

# First **Catholic** Slovak Ladies **Association**

First Catholic Slovak Ladies Association of the United States of America  
24950 Chagrin Blvd., Beachwood, OH 44122 • (800) 464-4642 • www.fcsla.org

## **NOTICE TO APPLICANTS REGARDING REPLACEMENT OF LIFE INSURANCE**

*THIS NOTICE IS FOR YOUR PROTECTION AND IS REQUIRED BY REGULATIONS OF THE  
MICHIGAN COMMISSIONER OF INSURANCE. PLEASE READ IT CAREFULLY.*

Dropping or changing your existing life insurance to replace it with a new life insurance policy may be disadvantageous because:

A company can deny a claim during the first two years if it can be shown that you withheld information from your application which was important to the decision of whether to insure you. This is called the "CONTESTABLE PERIOD." If you drop or change policies, you may have to go through the two-year period again.

You may pay **HIGHER RATES** for identical coverage because of your age. Life insurance rates go up as you get older.

**BEFORE YOU DROP, CHANGE OR CASH IN YOUR PRESENT INSURANCE** and apply for new insurance, you should:

1. Compare the policy **BENEFITS** and **OPTIONS**. The agent is required by law to provide you with all pertinent facts of the change and the insurance company you are considering must notify the company that issued your existing policy.
2. Be aware that you may be required to provide **EVIDENCE OF INSURABILITY**. If your health condition has changed since the application was taken on your present policy, you may be required to pay additional premiums under the new policy, or be denied coverage.
3. Compare the **LOAN INTEREST RATE**. The interest rate for new policies is probably higher than for the existing policy. Therefore, you will pay more when you want to borrow the cash value. If you are considering borrowing against your existing policy to pay the premiums on the proposed policy, you should understand that in the event of your death, the amount of any unpaid loan, including unpaid interest, will be deducted from the benefits of your existing policy.
4. Find out if the existing policy and/or the proposed policy offers **DIVIDENDS OR EXCESS INTEREST**. Dividends or excess interest can have a significant impact on net policy cost. Remember that no company can guarantee the amount of dividends it will pay in the future, nor can excess interest projections be presented as to imply a guarantee.
5. **CONTACT THE AGENT OF YOUR PRESENT COMPANY**. Your present company can often make changes in your existing insurance on terms which are more favorable to you than can another company.
6. Find out if there are income or estate tax consequences if you drop or change your present policy.

You should not drop or change your existing life insurance coverage until after you have been issued the new policy, examined it and found it to be acceptable to you. **REMEMBER YOU HAVE TEN DAYS AFTER RECEIPT OF THE POLICY TO CANCEL AND OBTAIN A FULL REFUND.**

Applicant's Signature: \_\_\_\_\_

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## MICHIGAN INFORMATION STATEMENT

*THE LIFE INSURANCE I INTEND TO PURCHASE FROM  
FIRST CATHOLIC SLOVAK LADIES ASSOCIATION OF THE UNITED STATES OF AMERICA  
MAY REPLACE OR ALTER EXISTING LIFE INSURANCE*

The following policy(ies) may be replaced as a result of this transaction:

<b>Insurer as it appears on the policy</b>	<b>Insured as it appears on the policy</b>	<b>Policy Number</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

The proposed policy is:

_____	\$ _____		
Type of policy – generic name	Face Amount		
_____	_____		
Signature of Applicant	Date		
_____	_____		
Address of Applicant	City	State	Zip

I certify that this form and the Notice to Applicants Regarding Replacement of Life Insurance were given to and signed by:

\_\_\_\_\_  
(Applicant - Please print or type)

prior to taking an application and that I am leaving a signed copy for the applicant.

_____	_____	
Date	Agent's Signature	
_____	_____	
_____	Address	
_____	_____	
City	State	Zip

## Michigan

For Michigan there are two state-specific replacement forms: 1) the Notice to Applicants Regarding Replacement of Life Insurance and 2) the Michigan Information Statement. They are both to be used with each replacement. The uses are as follows:

Notice to Applicants Regarding Replacement of Life Insurance: This is an informational form required by the Michigan Department of Insurance. It explains some pros and cons regarding replacements. The agent should review this with the client and then have the client sign it. The agent should leave one copy with the client, keep one and send one in to the Home Office.

Michigan Information Statement: This form is for listing the policies that are to be replaced. The agent should fill this out with the client and sign it and leave one with the client, keep one and return one to us.

The Agent should also complete the Sales Materials Verification Form and keep one copy and return one to us.

### REPLACEMENT PROCESS:

1. Our application asks if the new cert will replace an old one. If the answer is YES, the applicant must be given the Notice to Applicants Regarding Replacement of Life Insurance and the Michigan Information Statement (see above regarding signatures and copies).
2. Once we receive the Notice to Applicants Regarding Replacement of Life Insurance and the Michigan Information Statement, within 3 business days, we notify the existing insurer of the proposed replacement and send them a copy of the completed Michigan Information Statement.

Record keeping: copies of all of the above replacement notices must be kept for a period of three years or until our ODI Examination following the replacement (whichever time period is longer).