

**ADDvantage 10 (guar 10)**

**Product Feature**

**Description:**

North American guarantees the current initial premiums for the specified number of years (10, 15, 20, 30)

ADDvantage offers five underwriting classifications that provide economical rates for clients who meet reasonable underwriting requirements. With marketable features and competitive rates, ADDvantage can offer your clients affordable protection and invaluable peace of mind.

**Age Limits:**

Based on: Age Nearest    Min Issue Age: 18    Max Issue Age: 75

**Face Amounts:**

Min Benefit Amount: \$100,000.00    Max Benefit Amount: Over

**Risk Classes:**

**Risk Class Name:**

- Super Preferred NT
- Preferred NT
- Standard NT
- Preferred Tob
- Standard Tob

**Modal Factors:**

**Mode Method Factor**

- Annual Direct Bill    1
- Semi-Annual Direct Bill    0.522
- Quarterly Direct Bill    0.274
- Monthly List Bill    0.094

**Annual Policy Fee:**

**Method:**Direct Bill **Policy Fee:** 65 **Commissionable:**False

**Method:**List Bill **Policy Fee:** 65 **Commissionable:**False

**Approvals:**

**Location Name:**

Alabama,Alaska,Arizona,Arkansas,California,Colorado,Connecticut,Delaware,Florida,Georgia,Hawaii,Idaho,Illinois,Indiana,Iowa,Kansas,Kentucky,Louisiana,Maine,Maryland,Massachusetts,Michigan,Minnesota,Mississippi,Missouri,Montana,Nebraska,Nevada,New Hampshire,New Jersey,New Mexico,North Carolina,North Dakota,Ohio,Oklahoma,Oregon,Pennsylvania,Rhode Island,South Carolina,South Dakota,Tennessee,Texas,Utah,Vermont,Virginia,Washington,Washington D.C.,West Virginia,Wisconsin,Wyoming

**Rider Summary:**

Available riders and endorsements for ADDvantage plans include: Accelerated Benefit Endorsement Child Term Rider Waiver of Term Premium for Disability Rider

**Conversion Information:**

Allowed during the level premium period of the policy, or through age 74 (whichever is earlier), but never less than five years

## Underwriting Guidelines

	<b>Super Preferred NT</b>	<b>Preferred NT</b>	<b>Preferred Tob</b>
<b>Alcohol/Drug History</b>	No History of alcohol or drug abuse for treatment in 10 years.	No history of alcohol or drug abuse or treatment in 7 years.	No history of alcohol or drug abuse or treatment in 7 years.
<b>Aviation</b>	Non-ratable pilots for major airlines only, or aviation exclusion rider.	Non-ratable commercial and private pilots are acceptable.	Non-Ratable commercial and private pilots are acceptable.
<b>Avocation</b>	No participation in hazardous sports within past 24 months with no future plans to participate in hazardous sports. Non-technical scuba (50 feet maximum) acceptable.	Non-ratable hazardous sports are acceptable.	Non-ratable hazardous sports are acceptable.
<b>Blood Pressure</b>	138/85 Treatment allowed.	140-90 Treatment allowed.	140/90 Treatment allowed.
<b>Cholesterol</b>	Cholesterol 300 or less and cholesterol/HDL ratio up to 5. The minimum cholesterol must be 125 and above (disregard the minimum if on cholesterol medication).	Cholesterol 300 or less and cholesterol/HDL ratio up to 6. The minimum cholesterol must be 125 and above (disregard the minimum if on cholesterol medication).	Cholesterol 300 or less and cholesterol/HDL ratio up to 6. The minimum cholesterol must be 125 above (disregard the minimum if on cholesterol medication).

