



# UNDERWRITING GUIDELINES

**Underwriting Guidelines as of July 2016.  
Subject to change without notice.**

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## AGE AND AMOUNT REQUIREMENTS

It is the responsibility of the Advisor to order the routine age and amount requirements, based on the plan of insurance.

BMO<sup>®</sup> Insurance's Underwriting Department may, at its discretion, order any additional requirements deemed necessary to evaluate the application for insurance.

*See appropriate Table of Age & Amount Requirements by product.*

### Application Forms by Plan

Plan	Form	Form Number
All Universal Life All Critical Illness All Traditional Life All Preferred Term	<a href="#">Application for Life Insurance and Critical Illness Insurance</a>	126E
insureNOW insureNOW Plus	<a href="#">Application for insureNOW</a>	633E

### Application and Amount (Excluding insureNOW and insureNOW Plus plans)

The total of all insurance pending and/or issued within the last 12 months by BMO Insurance is to be taken into consideration for the purpose of establishing the Age and Amount Requirements.

### insureNOW and insureNOW Plus plans

Each applicant is eligible to apply for a total inforce (lifetime) maximum of \$250,000 across all distribution channels. All applications will be reviewed and must fall within that limit before coverage is approved.

## UNDERWRITING REQUIREMENTS – UNIVERSAL LIFE AND TRADITIONAL PRODUCTS

(Including Term riders. For term riders the total face amount should be used in determining the requirements.)

Current Amount	Issue Age (Age Nearest)						
	0-15	16-44	45-50	51-55	56-59	60 -70 <sup>1</sup>	71 & over <sup>1</sup>
25,000 – 49,999	N	N	N	N	N1	B1	B2
50,000 - \$99,999	N	N	N	N	B1	B1	B2
\$100,000 - \$250,000	N	N1	N1	B1	B1	B3	B3+P
\$250,001 - \$500,000	N	N1	N1	B1	B2	B3+P	B3+P
\$500,001 - \$1,000,000	A	B2	B2	B3	B3	B5+P	B5+P
\$1,000,001 - \$2,000,000	B+A	B2	B3	B3	B5	B5+P+M	B5+P+M
\$2,000,001 - \$3,000,000	B+A	B2+M	B3	B3	B5	B5+P+M	B5+P+M
\$3,000,001 - \$5,000,000	C+A	B2+M	B3+M	B5+M	B5+M	C6+P+M	C6+P+M
\$5,000,001 - \$10,000,000	C+A+F	B2+A+F+M	B5+F+M	B6+F+M	B6+F+M	C6+P+F+M	C6+P+F+M
\$10,000,001 & up	C+A+I	C2+A+I+M	C6+I+M	C6+I+M	C6+I+M	C6+P+I+M	C6+P+I+M

### LEGEND

<sup>1</sup> Activities of Daily Living (ADL) Questionnaires will be completed by the Para-Medical or Medical Examiner for clients 70 & over.

Business Beneficiary Reports (BBR) may be required for business insurance.

The "Current Amount" is defined as the total amount of insurance currently pending and/or issued within the last 12 months by BMO Insurance.

N	Non-Medical	1	Urine (HIV)
B	Paramedical	2	Blood Profile, Urine (HIV)
C	Medical	3	Resting EKG, Blood Profile, Urine (HIV)
A	Attending Physician's Statement	4	Stress EKG, Blood Profile, Urine (HIV)
P	Prostate Specific Antigen test for Males	5	Resting EKG, Blood Profile, Urine (HIV), APS
F	Financial: Third party verification <ul style="list-style-type: none"> <li>• <i>Personal Insurance</i>: 2 Years' Tax Returns or Accountant's or Lawyer's letter with confirmation of income and net worth.</li> <li>• <i>Business Insurance</i>: Financial Statements for the past 3 years</li> </ul>	6	Stress EKG, Blood Profile, Urine (HIV), APS
I	Inspection Report		
M	Motor Vehicle Report		

### APS Guidelines

- BMO Insurance reserves the right to request an APS at any time.
- Refer to APS Guidelines in the Underwriting Guidelines – Definitions section.

### Medical Guidelines

- Any time an APS is a routine requirement and a Paramedical is being ordered, request a current Medical Exam instead of the Paramedical if the client has not seen their personal physician within the last 6 months.
- When offering a Critical Illness Rider on a Universal Life plan, medical requirements listed in the section Underwriting Requirements – Critical Illness Base Plan & Riders must also be considered.
- Refer to Validity of Documents in the Underwriting Guidelines – Definitions section.

## UNDERWRITING REQUIREMENTS - PREFERRED TERM 10

Current Amount	Issue Age (Age Nearest)						
	18-40	41-45	46-50	51 - 55	56-59	60-70 <sup>1</sup>	71-75 <sup>1</sup>
\$100,000 - \$250,000	B2	B2	B2	B2	B2	B3	B3+P
\$250,001 - \$500,000	B2	B2	B2	B2	B2	B3+P	B3+P
\$500,001 - \$1,000,000	B2	B2	B2	B2	B3	B5+P	B5+P
\$1,000,001 - \$2,000,000	B2	B2	B2	B3	B5	B5+P	B5+P
\$2,000,001 - \$3,000,000	B2	B2	B2	B3	B5	B5+P	B5+P
\$3,000,001 - \$5,000,000	B2+M	B3+M	B3+M	B5+M	B5+M	C6+P+M	C6+P+M
\$5,000,001 - \$10,000,000	B2+A+F+M	B5+F+M	B5+F+M	B6+F+M	B6+F+M	C6+P+F+M	C6+P+F+M
Over \$10,000,000	C2+A+I+M	C6+I+M	C6+I+M	C6+I+M	C6+I+M	C6+P+I+M	C6+P+I+M

## UNDERWRITING REQUIREMENTS - PREFERRED TERM 20, PREFERRED TERM 30\*

Current Amount	Issue Age (Age Nearest)				
	18-40	41-50	51-55	56-59	60-65
\$100,000 - \$250,000	B2	B2	B2	B2	B3
\$250,001 - \$500,000	B2	B2	B2	B2	B3+P
\$500,001 - \$1,000,000	B2	B2	B2	B3	B5+P
\$1,000,001 - \$2,000,000	B2	B2	B3	B5	B5+P
\$2,000,001 - \$3,000,000	B2	B2	B3	B5	B5+P
\$3,000,001 - \$5,000,000	B2+M	B3+M	B5+M	B5+M	C6+P+M
\$5,000,001 - \$10,000,000	B2+A+F+M	B5+F+M	B6+F+M	B6+F+M	C6+P+F+M
Over \$10,000,000	C2+A+I+M	C6+I+M	C6+I+M	C6+I+M	C6+P+I+M

\* Preferred Term 30 Issue ages 18-55

### LEGEND

<sup>1</sup> Activities of Daily Living (ADL) Questionnaires will be completed by the Paramedical or Medical Examiner for clients 70 & over.

