

The Florida Life Insurance Application for the Living Promise Product permits one base policy per application and includes a checklist for submitting a complete application to United of Omaha Life Insurance Company. Applicants must choose between a Level Benefit Product, which allows optional riders such as the Accelerated Death Benefit Rider and Accidental Death Benefit Rider, or a Graded Benefit Product, which does not offer riders. Submission guidelines necessitate a cover letter if needed, the inclusion of the Producer Report page, and that all changes be initialed and dated by the applicant. Essential forms include a Replacement Notice, Payment Authorization, Conditional Receipt (if applicable), and an Accelerated Benefit Rider Disclosure, all of which must be signed and retained by the client.

The application features health-related questions that assess eligibility for coverage. A "yes" answer to specific questions regarding serious health conditions or treatments may render the applicant ineligible for coverage or only eligible for the Graded Benefit Product. Conditions such as cancer, heart disease, and mental health disorders are specifically noted, while a "no" response to all health questions may qualify the applicant for the Level Benefit Product. Optional comments can be included for additional information. Premium payment options consist of direct billing or bank draft, with various frequencies available, and the applicant must authorize the release of medical and personal information to United of Omaha for underwriting purposes. The application must be fully completed, including all pages, to ensure proper processing.

The policy document outlines the authorization for disclosing personal information to the Medical Information Bureau (MIB), which may share this information with other insurance companies upon request. This authorization is valid for 24 months and can be revoked at any time, although revocation does not affect actions taken by United of Omaha based on the authorization. The applicant must provide truthful information, as any misleading answers may void the application and any issued policy. Coverage will not take effect until all application requirements are met, the policy is issued, and the first premium is paid. The issue date will be indicated on the policy document,

even if coverage starts later. The applicant must notify United of Omaha of any changes in the Proposed Insured's health or habits that could affect the application. If the Proposed Insured dies or is ineligible for insurance before the policy is issued, no coverage will be in effect. For those applying for a Graded Benefit Product, a reduced death benefit applies for the first two years if death results from sickness, while the full amount is payable for accidental death during that period.

The document also includes sections for beneficiary information, other coverage details, and a fraud warning indicating that providing false information is a felony. The agent's responsibilities include ensuring that the Proposed Insured has disclosed any existing insurance and that the application process complies with state and company requirements. The payment authorization form allows for electronic transfers for premium payments, which can vary based on underwriting adjustments. The authorization for the release of information permits Mutual of Omaha to share personal and medical information with the applicant's insurance agent, with the understanding that such information may be re-disclosed if the recipient is not covered by federal privacy regulations. Conditions under which benefits may be payable prior to policy delivery are specified, including the requirement that the first premium is paid and that all statements in the application are true and complete. Coverage provided by the receipt will end under specific conditions, such as after 60 days or upon delivery of the policy.

The Conditional Receipt issued by United of Omaha Life Insurance Company provides temporary coverage for proposed insured individuals while their application is processed. If a proposed insured dies during this coverage period, the benefit payable to the designated beneficiaries will be the lesser of the death benefit amount specified in the application or \$40,000, minus any amounts from other temporary insurance agreements. However, if the proposed insured dies by suicide or self-inflicted injury, United will only refund the premium paid with the application. Coverage under this Receipt will terminate after 60 days, upon delivery of the policy, or if the application is declined or withdrawn. The applicant must ensure that all statements in the application are true and complete, and that all required documents are submitted to United. The policyholder is not

authorized to change the terms of the Receipt, and the Producer has no authority to alter its terms.

Additionally, the Accelerated Death Benefit Rider allows for an early payout of the death benefit if the insured is diagnosed with a terminal illness or is chronically ill, as certified by a physician. The benefit amount is subject to reductions: a 6% reduction for terminal illness and a reduction based on a confinement factor for chronic illness, along with a \$100 charge and any outstanding loans or premiums. This rider is not available if the policy is issued as a graded death benefit. The applicant acknowledges receipt of the disclosure regarding the rider and its implications, including potential tax consequences and effects on government benefits. The authorization for the release of personal and medical information to the insurance agent or agency is also included, which remains valid for 24 months unless revoked.