed applicants have been in business for one year, they are eligible for normal underwriting and full benefits based on that year's tax returns. This period may be shortened at the underwriter's discretion if the applicant is taking over for a parent or managed the business prior to ownership.

NOTE: W-2 employees transitioning to a contracted or consulting position with contracts showing a salary that will be paid for at least one year are eligible for full benefits based on their income. A copy of that contract must be provided to Assurity. If more than 50 percent of the applicant's work is conducted at home, Assurity will still allow full benefits.

Occupation Class Descriptions

All occupations are classified in the Occupation Class Guide found on AssureLINK by accessing the Occupation Guide. Descriptions and examples of each occupation class are as follows.

Occupation Class 4A

Includes professional or office-type occupations that are rarely exposed to physical or occupational hazards. Some examples include the following:

Accountant	Computer Programmer	Real Estate Agent
Architect	Office Clerk	Secretary
Biologist	Pharmacist	

Occupation Class 3A

Includes occupations similar to occupation class 4A but with certain activities or hazards involving laboratory, technical, supervisory and service work. Some examples include the following:

Clergy	Locksmith	Speech Therapist
Dental Hygienist	Nurse (RN/LPN)	Surveyor
Lab Technician	Sales Clerk	

Occupation Class 2A

Includes skilled and manual occupations in lighter industries, along with most machine operators. Some examples include the following:

Auto Mechanic	Carpenter	Plumber
Beautician	Electrician	Tailor
Bricklayer	Farmer	

Occupation Class 1A

Includes occupations involving heavy manual labor or unskilled workers where there is increased risk of accident. Some examples include the following:

Auto Body Repair	Custodian	Roofer
Bus Driver	Furniture Mover	Used Car Dealership
Construction Laborer	Painter	

NE (Not Eligible)

Includes occupations not eligible for coverage due to exposure to serious accident or occupational hazards. Some examples include the following:

Armed Forces	Bartenders	Self-Employed Artists
Athlete	Entertainer	Student
Author	Pilot	

Special Occupations

Government Employees, Railroad Employees and Teachers

The following guidelines apply to government employees, railroad employees and teachers covered under any type of teachers' disability retirement plans. Government employees include federal, state, county and city employees listed in the Occupation Class Guide in the "Government and Legal Services" section by their job duties. This section also includes law enforcement, firefighters and postal workers.

Coverage may include up to $1,000 base policy monthly benefit and the SDIR monthly benefit based on their income. *(See Financial Underwriting Guidelines section.)* The Automatic Benefit Increase Rider and Guaranteed Insurability Rider are not available; the SDIR is not available to government employees and teachers in California.

However, if the applicant has any pension payment from a previous occupation, some type of permanent government disability benefit, other group disability income insurance, or other individual disability income insurance in addition to their current group long-term disability, coverage will not be available.

Casino Employees

Casino employees directly involved in gaming activities are considered occupation class 1A and eligible for full benefits if gambling is legalized in that state and the casino is operated in accordance with the law.

Casino employees not directly involved with gaming activities are not considered "casino employees," and are classified by other responsibilities of their employment and not subject to casino employee guidelines. For example, a casino restaurant manager would be considered as a restaurant manager, occupation class 3A.

Financial Underwriting Guidelines

Income Descriptions

Earned Income

Earned income is the gross income from the applicant's occupation, including salary, wages, bonuses, commissions, fees and any other pay for personal services. If the applicant is self-employed or owns any part of a business, earned income is the applicant's share of gross income earned by the business, plus any salary or draw from the business, minus the applicant's share of normal and customary business expenses specified as deductible for tax purposes.

Unearned Income

Any kind of unearned income, such as rental property or interest income that continues even if the insured is totally disabled, does not qualify as earned income. Pension or retirement benefits are also considered unearned income.

If unearned income is greater than 15 percent of earned income, the base policy monthly benefit available at issue is reduced by one-half of the monthly unearned income.

