

This form is to be used only when a person desires and is eligible to port Term Life Insurance. This form must be completed in full and submitted to The Company within 31 days following the date of termination. SEND TO: Reliance Standard Life Insurance Company, Premium Billing and Collection, 2001 Market Street, Suite 1500, Philadelphia, PA 19103-7090.

VERIFICATION OF INSURED PERSON'S ELIGIBILITY TO PORT TERM LIFE INSURANCE

To Be Completed By Policyholder/Participating Unit Male Female

1. Insured Person's full name _____ (Please Print) 2. Soc. Sec. Number _____

3. Name of Policyholder/Participating Unit _____ 4. Policyholder/Participating Unit No.: _____

5. Branch or Location (if different from 3.) _____

6. Date Employed: _____ Salary: _____ Date Last Salary Change: _____ Class: _____

7. Effective Date of Coverage: Employee: _____ Spouse, if any: _____ Children, if any: _____

8. Occupation/Job Title _____ 9. Date Person Last Worked _____

10. Date Employment Terminated (if different from 9.) _____

11. If (9) and (10) differ, please explain _____

12. Amount of Term Life Insurance (including the amount of any AD&D rider coverage, if applicable) in force under the Policy on date of termination: Employee \$ _____ Spouse, if any \$ _____ Children, if any \$ _____

13. Verified by _____ (Signed by authorized individual) Date _____ Phone Number _____

To Be Completed By Applicant

Name _____ Spouse's Name _____

Address _____ (Street) _____ (City) _____ (State) _____ (Zip)

Date of Birth: Employee: _____ Spouse, if any _____ Children, if any _____

Amount of Coverage Desired (must be equal to or less than amount in force): may not exceed \$500,000 from all Reliance Standard Life/AD&D coverage combined):

Employee: \$ _____ Spouse, if any: \$ _____ Children, if any: \$ _____

Beneficiary:

Full Name(s)	Relationship	Percent of Proceeds	SSN
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Signature of Applicant _____ Email Address _____ Phone Number _____ Date Signed _____

Portability Rates

Per \$10,000 of **GL and VG** Term Life Benefit per **Quarter Year** (Per Employee and Per Spouse)

***Please note these rates may change without prior notice and apply to standard **GL and VG** policies only.

<u>Ages</u>	<u>Life Rates</u>	<u>AD&D Rates</u>
Under 30	4.56	1.26
30 – 34	5.86	1.05
35 – 39	7.16	.99
40 – 44	11.02	.99
45 – 49	18.09	1.02
50 – 54	30.36	1.08
55 – 59	50.30	1.17
60 – 64	66.33	1.26
65 – 69	95.34	1.35
70 or more	198.20	1.47

Children Benefit Level

(The following applies depending on your coverage)

Rates per Quarter Year

\$1,000 ages 14 days to six months and \$2,000 for six months to 20 years	\$1.86
\$1,000 ages 14 days to six months and \$2,000 for six months to 20 years; Full-time students under 26 years	\$1.95
\$1,000 ages 14 days to six months and \$2,500 for six months to 20 years; Full-time students under 26 years	\$2.19
\$1,000 ages 14 days to six months and \$5,000 for six months to 20 years; Full-time students under 26 years	\$3.27
\$1,000 ages 14 days to six months and \$7,500 for six months to 20 years; Full-time students under 26 years	\$4.38
\$1,000 ages 14 days to six months and \$10,000 for six months to 20 years; Full-time students under 26 years	\$5.49
\$1,000 ages 14 days to six months and \$20,000 for six months to 20 years; Full-time students under 26 years	\$9.92

Customer Care is available Monday through Friday from 8 a.m. to 7 p.m. (Eastern).
Call **800-351-7500** if you need assistance.

**SUPPLEMENTAL LIFE - PORTABILITY
BENEFITS & FEATURES**

Eligibility	<p>You can port coverage under the group life policy if you are no longer eligible for coverage under this policy.</p> <p>To be eligible for portability, you must have been covered for twelve (12) months under this Policy and / or the prior group policy.</p> <p>You are not eligible for Portability if:</p> <ol style="list-style-type: none"> (1) you are considered Totally Disabled under the Waiver of Premium in Event of Total Disability or Extension of Life Insurance in Event of Total Disability provisions; or (2) you have already applied to convert all your coverage under the Conversion privilege, (3) you retire, (4) your coverage is reduced.
Timing for Application	<p>Within 31 days from the date you are no longer eligible for coverage under this policy</p>
Death during Application Period	<p>You must apply for Portability during the 31-day application period. Unlike Conversion, if you die within the 31-day application period and have not applied for Portability, Reliance Standard will not pay a benefit.</p>
Medical Approval (Evidence of Insurability)	<p>Proof of good health is not required.</p>
Disability Status	<p>You may port your coverage if you are sick, injured or disabled as long as you are not considered Totally Disabled under the Waiver of Premium in Event of Total Disability or Extension of Life Insurance in Event of Total Disability provisions, if applicable.</p>
Premium Information	<p>Please see attached premium rate information for Portability.</p> <p>Premium will be billed directly to you on a quarterly, semi-annual or annual basis. You will be advised when the first premium is due.</p>
Face or Coverage Amount	<p>The amount of coverage available will be the current amount of coverage you were insured for under the Policy on the last day you were Actively at Work. However, the amount of coverage will never be more than:</p> <ol style="list-style-type: none"> (1) the highest amount of insurance available to Eligible Persons under your employer's plan; or (2) a total of \$500,000 from all Reliance Standard group life and accidental death and dismemberment insurance combined, whichever is less.
Maximum Duration of Coverage	<p>Insurance coverage continued under the Portability provision will terminate on the first of the following to occur:</p> <ol style="list-style-type: none"> (1) the end of the period for which premium has been paid; or (2) the ported policy has been in force for 2 years, or (3) the policy terminates. <p>If Portability coverage terminates due to (2) or (3) above then coverage may be converted to an individual life insurance policy.</p>

Portability Procedures

- To receive an application to port your life insurance, please contact your employer.
- To get a quote on the amount it will cost to port your life insurance, please refer to the Portability rates schedule attached to the Portability Application.
- When requested, the policyholder portion will be completed by your employer as verification of your current coverage.
- The portability application must be received by Reliance Standard with both the policyholder and employee sections completed within 31 days of termination.
- You may port any amount of your current coverage, not to exceed the amount of Supplemental Life insurance that was in force at the time of termination.
- You may port your Supplemental Life coverage only.
- Forward form to:

**Reliance Standard Life
 2001 Market Street
 Suite 1500
 Philadelphia, PA 19103
 1 (800) 644-1103**
- A quote outlining the coverage amount and cost will be sent you by Reliance Standard Life.
- Upon receipt of the initial premium, an individual Term life policy number will be issued to you by Reliance Standard Life.