<b>Family History</b>	No death of natural parent or sibling from heart disease of familial cancer prior to age 60 including ovary, colon, melanoma, breast, and prostate. In addition, we will disregard ovary, breast, and prostate if the proposed insured is the opposite gender.	No death of natural parent from heart disease or familial cancer prior to age 60 including	No death of natural parent from heart disease or familial cancer prior to age 60 including ovary, colon, melanoma, breast and prostate. In addition, we will disregard ovary, breast, and prostate if the proposed is the opposite gender.
<b>Foreign Travel</b>	No travel to countries or areas that are politically unstable or underdeveloped (may vary by state).	No travel to countries or areas that are politically unstable or underdeveloped (may vary my state).	No travel to countries or areas that are politically unstable or underdeveloped (may vary by state).
<b>Medical History</b>	No history of cancer, (excluding non-melanoma skin cancers), diabetes, cardiovascular disease, heath disease, or other significant health problems.	No history of cancer* (excluding non-melanoma skin cancers), diabetes, cardiovascular disease, heart disease, or other significant health problems. *Some cases of cancer may qualify for Preferred.	No history of cancer* (excluding non-melanoma skin cancers), diabetes, cardiovascular disease, heart disease, or other significant health problems. *Some cases of cancer may qualify for Preferred.
<b>Military</b>			
<b>Motor Vehicle Report</b>	No more than two moving violations in the past three years; no DWI, DUI, or reckless driving conviction or non-administrative license suspension in the past five years.	No more than two moving violations in the past three years; no DWI, DUI, or reckless driving conviction or non-administrative license suspension in the past five years.	No more than two moving violations in the past three years; no DWI, DUI, or reckless driving conviction or non-administrative license suspension in the past five years.
<b>Other/Misc.</b>	Hemoglobin A1C - Within normal range.	Hemoglobin A1C - Within normal range.	A1C - Within normal range.

<b>Residence/Citizenship</b>	Is a U.S. citizen or has had permanent resident status for at least two years.	Is a U.S. citizen or has had permanent resident status for at least two years.	Is a U.S. citizen or has had permanent resident status for at least two years.
<b>Tobacco Definition</b>	Must not have used any tobacco or nicotine based products (including patches, electronic cigarettes, and nicotine gum) within the last five years. Occasional cigar (up to 12 per year) is allowed if admitted on the application and the urine contains no nicotine.	Must not have used tobacco or nicotine based products (including patches, electronic cigarettes, and nicotine gum) within the last three years. Occasional cigar (up to 24 per year) is allowed if admitted on the application and the urine contains no nicotine.	All forms of tobacco and nicotine based products are allowed.

## Build Charts

Height (In Inches)	PNT 0-70 Female Min Weight	PNT 0-70 Female Max Weight	PNT 0-70 Male Min Weight	PNT 0-70 Male Max Weight	PNT 71-99 Female Min Weight	PNT 71-99 Female Max Weight	PNT 71-99 Male Min Weight	PNT 71-99 Male Max Weight	SPNT 0-70 Female Min Weight
58 / 4'10"	91	137	91	146	91	143	91	153	91
59 / 4'11"	94	141	94	151	94	148	94	158	94
60 / 5'	97	146	97	156	97	153	97	163	97
61 / 5'1"	100	151	100	161	100	158	100	169	100
62 / 5'2"	104	156	104	167	104	164	104	175	104
63 / 5'3"	107	161	107	172	107	169	107	180	107
64 / 5'4"	110	166	110	177	110	174	110	186	110
65 / 5'5"	114	171	114	183	114	180	114	192	114
66 / 5'6"	118	176	118	189	118	186	118	198	118
67 / 5'7"	121	181	121	194	121	191	121	204	121
68 / 5'8"	125	187	125	200	125	197	125	210	125
69 / 5'9"	128	192	128	206	128	203	128	216	128
70 / 5'10"	132	198	132	212	132	209	132	222	132
71 / 5'11"	136	203	136	218	136	215	136	229	136
72 / 6'	140	209	140	224	140	221	140	235	140
73 / 6'1"	144	215	144	230	144	227	144	242	144
74 / 6'2"	148	221	148	236	148	233	148	249	148
75 / 6'3"	152	227	152	243	152	240	152	256	152
76 / 6'4"	156	233	156	249	156	246	156	263	156
77 / 6'5"	160	239	160	256	160	253	160	270	160