Business Beneficiary Report (BBR) may be required for business insurance.

The "Current Amount" is defined as the total amount of insurance currently pending and/or issued within the last 12 months by BMO Insurance.

B Paramedical	2 Blood Profile, Urine (HIV)
C Medical	3 Resting EKG, Blood Profile, Urine (HIV)
A Attending Physician's Statement	4 Stress EKG, Blood Profile, Urine (HIV)
P Prostate Specific Antigen test for Males	5 Resting EKG, Blood Profile, Urine (HIV), APS
F Financial: Third party verification	6 Stress EKG, Blood Profile, Urine (HIV) APS
<ul style="list-style-type: none"> <li>• <i>Personal Insurance</i>: 2 Years' Tax Returns or Accountant's or Lawyer's letter with confirmation of income and net worth.</li> <li>• <i>Business Insurance</i>: Financial Statements for the past 3 years are required.</li> </ul>	
I Inspection Report	
M Motor Vehicle Report	

### APS Guidelines

- BMO Insurance reserves the right to request an APS at any time.
- Refer to APS Guidelines in the Underwriting Guidelines – Definitions section.

### Medical Guidelines

- Anytime an APS is a routine requirement and a Paramedical is being ordered request a current Medical exam instead of the Paramedical if the client has not seen their personal physician within the last 6 months.
- Refer to Validity of Documents in the Underwriting Guidelines – Definitions section.

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## **UNDERWRITING REQUIREMENTS – BUSINESS GUARANTEED INSURABILITY OPTION (BGIO)**

Available on Life Dimensions, Preferred Term 10 and Preferred Term 20.

### **Age and Amount Requirements**

- Based on the total of the base plan plus the maximum option amount of the BGIO Rider
- Maximum BGIO amount is \$10,000,000
- Total amount of in-force and applied for on all coverages not to exceed \$20,000,000

*Eg.*

*M50NS*

*Base Plan: \$1,000,000 Life Dimensions*

*BGIO Maximum Option Amount: 1,500,000 (500,000 FMV)*

*Underwriting Requirements: Age amount requirements based on \$2,500,000 - Paramed, Resting EKG, Blood, Urine, Financial Questionnaire*

### **Financial Requirements**

- The last three (3) years audited financial statements; and
- Completion of Business Guaranteed Insurability Option (Business GIO) Worksheet 416E; and
- Articles of Incorporation confirming ownership

*If you have a formal fair market value calculation completed by your accountant, please provide*

## UNDERWRITING REQUIREMENTS - CRITICAL ILLNESS BASE PLAN & RIDERS

<u>Current Amount</u>	<u>Issue Age (Age Nearest)</u>			
	18-40	41-50	51-60	61-65
\$0-\$99,999	N	N	B1	B1
\$100,000 - \$250,000	N1	N1	B2+ P	B5+ P
\$250,001 - \$500,000	N2	B2	B5+ P	C5+ P
\$500,001 - \$1,000,000	B2+A+FQ	B5+P+FQ	C5+P+FQ	C6+P+FQ
\$1,000,001- \$2,000,000	B5+I	C5+ P+I	C5+P+I	C6+P+I

<b>LEGEND</b>	
N Non-Medical	1 Urine (HIV)
B Paramedical	2 Blood Profile, Urine (HIV)
C Medical	3 Resting EKG, Blood Profile, Urine (HIV)
A Attending Physician's Statement	4 Stress EKG, Blood Profile, Urine (HIV)
P Prostate Specific Antigen test for Males	5 Resting EKG, Blood Profile, Urine (HIV), APS
FQ Financial Questionnaire	6 Stress EKG, Blood Profile, Urine (HIV), APS
I Inspection Report	

### APS Guidelines

- BMO Insurance reserves the right to request an APS at any time
- Refer to APS Guidelines in the Underwriting Guidelines – Definitions section.

### Medical Guidelines

- Any time an APS is a routine requirement and a Paramedical is being ordered, request a current Medical Exam instead of the Paramedical if the client has not seen their personal physician within the last 6 months.
- When offering a Critical Illness Rider on a Universal Life plan, medical requirements will be based on the Critical Illness requirements in addition to the Universal Life requirements.
- So that duplicate requirements are not requested, order the highest applicable level of requirements and add additional tests where indicated. (i.e. If UL requires B2 and CI requires C5 + PSA, you would order C5 requirements + PSA test.)

### Critical Illness Pre-Screening Checklist

Certain conditions or illnesses may exclude your client from qualifying for critical illness coverage with BMO Insurance. **Please do not submit an application for critical illness if the proposed insured has ever been diagnosed with any of the following conditions:**

<ul style="list-style-type: none"> <li>▪ AIDS or AIDS related diseases</li> <li>▪ Multiple Sclerosis</li> <li>▪ Hepatitis C</li> <li>▪ Chronic Kidney Failure</li> <li>▪ Positive for HIV</li> <li>▪ Muscular Dystrophy</li> <li>▪ Alcohol Abuse Treatment within past 2 years</li> <li>▪ Coronary Artery Surgery or Angioplasty</li> <li>▪ Huntington's Chorea or family history of same if applicant is under age 50</li> <li>▪ Heart Valve Replacement</li> <li>▪ Alzheimer's Disease</li> <li>▪ Cystic Fibrosis</li> <li>▪ Insulin Dependent Diabetes</li> </ul>	<ul style="list-style-type: none"> <li>▪ Permanent Paralysis</li> <li>▪ Angina</li> <li>▪ Drug Abuse within past 3 years</li> <li>▪ Major Organ Transplant</li> <li>▪ Benign Brain Tumour</li> <li>▪ Parkinson's Disease</li> <li>▪ Aplastic Anaemia</li> <li>▪ Bacterial Meningitis</li> <li>▪ Polycystic Kidney Disease or family history of same if applicant is under age 35</li> <li>▪ Aortic Surgery</li> <li>▪ Stroke</li> <li>▪ Cancer</li> <li>▪ Heart Attack</li> </ul>
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Please note that this is a checklist of conditions that would definitely result in an application being declined for critical illness coverage. There may be other conditions that could result in a decline for your client. If any member of the proposed insured's immediate family (i.e. siblings and parents) has had one of the above conditions, the policy may be rated or in some cases, declined.



## UNDERWRITING REQUIREMENTS – POLICY CHANGE

### General Notes:

- For any requested policy change, BMO Insurance reserves the right to re-underwrite the entire case and additional underwriting requirements may be ordered at the discretion of the underwriter.
- Please contact the Client Services Division at 1-800-387-4483 to confirm the requirements for any changes not referenced below.