Self-Employed Applicants with Minimal Net Income

Many self-employed individuals capitalize on depreciation and expenses to report little or no income for income tax purposes. Despite having minimal net income, these individuals may be eligible for a small disability income insurance policy if they are:

- self-employed in the same business for two years,
- self-employed on a full-time basis (at least 30 hours),
- under age 55 at the time of application, and
- not showing a business loss on their most recent tax return.

For these applicants, Assurity will consider up to $600 monthly benefit ($300 base policy monthly benefit and $300 SDIR monthly benefit) with a 1-year, 2-year or 5-year benefit period. The elimination period must be at least 60 days. No riders will be available.

Income Verification

Income verification will be required as part of the underwriting process. Copies of complete tax returns may be submitted but generally, the information suggested in the table below will suffice. State tax returns are usually unnecessary. Assurity may request additional information if necessary.

It is important to provide the most recent documentation. Since income typically increases each year, the most recent documentation will allow for our most favorable consideration. If you have questions, please contact our new business contact center at (800) 869-0355, Ext. 4264.

INCOME VERIFICATION CHART FOR EMPLOYEES		
Employee Only	**Monthly Benefit Requested**	**Income Verification**
Not self-employed	In California, regardless of coverage requested	Two paystubs, Federal Tax Form W-2 or federal tax return
	$3,000 or less	None (in states other than California)
	More than $3,000	Two paystubs, Federal Tax Form W-2 or federal tax return
Self-employed or commissioned salesperson	In California, regardless of coverage requested	Two years federal tax returns with all schedules and a Federal Tax Form W-2
	$2,500 or less	None (in states other than California)
	More than $2,500 and 1-year, 2-year, 5-year or 10-year benefit period	Federal tax return with all schedules and a Federal Tax Form W-2 (in states other than California)
	More than $2,500 and to-age-65 or to-age-67 benefit period	Two years federal tax returns with all schedules and a Federal Tax Form W-2

NOTE: Any occupation class 2A applicant desiring a to-age-65 or to-age-67 benefit period *(requirements listed in the Policy Description section)* must supply income verification regardless of the amount of monthly benefit requested.

INCOME VERIFICATION CHART FOR BUSINESSES		
	Income Verification	
Business	**Personal Information**	**Business Information**
Sole proprietor	Federal Tax Form 1040 including Schedule C	None
Farmer or Rancher	Federal Tax Form 1040 including Schedule F	None
Owner of C Corporation	Federal Tax Form W-2	Federal Corporate Tax Form 1120 including Schedule E
Owner of S Corporation	Federal Tax Form W-2 Federal Tax Form 1040 including Schedule E, Part II	Federal Corporate Tax Form 1120S including Schedule K-1
Partner of Partnership	Federal Tax Form 1040 including Schedule E, Part II	Federal Partnership Tax Form 1065 including Schedule K-1

Bankruptcy

Consideration of financial stability is an important part of the underwriting process. Where bankruptcy is concerned, here are some of the guidelines that apply:

BANKRUPTCY GUIDELINE CHART	
Applicant Status	**Underwriting Decision**
Ongoing or pending bankruptcy	Decline
Single bankruptcy, less than two years since discharge	Decline
Single bankruptcy, more than two years since discharge	Available on a case-by-case basis with copies of discharge documentation and two most recent years' tax returns. Coverage offered up to 5-year benefit period and no less than 90-day elimination period.
Multiple bankruptcies, less than seven years since discharge	Decline
Multiple bankruptcies, more than seven years since discharge	Available on a case-by-case basis with copies of discharge documentation and two most recent years' tax returns. Coverage offered on a case-by-case basis.
Any history of bankruptcy and fraud or psychiatric disorders	Decline

Maximum Issue and Participation Limits by Occupation Class

Coverage is limited by occupation class are as follows (subject to availability of reinsurance):