<b>Height (In Inches)</b>	<b>SPNT 0-70 Female Max Weight</b>	<b>SPNT 0-70 Male Min Weight</b>	<b>SPNT 0-70 Male Max Weight</b>	<b>SPNT 71-99 Female Min Weight</b>	<b>SPNT 71-99 Female Max Weight</b>	<b>SPNT 71-99 Male Min Weight</b>	<b>SPNT 71-99 Male Max Weight</b>
<b>58 / 4'10"</b>	127	91	137	91	134	91	143
<b>59 / 4'11"</b>	131	94	141	94	138	94	148
<b>60 / 5'</b>	136	97	146	97	143	97	153
<b>61 / 5'1"</b>	140	100	151	100	148	100	158
<b>62 / 5'2"</b>	145	104	156	104	153	104	164
<b>63 / 5'3"</b>	149	107	161	107	158	107	169
<b>64 / 5'4"</b>	154	110	166	110	163	110	174
<b>65 / 5'5"</b>	159	114	171	114	168	114	180
<b>66 / 5'6"</b>	164	118	176	118	173	118	186
<b>67 / 5'7"</b>	169	121	181	121	178	121	191
<b>68 / 5'8"</b>	174	125	187	125	184	125	197
<b>69 / 5'9"</b>	179	128	192	128	189	128	203
<b>70 / 5'10"</b>	184	132	198	132	195	132	209
<b>71 / 5'11"</b>	189	136	203	136	200	136	215
<b>72 / 6'</b>	194	140	209	140	206	140	221
<b>73 / 6'1"</b>	200	144	215	144	212	144	227
<b>74 / 6'2"</b>	205	148	221	148	218	148	233
<b>75 / 6'3"</b>	211	152	227	152	224	152	240
<b>76 / 6'4"</b>	216	156	233	156	230	156	246
<b>77 / 6'5"</b>	222	160	239	160	236	160	253

## Underwriting Requirements

Age/Face Amount	0-17	18-40	41-50	51-70	71-90
<b>\$25,000.00 - \$99,999.00</b>	·Motor Vehicle Report	·Blood Profile ·Home Office Urine Specimen ·Motor Vehicle Report ·Physical Measurements	·Blood Profile ·Home Office Urine Specimen ·Motor Vehicle Report ·Physical Measurements ·Prescription database check	·Blood Profile ·Home Office Urine Specimen ·Motor Vehicle Report ·Paramedical Exam ·Prescription database check	·Blood Profile ·Functional Capacity Evaluation ·Home Office Urine Specimen ·Motor Vehicle Report ·Paramedical Exam ·Prescription database check
<b>\$100,000.00 - \$250,000.00</b>	·Motor Vehicle Report	·Blood Profile ·Home Office Urine Specimen ·Motor Vehicle Report ·Physical Measurements	·Blood Profile ·Home Office Urine Specimen ·Motor Vehicle Report ·Physical Measurements ·Prescription database check	·Blood Profile ·Home Office Urine Specimen ·Motor Vehicle Report ·Paramedical Exam ·Prescription database check	·Blood Profile ·Functional Capacity Evaluation ·Home Office Urine Specimen ·Motor Vehicle Report ·Paramedical Exam ·Prescription database check ·Resting EKG
<b>\$250,001.00 - \$500,000.00</b>	·Call Home Office Und. for Req. ·Motor Vehicle Report	·Blood Profile ·Home Office Urine Specimen ·Motor Vehicle Report ·Paramedical Exam	·Blood Profile ·Home Office Urine Specimen ·Motor Vehicle Report ·Paramedical Exam ·Prescription database check	·Blood Profile ·Home Office Urine Specimen ·Motor Vehicle Report ·Paramedical Exam ·Prescription database check	·Blood Profile ·Functional Capacity Evaluation ·Home Office Urine Specimen ·Motor Vehicle Report ·Paramedical Exam ·Prescription database check ·Resting EKG
<b>\$500,001.00 - \$999,999.00</b>	·Call Home Office Und. for Req. ·Motor Vehicle Report	·Blood Profile ·Home Office Urine Specimen ·Motor Vehicle Report ·Paramedical Exam	·Blood Profile ·Home Office Urine Specimen ·Motor Vehicle Report ·Paramedical Exam ·Prescription database check	·Blood Profile ·Home Office Urine Specimen ·Motor Vehicle Report ·Paramedical Exam ·Prescription database check ·Resting EKG	·Blood Profile ·Functional Capacity Evaluation ·Home Office Urine Specimen ·Motor Vehicle Report ·Paramedical Exam ·Prescription database check ·Resting EKG

