

INITIAL UNDERWRITING REQUIREMENTS

TRENDSSETTER® SUPER

FACE AMOUNT	ISSUE AGE						
	18 - 40	41 - 45	46 - 55	56 - 60	61 - 70	71 - 75	76 - 80
\$25,000 - \$50,000	Nonmed	Nonmed	Nonmed	Nonmed	Nonmed	Paramed BCP HOS MVR	Paramed BCP HOS MVR
\$50,001 - \$99,999	Nonmed	Nonmed	Nonmed	Nonmed	Paramed BCP HOS	Paramed BCP HOS MVR	Paramed BCP HOS MVR
\$100,000 - \$250,000	Nonmed MVR	Nonmed	Nonmed	Paramed BCP HOS	Paramed BCP HOS	Paramed BCP HOS CS MVR	Paramed BCP HOS CS MVR
\$250,001 - \$500,000	Nonmed MVR	Nonmed	Nonmed	Paramed BCP HOS	Paramed BCP HOS	Paramed BCP HOS CS MVR	Paramed BCP HOS CS MVR
\$500,001 - \$1,000,000	Nonmed MVR	Nonmed	Nonmed	Paramed BCP HOS	Paramed BCP HOS	Paramed BCP HOS CS PFS MVR	Paramed BCP HOS CS PFS MVR
\$1,000,001 - \$2,000,000	Nonmed MVR	Nonmed MVR	Paramed BCP HOS MVR	Paramed BCP HOS MVR	Paramed BCP HOS PFS MVR	Paramed BCP HOS CS PFS MVR	Medical BCP HOS ECG CS PFS MVR
\$2,000,001 - \$3,500,000	Paramed BCP HOS MVR	Paramed BCP HOS MVR	Paramed BCP HOS MVR	Paramed BCP HOS MVR	Paramed BCP HOS PFS MVR	Paramed BCP HOS CS PFS MVR	Medical BCP HOS ECG CS PFS MVR
\$3,500,001 - \$5,000,000	Paramed BCP HOS MVR	Paramed BCP HOS MVR	Paramed BCP HOS MVR	Paramed BCP HOS MVR	Paramed BCP HOS PFS MVR	Medical BCP HOS CS PFS MVR	Medical BCP HOS ECG CS PFS MVR
\$5,000,001 - \$10,000,000	Paramed BCP HOS PFS MVR	Paramed BCP HOS PFS MVR	Paramed BCP HOS PFS MVR	Paramed BCP HOS PFS MVR	Paramed BCP HOS PFS MVR	Medical BCP HOS ECG CS PFS MVR	Medical BCP HOS ECG CS PFS MVR
\$10,000,001 and higher	Medical BCP HOS ECG PFS MVR IR	Medical BCP HOS ECG PFS MVR IR	Medical BCP HOS ECG PFS MVR IR	Medical BCP HOS ECG PFS MVR IR	Medical BCP HOS ECG PFS MVR IR	Medical BCP HOS ECG CS PFS MVR IR	Medical BCP HOS ECG CS PFS MVR IR

Transamerica reserves the right to request other evidence of insurability as it deems necessary.

Note: Nonmed is only available to residents of the United States and Puerto Rico. Nonmedical application (Part 2) and HIPAA notice required for all Nonmed business.

Business Beneficiary Inspection Report (BBIR) ordered for business coverage over \$2 million.

4506-C is required with all applications \$5 million and above or at Underwriter discretion.

Requests to reduce face amount received during underwriting will not alter the medical requirements.

Third-party financial verification for face amounts greater than \$10 million or total line over jumbo limits.