MAXIMUM ISSUE AND PARTICIPATION LIMIT BY OCCUPATION CLASS CHART		
Occupation Class	**Maximum Issue Limit**	**Maximum Participation Limit**
4A	$15,000	$15,000
3A	15,000	15,000
2A	10,000	10,000
1A	8,000	8,000

The maximum participation limits in each occupation class are determined by the availability of reinsurance and other coverage in force or applied for by the applicant. Other sources of income protection must be considered to avoid over-insurance. Those sources include group disability income insurance, salary continuation plans, social insurance disability benefits, retirement disability coverage and other individual disability income insurance.

Maximum Issue Limits by Income

The minimum issue limit is $500 of total monthly benefit from at least $200 base policy monthly benefit and at least $100 SDIR monthly benefit, if selected. The maximum issue limit is determined by the applicant's occupation class, income and in-force disability coverage. *(See the following Maximum Issue Limits by Income Chart.)*

Applicants with less than $1,200 monthly earned income are not eligible for coverage. If the applicant's income is between listed income amounts, the maximum issue limits are according to the higher listed income amount.

Other sources of income protection will be considered to avoid over-insurance including group disability income, salary continuation, social insurance disability, retirement disability, and other individual disability income. Unless being replaced, these in-force coverages must be subtracted from the maximum issue limits allowed per the table below.

If the applicant has group long-term disability (LTD) coverage in force or applied for, the total benefit allowable is the amount listed in the Group Supplement Issue & Participation column minus the in-force group LTD and any individual disability income insurance in force or applied for. The remaining amount can be split between Base Policy and SDIR monthly benefits listed in the income table, not to exceed either maximum.

For business owners with at least 10 percent ownership, net income utilized in determining the maximum issue limits by income can be increased by 15 percent. With this enhancement, the policy may be increased by up to $750 of monthly benefit, and the SDIR may be increased up to the $1,800 limit. Issue and participation limits by occupation classes still apply.

MAXIMUM ISSUE LIMITS BY INCOME CHART

* **Individual Paid** limit applies (1) if no other DI coverage, (2) for individual paid DI or (3) for employee paid group DI.

** **Employer Paid** limit applies (1) for employer-paid group DI or (2) for employer-paid individual DI. Available Century+ DI coverage is posted limit less amount of employer-paid coverage.

		Monthly Benefit			
Annual Income	**Monthly Income**	**Base Policy Max**	**SDIR Max**	**Individual Paid* Total Max**	**Employer Paid** Issue & Participation**
Not available below $1,200 monthly income					
$14,400	$1,200	$350	$550	$900	$950
15,600	1,300	380	600	980	1,040
16,800	1,400	450	600	1,050	1,120
18,000	1,500	480	650	1,130	1,200
19,200	1,600	550	650	1,200	1,280
20,400	1,700	580	700	1,280	1,360
21,600	1,800	650	700	1,350	1,440
22,800	1,900	730	800	1,430	1,525
24,000	2,000	750	900	1,500	1,600
25,200	2,100	800	900	1,550	1,655
26,400	2,200	830	950	1,630	1,740
27,600	2,300	900	1,000	1,700	1,815
28,800	2,400	930	1,050	1,780	1,930
30,000	2,500	1,000	1,100	1,850	2,010
31,200	2,600	1,030	1,150	1,930	2,100
32,400	2,700	1,100	1,200	2,000	2,200
33,600	2,800	1,130	1,250	2,080	2,290
34,800	2,900	1,200	1,300	2,150	2,430
36,000	3,000	1,270	1,300	2,220	2,530
37,200	3,100	1,300	1,350	2,300	2,650
38,400	3,200	1,370	1,350	2,370	2,750
39,600	3,300	1,440	1,400	2,440	2,900
40,800	3,400	1,480	1,400	2,480	2,950
42,000	3,500	1,520	1,400	2,570	3,080

MAXIMUM ISSUE LIMITS BY INCOME CHART

* **Individual Paid** limit applies (1) if no other DI coverage, (2) for individual paid DI or (3) for employee paid group DI.