Change Type	Policy Change Requirements
<p><b>Change to Non Smoker</b></p> <p><b>For all products excluding insureNOW and insureNOW Plus plans</b></p> <ul style="list-style-type: none"> <li>• Single Life Coverage or Joint First to Die Coverage</li> <li>• Joint Last to Die Coverage</li> </ul> <p><b>For insureNOW and insureNOW Plus Plans</b></p>	<p>Insured can apply if they have stopped using any form of tobacco product, nicotine substitutes or marijuana in the previous 12 consecutive months. For all non-smoker change requests on in force preferred cases, the best class offered will be the residual standard non-smoker class. To qualify for preferred non- smoker rates, a new application and full underwriting is required.</p> <p>For all ages and amounts:</p> <ul style="list-style-type: none"> <li>• Long Form Health Certificate 167E</li> <li>• Urinalysis</li> </ul> <p>Life Insured applying for change:</p> <ul style="list-style-type: none"> <li>• Long Form Health Certificate 167E</li> <li>• Urinalysis</li> </ul> <p>All other Life Insureds:</p> <ul style="list-style-type: none"> <li>• Long Form Health Certificate 167E</li> </ul> <p>For all age and amounts:</p> <ul style="list-style-type: none"> <li>• Application for Policy Change – insureNOW and insureNOW Now Plus plan 650E</li> </ul>
<p><b>Request to add a Rider</b> (Renewable Term Riders, Waiver of Premium, Accidental Death Benefit)</p> <ul style="list-style-type: none"> <li>• Existing Life Insured</li> <li>• New Life Insured</li> </ul>	<p>For amounts under \$100,000 and up to Age 65</p> <ul style="list-style-type: none"> <li>• Long Form Health Certificate 167E</li> </ul> <p>For amounts of \$100,000 or more or Age 65 and over</p> <ul style="list-style-type: none"> <li>• Long Form Health Certificate 167E</li> <li>• Age and Amount Requirements</li> </ul> <p>For amounts under \$100,000 and up to Age 65</p> <ul style="list-style-type: none"> <li>• Application for Life Insurance and Critical Illness Insurance 126E</li> </ul> <p>For amounts of \$100,000 or more or Age 65 and older</p> <ul style="list-style-type: none"> <li>• Application for Life Insurance and Critical Illness Insurance 126E</li> <li>• Age and Amount Requirements</li> </ul> <p>For Universal Life policies, the Policy Owner Identification form 576E is required if there is no form on file.</p>
<p><b>Request to add a Critical Illness Rider (Universal Life policies only)</b></p> <ul style="list-style-type: none"> <li>• Existing Life Insured</li> <li>• New Life Insured</li> </ul>	<p>For all ages and amounts:</p> <ul style="list-style-type: none"> <li>• Long Form Health Certificate 167E</li> <li>• Age and Amount Requirements</li> </ul> <p>Application for Life Insurance and Critical Illness Insurance 126E</p> <ul style="list-style-type: none"> <li>• Age and Amount Requirements</li> </ul>

<p><b>Add a Life Provider Additional Coverage Rider</b></p> <ul style="list-style-type: none"> <li>Existing Life Insured</li> <li>New Life Insured</li> </ul>	<p>For all ages and amounts:</p> <ul style="list-style-type: none"> <li>Long Form Health Certificate 167E</li> <li>Age and Amount Requirements</li> <li>Application for Life Insurance and Critical Illness Insurance 126E</li> <li>Age and Amount Requirements</li> </ul>
<p><b>Child Term Rider Changes</b></p> <ul style="list-style-type: none"> <li>Add a new Child Term Rider Coverage</li> <li>Add a child to an inforce Child Term Rider</li> </ul>	<p>For all ages and amounts:</p> <ul style="list-style-type: none"> <li>Policy Owner - Long Form Health Certificate 167E</li> <li>Childrens Term Rider Payor Waiver 341E</li> <li>Request for Policy Change 165E</li> </ul>
<p><b>Review of Ratings</b></p> <ul style="list-style-type: none"> <li>Medical Rating</li> <li>Lifestyle Rating</li> </ul>	<p>For all ages and amounts:</p> <ul style="list-style-type: none"> <li>Long Form Health Certificate 167E</li> <li>Long Form Health Certificate 167E</li> <li>Relevant Questionnaire</li> </ul>
<p><b>Reinstatement - Life Insurance (Universal Life and Traditional Products)</b></p> <ul style="list-style-type: none"> <li>within 3 months of lapse effective date</li> <li>after 3 months of lapse effective date</li> </ul>	<p>For all ages and amounts:</p> <ul style="list-style-type: none"> <li>Long Form Health Certificate 167E</li> </ul> <p>For amounts under \$100,000 and up to Age 65</p> <ul style="list-style-type: none"> <li>Long Form Health Certificate 167E</li> </ul> <p>For amounts \$100,000 to \$500,000 and up to Age 65</p> <ul style="list-style-type: none"> <li>Long Form Health Certificate 167E</li> <li>Urinalysis</li> </ul> <p>For amounts greater than \$500,000 or Age 65 and over</p> <ul style="list-style-type: none"> <li>Long Form Health Certificate 167E</li> <li>Age and Amount Requirements</li> </ul>
<p><b>Reinstatement - Life Insurance (Preferred Term 10, 20 or 30 and EasyTerm 10)</b></p> <ul style="list-style-type: none"> <li>within 3 months of lapse effective date</li> <li>after 3 months of lapse effective date AND <ul style="list-style-type: none"> <li>Non Smoker – Standard rate classification</li> <li>Smoker - Standard or Preferred rate classification</li> </ul> </li> <li>after 3 months of lapse effective date AND <ul style="list-style-type: none"> <li>Non Smoker - Preferred or Preferred rate classification</li> </ul> </li> </ul>	<p>For all ages and amounts:</p> <ul style="list-style-type: none"> <li>Long Form Health Certificate 167E</li> </ul> <p>For amounts under \$100,000 and up to Age 65</p> <ul style="list-style-type: none"> <li>Long Form Health Certificate 167E</li> </ul> <p>For amounts \$100,000 to \$500,000 and up to Age 65</p> <ul style="list-style-type: none"> <li>Long Form Health Certificate 167E</li> <li>Urinalysis</li> </ul> <p>For amounts greater than \$500,000 or Age 65 and over</p> <ul style="list-style-type: none"> <li>Long Form Health Certificate 167E</li> <li>Age and Amount Requirements</li> </ul> <p>For all ages and amounts:</p> <ul style="list-style-type: none"> <li>Long Form Health Certificate 167E</li> <li>Age and Amount Requirement</li> </ul>
<p><b>Reinstatement – insureNOW or insureNOW Plus plans</b></p>	<p>For all ages and amounts:</p> <ul style="list-style-type: none"> <li>Application for Policy Change – insureNOW and insureNOWPlus plan 650E</li> </ul>
<p><b>Reinstatement -Critical Illness Insurance</b></p> <ul style="list-style-type: none"> <li>within 3 months of lapse effective date</li> <li>after 3 months of lapse effective date</li> </ul>	<p>For all ages and amounts:</p> <ul style="list-style-type: none"> <li>Long Form Health Certificate 167E</li> <li>Application for Life Insurance and Critical Illness Insurance 126E</li> <li>Age and Amount Requirements</li> </ul>