<b>\$1,000,000.00 - \$2,000,000.00</b>	·Call Home Office Und. for Req. ·Motor Vehicle Report	·Blood Profile ·Home Office Urine Specimen ·Inspection Report ·Motor Vehicle Report ·Paramedical Exam	·Blood Profile ·Home Office Urine Specimen ·Inspection Report ·Motor Vehicle Report ·Paramedical Exam ·Prescription database check	·Blood Profile ·Home Office Urine Specimen ·Inspection Report ·Motor Vehicle Report ·Paramedical Exam ·Prescription database check ·Resting EKG	·Blood Profile ·Functional Capacity Evaluation ·Home Office Urine Specimen ·Inspection Report ·Motor Vehicle Report ·Paramedical Exam ·Prescription database check ·Resting EKG
<b>\$2,000,001.00 - \$5,000,000.00</b>	·Call Home Office Und. for Req. ·Motor Vehicle Report	·Blood Profile ·Financial Supplement ·Home Office Urine Specimen ·Inspection Report ·Motor Vehicle Report ·Paramedical Exam	·Blood Profile ·Financial Supplement ·Home Office Urine Specimen ·Inspection Report ·Motor Vehicle Report ·Paramedical Exam ·Prescription database check ·Resting EKG	·Blood Profile ·Financial Supplement ·Home Office Urine Specimen ·Inspection Report ·Motor Vehicle Report ·Paramedical Exam ·Prescription database check ·Resting EKG	·Blood Profile ·Financial Supplement ·Functional Capacity Evaluation ·Home Office Urine Specimen ·Inspection Report ·Motor Vehicle Report ·Paramedical Exam ·Prescription database check ·EKG
<b>\$5,000,001.00 - \$10,000,000.00</b>	·Call Home Office Und. for Req. ·Motor Vehicle Report	·Blood Profile ·Financial Supplement ·Home Office Urine Specimen ·Inspection Report ·Motor Vehicle Report ·Paramedical Exam ·Resting EKG	·Blood Profile ·Financial Supplement ·Home Office Urine Specimen ·Inspection Report ·Motor Vehicle Report ·Paramedical Exam ·Prescription database check ·Resting EKG	·Blood Profile ·Financial Supplement ·Home Office Urine Specimen ·Inspection Report ·Motor Vehicle Report ·Paramedical Exam ·Prescription database check ·Resting EKG	·Blood Profile ·Financial Supplement ·Functional Capacity Evaluation ·Home Office Urine Specimen ·Inspection Report ·Motor Vehicle Report ·Paramedical Exam ·Prescription database check ·EKG



**\$10,000,001.00 - \$50,000,000.00**

·Call Home Office Und.  
for Req.  
·Motor Vehicle Report

·Blood Profile  
·Home Office Urine  
Specimen  
·Inspection Report  
·Motor Vehicle Report  
·Paramedical Exam  
·Resting EKG  
·Third-Party Financial  
Verification

·Blood Profile  
·Home Office Urine  
Specimen  
·Inspection Report  
·Motor Vehicle Report  
·Paramedical Exam  
·Prescription database  
check  
·Resting EKG  
·Third-Party Financial  
Verification

·Blood Profile  
·Home Office Urine  
Specimen  
·Inspection Report  
·Motor Vehicle Report  
·Paramedical Exam  
·Prescription database  
check  
·Resting EKG  
·Third-Party Financial  
Verification

·Blood Profile  
·Functional Capacity  
Evaluation  
·Home Office Urine  
Specimen  
·Inspection Report  
·Motor Vehicle Report  
·Paramedical Exam  
·Prescription database  
check  
·Resting EKG  
·Third-Party Financial  
Verification