** **Employer Paid** limit applies (1) for employer-paid group DI or (2) for employer-paid individual DI. Available Century+ DI coverage is posted limit less amount of employer-paid coverage.

		Monthly Benefit			
Annual Income	**Monthly Income**	**Base Policy Max**	**SDIR Max**	**Individual Paid* Total Max**	**Employer Paid** Issue & Participation**
43,200	3,600	1,580	1,500	2,630	3,160
44,400	3,700	1,620	1,500	2,670	3,200
45,600	**3,800**	1,650	1,550	2,750	3,300
46,800	**3,900**	1,700	1,600	2,800	3,350
48,000	**4,000**	1,740	1,600	2,890	3,470
49,200	**4,100**	1,780	1,600	2,930	3,520
50,400	**4,200**	1,830	1,600	2,980	3,580
51,600	**4,300**	1,900	1,600	3,050	3,660
52,800	**4,400**	1,980	1,650	3,130	3,760
54,000	**4,500**	2,000	1,650	3,150	3,780
55,200	**4,600**	2,020	1,700	3,220	3,860
56,400	**4,700**	2,090	1,700	3,290	3,950
57,600	**4,800**	2,100	1,700	3,300	3,960
58,800	**4,900**	2,180	1,700	3,380	4,050
60,000	**5,000**	2,200	1,750	3,400	4,080
61,200	**5,100**	2,220	1,750	3,420	4,100
62,400	**5,200**	2,230	1,750	3,430	4,120
63,600	**5,300**	2,250	1,750	3,450	4,140
64,800	**5,400**	2,260	1,800	3,460	4,150
66,000	**5,500**	2,270	1,800	3,470	4,160
67,200	**5,600**	2,320	1,800	3,520	4,220
68,400	**5,700**	2,360	1,800	3,560	4,270
69,600	**5,800**	2,390	1,800	3,590	4,310
70,800	**5,900**	2,430	1,800	3,630	4,350
72,000	**6,000**	2,460	1,800	3,660	4,390
74,400	**6,200**	2,520	1,800	3,720	4,460
76,800	**6,400**	2,600	1,800	3,800	4,560
79,200	**6,600**	2,690	1,800	3,890	4,670
81,600	**6,800**	3,050	1,800	4,250	5,100
84,000	**7,000**	3,140	1,800	4,340	5,200
86,400	**7,200**	3,230	1,800	4,430	5,300
88,800	**7,400**	3,240	1,800	4,440	5,330
91,200	**7,600**	3,360	1,800	4,560	5,475
93,600	**7,800**	3,480	1,800	4,680	5,600
96,000	**8,000**	3,600	1,800	4,800	5,760
98,400	**8,200**	3,720	1,800	4,920	5,900
100,800	**8,400**	3,840	1,800	5,040	6,050
103,200	**8,600**	3,920	1,800	5,120	6,145
105,600	**8,800**	4,040	1,800	5,240	6,290
108,000	**9,000**	4,100	1,800	5,300	6,360

MAXIMUM ISSUE LIMITS BY INCOME CHART

* **Individual Paid** limit applies (1) if no other DI coverage, (2) for individual paid DI or (3) for employee paid group DI.

** **Employer Paid** limit applies (1) for employer-paid group DI or (2) for employer-paid individual DI. Available Century+ DI coverage is posted limit less amount of employer-paid coverage.