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<b>Substitution of a Life Insured</b>	For all ages and amounts: <ul style="list-style-type: none"> <li>Request for Policy Change 165E</li> <li>Application for Life Insurance and Critical Illness Insurance 126E</li> <li>Age and Amount Requirements</li> </ul>
<b>Adjustments to Additional Sum Insured</b> <ul style="list-style-type: none"> <li>Change from Increase and Reversal to No Increase or Increase Only</li> <li>Change from No Increase to Increase Only or Increase and Reversal</li> </ul>	For all ages and amounts: <ul style="list-style-type: none"> <li>Request for Policy Change 165E</li> </ul> For amounts under \$100,000 and up to Age 65 <ul style="list-style-type: none"> <li>Long Form Health Certificate 167E</li> </ul> For amounts \$100,000 to \$500,000 and up to Age 65 <ul style="list-style-type: none"> <li>Long Form Health Certificate 167E</li> <li>Urinalysis</li> </ul> For amounts greater than \$500,000 or Age 65 and over <ul style="list-style-type: none"> <li>Long Form Health Certificate 167E</li> <li>Age and Amount Requirements</li> </ul>
<b>Changes to Maximizer or Maximizer Select</b> <ul style="list-style-type: none"> <li>Increase the Maximizer Minimum Sum Insured</li> <li>Change the Maximizer start date</li> <li>Remove the Maximizer or Maximizer Select feature</li> <li>Reverse a Maximizer decrease within 30 days of the change effective date</li> <li>Reverse a Maximizer decrease after 30 days of the change effective date</li> </ul>	For all ages and amounts: <ul style="list-style-type: none"> <li>Request for Policy Change 165E</li> </ul> For all ages and amounts: Long Form Health Certificate 167E
<b>Original Age Enhancement Option</b>	For amounts under \$100,000 and up to Age 65 <ul style="list-style-type: none"> <li>Long Form Health Certificate 167E</li> </ul> For amounts \$100,000 to \$500,000 and up to Age 65 <ul style="list-style-type: none"> <li>Long Form Health Certificate 167E</li> <li>Urinalysis</li> </ul> For amounts greater than \$500,000 or Age 65 and over <ul style="list-style-type: none"> <li>Long Form Health Certificate 167E</li> <li>Age and Amount Requirements</li> </ul>
<b>5 Year Preferred Renewal Rate Megaterm Re-entry Rate</b>	For amounts under \$100,000 and up to Age 65 <ul style="list-style-type: none"> <li>Long Form Health Certificate 167E</li> </ul> For amounts of \$100,000 or more or Age 65 and over <ul style="list-style-type: none"> <li>Long Form Health Certificate 167E</li> <li>Age and Amount Requirements</li> </ul>
<b>Other Policy Changes</b> <ul style="list-style-type: none"> <li>Universal Life – change the Cost of Insurance from Yearly Renewable Term to Level</li> <li>Reduce the Sum Insured</li> <li>Cancel or Decrease the Sum Insured of a Policy Rider</li> <li>Policy Exchange Option (Universal Life Plans)</li> <li>Survivor Option</li> </ul>	For all ages and amounts: <ul style="list-style-type: none"> <li>Request for Policy Change 165E</li> </ul>
<b>Term Policy or Rider Conversion</b> <ul style="list-style-type: none"> <li>conversion to a permanent plan</li> </ul>	For all age and amounts: <ul style="list-style-type: none"> <li>Request for Policy Change 165E</li> </ul>
<b>Child Term Rider Conversion</b>	For all ages and amounts: <ul style="list-style-type: none"> <li>Request for Policy Change 165E</li> <li>Proof of Age</li> </ul>

## FINANCIAL GUIDELINES – UNIVERSAL LIFE AND TRADITIONAL PRODUCTS

The following guidelines should be used in order to assess whether the Sum Insured is appropriate.

Purpose of Insurance	Formula	Suggested Additional Requirements
<b>Key Person Insurance</b>	5x annual income to 10x annual income (Salary and regular bonus + Employer benefits)	Financial Questionnaire - Business Coverage (146E) For total amounts of \$5,000,000 through \$10,000,000, third party verification of finances is required. For total amounts of \$10,000,001 and up, Inspection Report is required.
<b>Buy / Sell Agreement Partnership Agreement (Active Shareholder)</b>	% of ownership x fair market value increased by 20% + Annual income + Employer benefits	Financial Questionnaire - Business Coverage (146E) Provide Financial Statements for past 3 years.
<b>Partnership Agreement (Non-Active Shareholder)</b>	% of ownership x fair market value increased by 20%	Financial Questionnaire - Business Coverage (146E) Provide Financial Statements for past 3 years.
<b>Charitable Donation</b>	Annual Donation x (age 65 – current age)	Donors should have adequate coverage in force for personal insurance needs. Cover letter to establish the link between the policy holder, beneficiary and life to be insured. Explain the insurable interest and include details of the pattern of donations and regular gifting. Amounts should not represent more than 20% of net worth. NOTE: Charitable policies sold for investment purposes will not be considered.
<b>Juvenile</b>	Up to 50% of parent's coverage unless part of a family investment package	Amounts over \$500,000 require a cover letter supporting insurance need and amount.
<b>Estate Tax Planning</b>	Assets x Tax Rate	Estate Analysis Personal Balance Sheet
<b>Personal</b>		For total amounts of \$5,000,000 through \$10,000,000, third party verification of finances is required.  For total amounts of \$10,000,001 and up, an Inspection Report is required.
<b>RCA</b>	We do not participate in RCAs or any triple back-to-back concepts.	

**Net Worth = Assets – Liabilities**

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### Determination of Fair Market Value

1. Assets – Liabilities + 7 x net profit, or
2. Net profit divided by .07, or
3. Publicized Market Value

### Coverage amounts on a Non-Working Spouse

- We will match the working spouse's coverage up to \$ 1,000,000 in force and applied for.
- For coverage over \$1,000,000, consider half of the amount of the working spouse, subject to a maximum of \$2,500,000.
- For amounts over \$2,500,000, individual consideration based upon estate planning needs.

### Coverage amounts on lives with no income – Individual Consideration

- Individuals on social assistance are not eligible for coverage

### Coverage for ages 0-17

For amounts:

- 0-\$500,000; see Age and amount Requirements.
- Parents/guardian will need to have 2x the amount being requested (unless specific needs analysis provided)
- All siblings will require equal amounts of coverage.
- \$500,001; consult the Underwriter.