		Monthly Benefit			
Annual Income	**Monthly Income**	**Base Policy Max**	**SDIR Max**	**Individual Paid* Total Max**	**Employer Paid** Issue & Participation**
110,400	**9,200**	4,190	1,800	5,390	6,470
112,800	**9,400**	4,300	1,800	5,500	6,600
115,200	**9,600**	4,360	1,800	5,560	6,670
117,600	**9,800**	4,480	1,800	5,680	6,815
120,000	**10,000**	4,500	1,800	5,700	6,840
122,400	**10,200**	4,600	1,800	5,800	6,960
124,800	**10,400**	4,730	1,800	5,930	7,115
127,200	**10,600**	4,840	1,800	6,040	7,245
129,600	**10,800**	4,950	1,800	6,150	7,380
132,000	**11,000**	5,020	1,800	6,220	7,460
134,400	**11,200**	5,080	1,800	6,280	7,535
136,800	**11,400**	5,180	1,800	6,380	7,655
139,200	**11,600**	5,290	1,800	6,490	7,790
141,600	**11,800**	5,400	1,800	6,600	7,920
144,000	**12,000**	5,520	1,800	6,720	8,060
146,400	**12,200**	5,600	1,800	6,800	8,160
148,800	**12,400**	5,680	1,800	6,880	8,255
151,200	**12,600**	5,730	1,800	6,930	8,315
153,600	**12,800**	5,840	1,800	7,040	8,450
156,000	**13,000**	5,950	1,800	7,150	8,580
158,400	**13,200**	6,060	1,800	7,260	8,710
160,800	**13,400**	6,170	1,800	7,370	8,845
163,200	**13,600**	6,280	1,800	7,480	8,975
165,600	**13,800**	6,390	1,800	7,590	9,100
168,000	**14,000**	6,500	1,800	7,700	9,240
180,000	**15,000**	7,050	1,800	8,250	9,900
192,000	**16,000**	7,600	1,800	8,800	10,560
204,000	**17,000**	8,150	1,800	9,350	11,220
216,000	**18,000**	8,600	1,800	9,800	11,750
228,000	**19,000**	9,060	1,800	10,260	12,300
240,000	**20,000**	9,600	1,800	10,800	12,960
250,000	**20,833**	10,050	1,800	11,250	13,500
260,000	**21,650**	10,490	1,800	11,690	14,000
270,000	**22,500**	10,950	1,800	12,150	14,580
280,000	**23,333**	11,050	1,800	12,250	14,700
290,000	**24,165**	11,450	1,800	12,650	15,000
300,000	**25,000**	11,550	1,800	12,750	15,000
310,000	**25,833**	11,800	1,800	13,000	15,000
320,000	**26,665**	12,050	1,800	13,250	15,000

MAXIMUM ISSUE LIMITS BY INCOME CHART

* **Individual Paid** limit applies (1) if no other DI coverage, (2) for individual paid DI or (3) for employee paid group DI.

** **Employer Paid** limit applies (1) for employer-paid group DI or (2) for employer-paid individual DI. Available Century+ DI coverage is posted limit less amount of employer-paid coverage.

		Monthly Benefit			
Annual Income	**Monthly Income**	**Base Policy Max**	**SDIR Max**	**Individual Paid* Total Max**	**Employer Paid** Issue & Participation**
330,000	**27,500**	12,450	1,800	13,650	15,000
340,000	**28,333**	12,800	1,800	14,000	15,000
350,000	**29,166**	13,250	1,800	14,450	15,000
360,000	**30,000**	13,650	1,800	14,850	15,000
370,000	**30,833**	13,800	1,800	15,000	15,000

Maximum Issue Amounts for Farm/Ranch

MAXIMUM ISSUE LIMITS FOR FARM/RANCH HOUSEHOLD WITH MINIMAL NET INCOME CHART

		Primary Farmer/Rancher			Spouse Working Full-Time on Farm/Ranch		
		Monthly Benefit			Monthly Benefit		
Acres or…	**Herd Size**	**Base Policy Max**	**SDIR Max**	**Total Max**	**Base Policy Max**	**SDIR Max**	**Total Max**
240-319	24-49	$600	$600	$1,200	$300	$300	$600
320-499	50-74	750	750	1500	400	400	800
500+	75+	1,000	1,000	2,000	500	500	1,000

NOTE: Farmers and ranchers that qualify based on acres or herd size are eligible for all benefit periods (except to-age-65 and to-age-67), all elimination periods, and all riders (except the Residual Disability Benefit Rider); they are not eligible for the Business Owner Upgrade of one occupation class.