## FINANCIAL GUIDELINES - CRITICAL ILLNESS (BASE PLAN OR RIDER)

Generally, the maximum amount of critical illness coverage allowed on any life is \$2,000,000. (This amount would also include any existing or pending critical illness coverage with BMO Insurance or any other insurer).

Amounts over \$2,000,000 will be considered on an individual basis.

All amounts over \$2,000,000 should be discussed with Head Office before proceeding with the application.

As a guideline, the amount of critical illness coverage will be limited to the following formulas:

### Personal Insurance:

#### Working Applicants

#### Maximum Limit

Up to age 55	7x Earned Income* (Canadian \$ only)
Age 56-60	5x Earned Income* (Canadian \$ only)
Age 61 and older	3x Earned Income (decreasing yearly to a minimum amount of not less than \$100,000)
Farmers	Up to 10x net income
Recent Graduates/ University Students	\$100,000
Nannies (with Permanent Resident status documentation only)	Up to \$100,000

\*Earned Income consists of salary or similar remuneration (commissions, bonuses, etc.) If bonuses are irregular the average of the bonuses of the last 3 years should be added instead. When the applicant owns a company, is active in the company and is receiving dividends from the company in addition or in lieu of salary, these dividends can be added to the salary to determine true earned income.

**Non-working or no Income Applicants**

**Maximum Limit**

Non-working Spouse	50% of Working Spouse's limit to a maximum of \$250,000
Adults without justification	Up to \$100,000
Individuals on Social Assistance	Not eligible

**Business Insurance:**

Keyman	<ul style="list-style-type: none"><li>▪ 3x Key person's compensation</li><li>▪ Requires justification of key person's value and similar coverage should exist on all key persons</li></ul>
Buy-Sell	<ul style="list-style-type: none"><li>▪ Amount should be proportional to the percentage ownership of each partner with a buy-sell agreement in place.</li><li>▪ Any Disability coverage should not cover the same need.</li></ul>

Individual consideration will be given when the critical illness coverage is being used to cover a business loan. The duration of the loan and coverage already existing on key persons will be taken into consideration.

## UNDERWRITING CRITERIA - PREFERRED TERM

	Preferred Plus – Non Smoker			Preferred – Non Smoker			Preferred Smoker		
<b>Tobacco</b>	None in 5 years (includes no nicotine products, and no smoking cessation products)			None in 2 years (includes no nicotine products, and no smoking cessation products)			Cigars, pipes, chewing tobacco and cigarettes		
<b>Blood Pressure</b>	Does not exceed: <=44 130/80 45-59 135/85 60-75 140/90 Never had any medication for blood pressure			Does not exceed: <=44 140/90 45-59 150/90 60-75 150/90 Never had any medication for blood pressure			Does not exceed: <=44 140/90 45-59 150/90 60-75 150/90 Never had any medication for blood pressure		
<b>Cholesterol</b>	Age	Conv. Value	SI Value	Age	Conv. Value	SI Value	Age	Conv. Value	SI Value
	<=44	210/5.0	5.45/5.0	<=44	220/5.5	5.70/5.5	<=44	220/5.5	5.70/5.5
	45 - 59	220/5.5	5.70/5.5	45 - 59	240/6.0	6.20/6.0	45 - 59	240/6.0	6.20/6.0
	60 - 75	220/5.5	5.7/5.5	60 - 75	240/6.0	6.20/6.0	60 - 75	240/6.0	6.20/6.0
	Never had any medication for cholesterol								
<b>Family History</b>	No family history of diagnosis or death of: Heart Disease, Cancer or Stroke in parents or siblings prior to age 65.			No more than 1 family history of diagnosis or death of: Heart Disease, Cancer or Stroke in parents or siblings prior to age 60.			No more than 1 family history of diagnosis or death of: Heart Disease, Cancer or Stroke in parents or siblings prior to age 60.		
<b>Personal History</b>	No history of: Cancer, Diabetes, Cardiovascular disease, Coronary Artery Disease or Stroke. Standard in all other respects.			No history of: Cancer, Diabetes, Cardiovascular disease, Coronary Artery Disease or Stroke. Standard in all other respects.			No history of: Cancer, Diabetes, Cardiovascular disease, Coronary Artery Disease or Stroke. Standard in all other respects.		
<b>Sports/Avocation/Aviation</b>	No ratable or excludable participation in hazardous sports or avocations. No participation in aviation other than as a fare paying passenger on a scheduled airline.			No ratable or excludable participation in hazardous sports or avocations. No participation in aviation other than as a fare paying passenger on a scheduled airline.			No ratable or excludable participation in hazardous sports or avocations. No participation in aviation other than as a fare paying passenger on a scheduled airline.		
<b>Alcohol/Drug Abuse</b>	No treatment by physician or organization for alcohol or drug abuse in the past 10 years			No treatment by physician or organization for alcohol or drug abuse in the past 5 years			No treatment by physician or organization for alcohol or drug abuse in the past 7 years		
<b>DWI</b>	None in the past 10 years			None in the past 5 years			None in the past 5 years		
<b>Resident</b>	No ratable or excludable foreign travel or residency.			No ratable or excludable foreign travel or residency.			No ratable or excludable foreign travel or residency.		
<b>MVR</b>	Not convicted of more than 2 speeding violations in the past 3 years.			Not convicted of more than 3 speeding violations in the past 3 years.			Not convicted of more than 3 speeding violations in the past 3 years.		
<b>Build</b>	BMO Preferred Plus Table as below			BMO Preferred Table as below			BMO Preferred Table as below		

Height	4'10"	4'11"	5'0"	5'1"	5'2"	5'3"	5'4"	5'5"	5'6"	5'7"	5'8"	5'9"	5'10"	5'11"	6'0"	6'1"	6'2"	6'3"	6'4"	6'5"	6'6"	6'7"	6'8"	6'9"
Preferred Plus	134	139	146	151	156	162	167	172	178	182	188	194	199	204	210	217	223	230	236	242	249	256	262	269
Preferred	142	148	155	161	166	173	178	184	190	195	201	207	212	218	224	231	238	245	251	257	265	272	279	287

**Note:**  
Substandard rates are available on Standard classifications only.

## UNDERWRITING GUIDELINES - DEFINITIONS

### APS Guidelines

BMO Insurance reserves the right to request an APS at any time including:

- at any time for cause, i.e. a potentially rateable impairment (see partial list below)
- where a doctor has been seen in the last 3 months
- **if a recent exam was done (other than a cold, flu, normal pre-natal or employment physical)**
- **where a specialist had been consulted in the last year**

Other than as noted above you can also expect an APS request when the client has seen a physician within a certain period of time as follows:

For Life Insurance:

Age	Face Amount	Reason
0-60	\$1,000,001 and over	Visit to the physician within 1 month
61-70	\$500,000 and over	Visit to the physician within 3 months
70+	\$250,000 and over	Visit to the physician within 3 months

For Critical Illness Insurance

Age	Face Amount	Reason
18-50	over \$100,000	Visit to the physician within 3 months
51-65	over \$100,000	Visit to the physician within 6 months.