Farmers and ranchers with less than 240 acres and a herd size of 24 may be eligible for coverage according to guidelines for Self-Employed Applicants with Minimal Net Income found under the Financial Underwriting Guidelines section of this guide.

Medical Underwriting Guidelines

Non-Medical Limits and Exam Requirements
Upon completion of the application for the proposed insured, arrangements should be scheduled to fulfill underwriting requirements indicated on the following chart. When using the chart, please note the following:

Age
- All age calculations should use the age nearest birthday.

Amount of Coverage
- To calculate the amount of coverage used in determining underwriting requirements, add up the total amount of coverage applied for on this application plus other disability income and business overhead insurance in force with Assurity.

Exam
- In the chart below, "Exam" means paramedical exams for most applicants. Applicants with a history of rheumatic fever, heart murmurs or other extensive medical conditions should be examined by a physician. If there is any question about an applicant's examination, contact the underwriting department.

- If a TeleApp is completed, or if all questions on the application are completed, Assurity can waive the paramedical exam and use an abbreviated exam in which the paramed records height, weight, blood pressure and pulse.

Urinalysis (UA)
- If required, included in paramedical exam.

Blood Requirements (BLD)
- A fasting full blood draw is required; a dried blood spot (DBS) is not acceptable.

Electrocardiogram (EKG)
- If required, included in paramedical exam.

EXAM LIMITS CHART (for California only)					
Age	**Amount of Coverage**	**Exam**	**UA**	**BLD**	**EKG**
18 - 30	$500 and above	Yes	Yes	Yes	No
31 - 40	$500 - $5,000	Yes	Yes	Yes	No
	$5,001 and above	Yes	Yes	Yes	Yes
41 – 50	$500 - $3,500	Yes	Yes	Yes	No
	$3,501 and above	Yes	Yes	Yes	Yes
51-55	$500 - $2,500	Yes	Yes	Yes	No
	$2,501 and above	Yes	Yes	Yes	Yes
56 – 60	$500 and above	Yes	Yes	Yes	Yes

EXAM LIMITS CHART (for all states except California)					
Age	**Amount of Coverage**	**Exam**	**UA**	**BLD**	**EKG**
18 - 50	$500 - $3,000	No	No	No	No
	$3,001 and above	Yes	Yes	Yes	No
51 - 55	$500 - $2,000	No	No	No	No
	$2,001 - $5,000	Yes	Yes	Yes	No
	$5,001 and above	Yes	Yes	Yes	Yes
56 - 60	$500 - $1,500	No	No	No	No
	$1,501 - $5,000	Yes	Yes	Yes	No
	$5,001 and above	Yes	Yes	Yes	Yes

NOTE: These limits are subject to change at any time. Assurity reserves the right to require a medical exam and/or other medical requirements on any applicant.

Authorized Paramedical Firms

Our authorized paramedical firms have the examination forms, containers and blood draw kits in stock.

For significant medical health histories or if the applicant has previously been declined, contact the new business contact center at (800) 869-0355, Ext. 4264, prior to scheduling an examination.

Paramedical firms authorized by Assurity are as follows:

American Paraprofessional Systems, Inc. (APPS)	(800) 635-1677
Examination Management Services (EMSI)	(800) 872-3674
Quest Diagnostics – ExamOne	(800) 873-8845
Hooper Holmes Portamedic National Service Center	(800) 765-1010

Height/Weight Build Charts

These charts provide a guideline for policy issue and table rating. The actual underwriting decision incorporates other factors and may not exactly match these tables.

MALE HEIGHT / WEIGHT BUILD CHART						
Height	Underweight Table Rating	Average Weight	Overweight Table Rating			
	1		1	2	3	4
5' 0"	90	129	175	187	199	209
5' 1"	93	133	181	193	205	215
5' 2"	97	138	188	200	213	224
5' 3"	100	143	194	207	220	232
5' 4"	103	147	200	213	226	238
5' 5"	106	151	205	219	233	245
5' 6"	109	156	212	226	240	253
5' 7"	112	160	218	232	246	259
5' 8"	116	165	224	239	254	267
5' 9"	119	170	231	247	262	275
5' 10"	122	174	237	252	268	282
5' 11"	125	179	243	260	276	290
6' 0"	129	184	250	267	283	298
6' 1"	133	190	258	276	293	308
6' 2"	137	195	265	283	300	316
6' 3"	141	201	273	291	310	326
6' 4"	144	206	280	299	317	334
6' 5"	148	211	287	306	325	342
6' 6"	152	217	295	315	334	352
6' 7"	156	223	303	323	343	361
6' 8"	160	228	310	331	351	369

NOTE: Cases exceeding rating of Table 4 are rarely considered; please consult with an underwriter.

FEMALE HEIGHT/WEIGHT BUILD CHART						
Height	Underweight Table Rating	Average Weight	Overweight Table Rating			
	1		1	2	3	4
4' 8"	75	107	156	167	177	185
4' 9"	77	110	161	172	182	190
4' 10"	79	113	165	176	186	195
4' 11"	81	115	168	179	190	199
5' 0"	83	118	172	184	195	204
5' 1"	85	121	177	189	200	209
5' 2"	87	124	181	193	205	215
5' 3"	90	128	187	200	211	221
5' 4"	92	131	191	204	216	227
5' 5"	94	134	196	209	221	232
5' 6"	96	137	200	214	226	237
5' 7"	99	141	206	220	233	244
5' 8"	102	145	212	226	239	251
5' 9"	105	150	219	234	248	260
5' 10"	107	153	223	239	252	265
5' 11"	111	159	232	248	262	275
6' 0"	115	164	239	256	271	284
6' 1"	118	168	245	262	277	291
6' 2"	120	172	251	268	284	298
6' 3"	123	176	257	275	290	304
6' 4"	127	181	264	282	299	313

NOTE: Cases exceeding rating of Table 4 are rarely considered; please consult with an underwriter.

Additional Underwriting Information to Expedite Processing

Underwriting action often depends on answers to a number of basic questions specific to the condition or situation. In addition to information provided in the application, the underwriting process can be expedited by providing such additional underwriting information as outlined below. On a separate sheet of paper attached to the application, provide the information as specified for conditions or situations listed under conditions 1 through 13 in the following section. For any condition or situations not listed, please provide information according to No. 14.

1. **Arthritis**
   - Applicant's name
   - Type of arthritis
   - Joints and areas involved
   - Currently prescribed medications and treatment
   - Name, address and phone number of all physicians and medical facilities

2. **Asthma, emphysema or bronchitis**
   - Applicant's name
   - Number of attacks in the past 12 months
   - Date of last attack
   - Hospitalizations due to respiratory condition
   - Date of last hospitalization (if any)
   - Currently prescribed medications and treatment
   - Name, address and phone number of all physicians and medical facilities

3. **Back or neck pain or problems**
   - Applicant's name
   - Diagnosis (sprain, strain, herniated disc, etc.)
   - Area of the back or neck affected
   - Date of last symptom
   - Currently prescribed medications and treatment
   - Date of last treatment
   - Name, address and phone number of physician and medical facilities

4. **Diabetes or glucose metabolism abnormalities**
   - Applicant's name
   - Diagnosis
   - Date of onset or diagnosis
   - Currently prescribed medications and treatment
   - Date(s) of any hospitalizations
   - Related conditions – eye disorders, kidney disorders, heart disorders, recurrent infections, circulatory problems, amputations, skin ulcers
   - Other conditions/symptoms due to diabetes
   - Name, address and phone number of physician and medical facilities