BMO Insurance has internal guidelines advising when an APS is needed for cause. You can expect an APS for the following causes:

<ul style="list-style-type: none"> <li>▪ Abnormal cardiac test and other test</li> <li>▪ Alcohol or drug treatment</li> <li>▪ Aneurysm's</li> <li>▪ Barrett's Esophagus</li> <li>▪ Cancers and tumours (polyps)</li> <li>▪ Cardiac failure</li> <li>▪ Cardiomyopathies</li> <li>▪ Coagulation disorders</li> <li>▪ Congenital heart disease</li> <li>▪ Connective tissue disorders</li> <li>▪ Coronary and other similar artery disease</li> <li>▪ Dementia</li> <li>▪ Diabetes</li> <li>▪ Eating Disorders</li> <li>▪ Hemorrhage from gastrointestinal tract</li> <li>▪ Liver disorders</li> <li>▪ Lymph node disorder</li> <li>▪ Multiple Sclerosis</li> </ul>	<ul style="list-style-type: none"> <li>▪ Muscular dystrophy</li> <li>▪ Pancreatic disorders</li> <li>▪ Parkinson's Disease</li> <li>▪ PSA abnormalities</li> <li>▪ Rheumatoid Arthritis</li> <li>▪ Seizures</li> <li>▪ Significant Arrhythmias</li> <li>▪ Significant endocrine disorders</li> <li>▪ Significant heart murmurs</li> <li>▪ Significant Hypertension</li> <li>▪ Significant kidney disorders</li> <li>▪ Significant psychiatric illness</li> <li>▪ Significant respiratory disorders</li> <li>▪ Sleep Apnea</li> <li>▪ Stroke and other similar disorders</li> <li>▪ Suicide attempts</li> <li>▪ Syncope</li> <li>▪ Ulcerative colitis and other similar disorders</li> </ul>
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Keep in mind that this list of disorders covers only some of the more common disorders seen, but does not limit the ordering of an APS for situations of concern that the underwriter might identify.



### **Advisor Covering Letter**

The covering letter should include the following explanations regarding the sale:

- What the applicant(s) is (are) trying to achieve;
- The relationship between the advisor and the applicant(s);
- Where the deposits/premiums are coming from; and
- Any other information that will affect the outcome of the application.

Please provide information and/or an explanation for all of the following financial tests:

- Proof of the current net worth
- What is/are the applicant(s) trying to achieve? (Does it make sense?)
- Where are the deposits/premiums coming from?
- What is the concept? (Estate planning, Insured Annuity, investment purpose, etc.)

### **Advisor Report**

It is important that the Advisor Report on the application be fully completed in all cases to expedite the underwriting and issuance of the policy. For proper payment of commissions, **please print your name and advisor code number legibly** on all applications.

### **Authorized Service Providers**

Ordering requirements is the Advisor's responsibility. BMO Insurance will ONLY pay the cost of those tests performed by an Authorized Service Provider as listed below. Costs incurred by unauthorized Service Providers are the responsibility of the Managing General Agent and/or Advisor.

\*In the event that BMO Insurance requests an Attending Physicians' Statement (APS), it will be ordered exclusively through Watermark.

#### **Attending Physician's Statements (APS)**

1. Exam *One*
2. Hooper Holmes / Portamedic
3. Medifast
4. MedAxio
5. QUS (Quality Underwriting Services)
6. Watermark\*

#### **Inspection Reports**

1. Exam *One*
2. First Financial
3. Green Grass & Frank
4. Hooper Holmes / Portamedic

#### **Laboratories**

1. Gamma Dynacare Laboratories
2. Lab One

#### **Medicals/Paramedicals**

1. Exam *One*
2. Hooper Holmes / Portamedic
3. Medifast
4. MedAxio
5. QUS (Quality Underwriting Services)
6. Watermark

### **C.O.D. Cases**

For policies with a Sum Insured above the Temporary Insurance Agreement limit, payment of first premium must be C.O.D.

### **Case Declined or Postponed**

- A notice is sent to the Advisor and MGA and a refund cheque, if applicable, is sent to the Policy Owner with a letter from BMO Insurance.
- If the Policy Owner is other than the Insured, the reason for the decision is stated as confidential.
- Information or history that has been disclosed by the applicant can be referenced when advising the Advisor of the decision. Specific exam findings supplied from attending physicians cannot be disclosed to the Advisor.
- BMO Insurance will release information to the personal physician upon written request by the Insured.
- A request for review of an underwriting decision can be submitted in writing to the Underwriting Department.

### **Children**

Eligibility Requirements for Child Term Riders:

- the child must be at least 15 days old but no older than 18 years old;
- he/she must be out of hospital;
- sum insured minimum is \$5,000 and maximum is \$30,000;
- an insurable interest must exist between the Policy Owner and the child to be insured; and
- in all cases, the application must be signed by the father, mother or legal guardian. If a legal guardian, this must be clearly stated on the application.

By law, an applicant must be at least 18 years of age to be designated the Policy Owner.

### **Credit Card Payments**

The **first annual** premium up to a maximum of \$50,000 can be paid by Visa or MasterCard. Complete and sign the credit authorization form on the application. Renewal premiums cannot be paid by Credit Card.

### **Delivery Receipt**

A policy delivery receipt is produced with every policy and should be signed and returned to BMO Insurance's New Business Department. BMO Insurance will not hold up settlement of a policy for an outstanding policy delivery receipt, however, we strongly encourage Advisors to have the Delivery Receipt signed and returned to BMO Insurance, which will help in eliminating compliance issues you and your client may have.

### **Foreign Travel**

Due to changing geo-political environments around the world, foreign travel risks continue to change. BMO Insurance has negotiated improved competitive foreign travel guidelines with our reinsurance partners. In order to provide you with the most competitive underwriting offer, please complete the Foreign Travel Questionnaire (313E) with the application and/or contact Underwriting for individual consideration.

Prior to completing the Foreign Travel Questionnaire we encourage you to check the geo-political risk by consulting the available consular websites such as [http://www.voyage.gc.ca/countries\\_pays/menu-eng.asp](http://www.voyage.gc.ca/countries_pays/menu-eng.asp) which will provide an indication regarding your client's insurability.

#### **Ambassador**

- Must reside in Canada
- Limited amount only. Maximum up to retention limit, subject to financial justification
- May require rating depending on origin of countries and travel
- May be a decline. Contact the Underwriting Department for clarification.
- Verify the Immigrant status rules and guidelines

#### **Foreign Nationals Residing Outside of Canada**

- BMO Insurance will not consider any application for a Foreign National living outside of Canada.

### **Illustrations**

A properly completed and signed illustration must accompany all Universal Life applications submitted in order to ensure accurate issuance of policies. It is recommended but not mandatory that an illustration accompanies all applications submitted.

### **Insurance Age**

Please refer to the illustration software for accuracy. Some products use age last birthday and other products use age nearest birthday. It is always recommended to input the date of birth when using illustration software.

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## Issued Business

After issue, a maximum of 45 days is allowed to obtain outstanding requirements, including outstanding premium.

## Medical Fees

BMO Insurance will not pay for the following:

- any fees in excess of those established by BMO Insurance;
- cost incurred by failure of the Insured to go to the appointment set for an examination;
- medical or special evidence not necessary according to the current requirements or not requested by the Underwriting Department.

**Note: Requirements ordered without submitting an application will be charged to the Advisor.**

## Medical Information Bureau (MIB) Pre-Notice

It is very important that the MIB Pre-Notice is always detached from the application and left with the client.

## Non-Contractual Changes

For any non-contractual change full evidence of insurability will be required. A change form along with a Long Form Health Certificate is needed for the life insured or in the case of a joint case, for all the lives insured under the plan.

## Canadian Residency

- Frequent or extended travel to country of origin or other countries may require ratings.
- Applicants must reside in Canada
- No minimum required period of residency in Canada, if permanent resident status is obtained.
- Confirmation of permanent resident status is required.
- Obtain a copy of Social Insurance Number or a copy of immigration status above.

[Underwriting Guide for Canadian Residency](#) – please refer to Appendix 1 for details.

**Contact the Underwriting Department if there is a question of status.**

## Policy Effective Date

Under the following two conditions, a policy is deemed to be effective.

1. Money (premium) has been collected by an authorized representative (contracted Advisor) of BMO Insurance, and
2. a) It is issued as applied for and no change of health, or  
b) If issued not as applied for, and no change of health (settling requirements are outstanding i.e., amendments, signed illustration) then upon delivery plus receipt of outstanding requirements.

## Pre-Authorized Cheque Plan (PAC)

- Complete and sign PAC authorization on the application.
- Attach specimen cheque marked "Void" for account from which PAC payments will be made.
- For non-C.O.D. applications, obtain cheque for 1 month's premium.
- The monthly PAC date will be the same date of the month as the policy effective date.

To calculate the monthly PAC withdrawal, divide the total annual premium, including policy fee and benefits, by 12 for Universal Life and multiply by 0.09 for all other life plans. Please note that the minimum PAC withdrawal is \$15.00 for a single policy or several policies combined. When a PAC deposit is returned NSF, the policy owner will be required to pay the currently due premium and all arrears before future PAC deposits are reinstated.

Initial Premium can be collected by PAC if requested on the application. *Note: No TIA is available if chosen.*

## Questionnaires

Questionnaires should be completed and submitted with the application to avoid the need of an APS when there is a history of:

- Alcohol/Drug abuse
- Respiratory disorder
- Mental/Nervous disorder

- Epilepsy disorder

Appropriate questionnaires should be completed if the Insured participates in:

- Parachuting
- Ultra-Light
- Hang gliding
- Scuba Diving
- Racing
- Sky diving
- Ballooning
- Aviation
- Mountaineering

## Ratings

The Underwriter will advise the Advisor of a rated offer. Confirmation of the offer from the Advisor is needed before proceeding to issue.

### **Armed Forces, Aviation, Hazardous Sports And Occupations**

As these occupations may represent a substandard risk, refer cases to the Underwriting Department. Please complete the appropriate questionnaire.

### **Ratings by Product, Rider and Benefit**

#### **Universal Life**

- A new rated illustration signed by the applicant is required.
- Table ratings are converted to a rated age on the Wave Illustration software and the Advisor will be advised of the additional rating in order to secure a newly signed illustration.
- BMO Insurance will require that for any rated Insured under 25, the table rating be converted to a flat extra.

#### **Critical Illness (Living Benefit 75 and 100)**

- Eligible only to a maximum rating of 250%, as advised by the Underwriter.

#### **Return of Premium on Death**

- Treated the same as the base plan.

#### **Preferred Term**

- There are five rate classifications. The rate classifications are:
  - Preferred Plus Non-smoker,
  - Standard Non-smoker
  - Preferred Non-smoker,
  - Standard Smoker
  - Preferred Smoker

Substandard Rates are available on the Standard Classifications only.

#### **Accidental Death**

- Can be rated 1 or 2 times the standard rate for certain impairments or risks. This rider cannot be offered for ratings of more than 200%.
- This rider cannot be offered if there is an avocational risk.

#### **Child Term Rider**

- This rider cannot be offered if the primary Insured is rated more than 200%.
- Any child rated more than 200% will be excluded from the rider.

#### **Waiver of Premium and Payor Waiver**

- This rider cannot be offered for ratings of more than 200%.

### **Review of Ratings**

An extra rating can be reviewed if:

- The policy is in force for a minimum of two years
- The Long Form Health Certificate and Request for Policy Change form (165E/162E) has been completed; and
- Medical requirements as requested by the Underwriter are completed at the Insured's expense.

### **Review of Occupational Ratings**

Upon request of the Insured, BMO Insurance will consider reviewing the occupational rating if the Insured has held a less hazardous job for at least one year. The Long Form Health Certificate and Request for Policy Change form will be required. Contact the Underwriting Department for assistance.

### **Reinstatement**

- Application must be made within two years of the date of lapse.
- The insured must be the same risk class or a better risk class than at the time of issue.
- All unpaid premiums, including the premium due for the month of reinstatement, plus interest as determined by BMO Insurance, must be collected. *(Note: If originally a substandard risk class, or if the amount of coverage is over \$500,000, do not collect premium until Reinstatement is approved)*

### **Reinsurance Offers**

An Underwriter must advise the reinsurer of any final facultative offer within 7 working days of the decision.

### **Replacements**

Please complete replacement forms for internal and external replacements at the time of application.

### **Residency Guideline**

The client must BE SOLICITED **ONLY** in Canada where BMO Life Assurance Company ('BMO Insurance') is licensed. In addition, BMO Insurance's licensed brokers and licensed advisors can solicit and sell insurance only in the jurisdictions where BMO Insurance is licensed. In those cases, the application and any other requirements must be completed and signed in Canada and the policy must be delivered in Canada.

Note that citizenship does not determine residency. BMO Insurance will issue policies only to clients who are Canadian residents for income tax purposes. If assistance is required in the determination of residency, you should visit the Canada Revenue Agency ("CRA") internet website [www.cra.gc.ca](http://www.cra.gc.ca)

### **Signature (Corporate Ownership)**

BMO Insurance requires 2 (two) signatures of officers of the corporation or 1 (one) officer signature and the Corporate seal. We require satisfactory evidence that the person or persons purporting to bind the company are authorized to do so.