5. **Epilepsy or seizure**
   - Applicant's name
   - Type of epilepsy or seizure
   - Date of onset or diagnosis
   - Date of last seizure
   - Currently prescribed medications or treatment
   - Name, address and phone number of all physicians and medical facilities

6. **Heart attack, angina or coronary artery disease**
   - Date of onset or diagnosis
   - Diagnosis
   - Date of last symptoms
   - Tests completed or prescribed
   - Currently prescribed medications and treatment
   - Name, address and phone numbers of all physicians and medical facilities

7. **Heart murmur**
   - Applicant's name
   - Date of onset or diagnosis
   - Type of murmur
   - Restrictions to activities
   - Currently prescribed medications and treatments
   - Name, address and phone number of physician and medical facilities

8. **High blood pressure**
   - Applicant's name
   - Date of onset or diagnosis
   - Currently prescribed medications or treatment
   - Name, address and phone number of physicians and medical facilities

9. **Kidney or urinary tract disease or disorder**
   - Applicant's name
   - Disease or disorder
   - Currently prescribed medications and treatments
   - Tests completed
   - Name, address and phone number of physician and medical facilities

10. **Stomach and/or digestive tract disorders**
    - Applicant's name
    - Diagnosis
    - Date of onset
    - Date of last symptoms
    - Currently prescribed medications and treatment
    - Name, address and phone number of physicians and medical facilities

11. **Tumor, polyp or cyst**
    - Applicant's name
    - Diagnosis
    - Location of growth
    - Date of removal
    - Currently prescribed medications and treatment
    - Follow-ups planned
    - Name, address and phone number of physician and medical facilities

12. **Driving under the Influence (DUI)**
    - Applicant's name
    - Date of offense
    - Number of DUI offenses
    - License currently suspended
    - Current employment

13. **Drug or alcohol abuse**
    - Applicant's name
    - Types of drugs or alcohol used
    - Dates of last drug or alcohol use
    - Treatment dates
    - Current affiliation in support group - Alcoholics Anonymous (AA), Narcotics Anonymous (NA)

14. **All other medical conditions**
    - Applicant's name
    - Diagnosis
    - Date of onset or diagnosis
    - Residual or ongoing symptoms
    - Date of last symptoms
    - Tests completed or prescribed
    - Currently prescribed medications or treatment
    - Names, addresses and phone numbers of all physicians and medical facilities

About Assurity

Assurity Life Insurance Company's origins are rooted in a 120-year legacy of providing long-term security to policyholders that has earned generations of customers' confidence and trust.

Assurity Life serves customers across the nation, offering disability income, critical illness, accident and life insurance, annuities and specialty insurance plans through our representatives and worksite distribution.

With assets exceeding $2 billion, Assurity Life has built a reputation for "best in class" service and sound, conservative business practices with a disciplined approach to financial management. Headquartered in Lincoln, Neb., Assurity Life has earned a high rating from A.M. Best Company, one of the insurance industry's leading independent analysts. For more information about this rating, please visit www.ambest.com or www.assurity.com.

We're proud of our history of integrity, financial accountability…and helping people through difficult times.

Revisions to this Underwriting Guide

Date	Section	Update
04/17/15	Maximum Issue Limits by Income	Corrected text relative to in-force coverage
04/01/15	Important Notice	Removed reference to not applying to CA – this guide does now apply to Century+ in CA
04/01/15	Multi-Life Discount	Removed discontinued Personal Disability Income - CA
04/01/15	Special Occupations	Added some restrictions for CA
04/01/15	Personal History Interviews	Added requirements for CA
04/01/15	Income Verification	Added requirements for CA
04/01/15	Exam Limits Chart	Added requirements for CA