### **Smoking Status**

#### **Change To Non-Smoker Status**

"BMO Insurance allows a change from smoker to non-smoker if the insured(s) has stopped using any form of tobacco product, nicotine substitutes or marijuana in the previous 12 consecutive months. A Long Form Health Certificate and Policy Change Application (167E) and a Urine HIV test (which should be negative for nicotine) are required on the life making the change. On Joint Last To Die coverages, all other lives will require only the Long Form Health Certificate and Policy Change Application (167E) to be completed. BMO Insurance will re underwrite the entire case and additional underwriting requirements will be ordered at the discretion of the underwriter."

#### **Smoker Definition**

Applicants who have used any form of tobacco within the past 12 months, including cigarette, cigarillos, cigars, pipe tobacco, chewing tobacco, snuff, marijuana, hashish, or nicotine replacement products and smoking cessation products will be assessed as a smoker.

An exemption is made for the occasional cigar smoker. An occasional cigar smoker is defined as an individual who does not smoke more than 12 cigars a year (or 1 a month). The urine test must be negative for nicotine. For the

purpose of this definition, cigarillo smokers are not considered as cigar smokers. This exemption only applies to occasional cigar smokers. Occasional cigar smokers cannot be preferred class.

Applicants with any other occasional smoking habits will be assessed as a smoker.

#### **Smoker Definition For Preferred Term**

Applicants who have not used any form of tobacco products in the last 5 years, including cigarette, cigarillos, cigars, pipe tobacco, chewing tobacco, snuff, marijuana, hashish or nicotine replacement products and smoking cessation products, may be considered for Preferred Plus non-smoker rates. Applicants who have not used any form of tobacco products in the last 2 years, including cigarette, cigarillos, cigars, pipe tobacco, chewing tobacco, snuff, marijuana, hashish or nicotine replacement products and smoking cessation products, may be considered for Preferred non-smoker rates. Clients who are cigar, pipe, and cigarette smokers or chew tobacco may be considered for Preferred smoker rates.

#### **Temporary Insurance Agreement**

See Temporary Insurance Agreement on the current application form for Terms and Conditions. It is important that the receipt is left with the client.

Please ensure you understand the TIA guidelines set up in the application.

During the underwriting process, underwriting may decide to terminate the TIA coverage based on medical information received. The money received with the application will automatically be returned with a letter to the client (copy to MGA and Advisor) explaining our reason and that there is no longer coverage under the TIA.

#### **Validity of Documents**

Time Frame for Requirements

Ages 0-70

- Use paramedical/medical exams for up to 12 months as long as the case is placed and paid for within this time period.
- Paramedical/medical exams older than 90 days will require a Declaration of Good Health (DOGH) on delivery
- Other requirements, (i.e., labs, EKG, IR, MVR) can be used for up to one year.
- MIB should be re-run when evidence being used is beyond 6 months.

Ages 71 +

- Use paramedical/medical exams for up to 12 months as long as the case is placed and paid for within this time period.
- Paramedical/medical exams older than 60 days will require a Declaration of Good Health (DOGH) on delivery
- Other requirements, (i.e., labs, EKG, IR, MVR), can be used for up to one year
- MIB should be re-run when evidence being used is beyond 6 months.

Attending Physician's Reports (APS) may include medical requirements, which we may use in lieu of current new business requirements. Use the above rules for these requirements.

#### **Example of APS information use:**

- APS exam in conjunction with a Part B.
- APS blood profile (if it includes all of the same tests that we would normally get with our blood profile) in conjunction with a new business urine test.
- Various heart tests may be used in lieu of a needed EKG or treadmill.

Any consideration of time periods outside of these guidelines will be considered an exception and will require approval from the VP of Underwriting.

	<u>Life Product</u>	<u>CI Product</u>
Part I of application	6 months	6 months
Part II of application	6 months	6 months
EKG + X-rays	12 months	12 months
Para-medical Exam	12 months	12 months
Blood Profile	12 months	12 months
Urine HIV	12 months	12 months
Saliva	12 months	12 months

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## Appendix 1: Underwriting Guide for Canadian Residency

Status	Education	Examples of Occupations	Plans and Benefits Available	Proof of residency status	If a resident for <u>less than 1 year</u> Medical Requirements must be completed in Canada. The following requirements need to be completed in addition to the routine age and amount requirements	Non-Medical Requirements	Eligible Underwriting Assessments:
<b>Permanent Resident status</b>	N/A	N/A	All, on arrival in Canada	* Insurance application must declare Canadian residency, Social Insurance Number (SIN) and permanent resident date of entry.	* Up to age 50 - Blood Profile with Hepatitis B and C screens and Paramedical Exam. Over age 50 -Medical Exam by a Physician, Blood profile with Hepatitis B and C Screen * Urinalysis * If there is medical history requiring treatment, the client must have established care with a physician in Canada and an APS will be required.	* Financial justification is based on income, net worth and assets in Canada * Travel questionnaire if travelling indicated on application * Confirm place of birth on application	All
<b>Provincial Nominee Program Level A:</b> Individuals currently working in Canada in a skill level A professional occupation.	Note that skill level A professional occupations generally require university education.	For example, Doctors, Nurses, Pharmacists, Lawyers, Engineers, Accountants	* \$500,000 Life coverage, All products * \$150,000 CI coverage, All products	* Copy of Provincial Nominee <b>acceptance letter</b> , or Quebec selection certificate. * Copy of Valid Work Permit * Confirmation of pending application for permanent resident status in process * Minimum <b>6 months</b> residence in Canada	* Up to age 50 - Blood Profile with Hepatitis B and C screens and Paramedical Exam. Over age 50 -Medical Exam by a Physician, Blood profile with Hepatitis B and C Screen * Urinalysis * If there is medical history requiring treatment, the client must have established care with a physician in Canada and an APS will be required.	* Financial justification is based on income, net worth and assets in Canada * Advisor Cover Letter must include - how the insurance amount was arrived at as well as the source of deposit, and insured's income and net worth in Canada. - purpose of residing in Canada and intent to remain in Canada - if in Canada for an extended period of time, what is the program that the insured came in under. * Travel questionnaire if travelling indicated on application	* Standard to a maximum rating of 200%. Waiver of Premium Benefit and Accidental Death Benefits are not available until Permanent status has been obtained.



Status	Education	Examples of Occupations	Plans and Benefits Available	Proof of residency status	If a resident for <u>less than 1 year</u> Medical Requirements must be completed in Canada. The following requirements need to be completed in addition to the routine age and amount requirements	Non-Medical Requirements	Eligible Underwriting Assessments:
<b>Provincial Nominee Program Level B:</b> Individuals approved under a provincial nominee program for skill level B occupations and who have applied for Permanent Resident status	Skill level B occupations usually require apprenticeship training or college education	Examples of skill level B occupations are Electricians, plumbers, mechanics, butchers, medical technologists, financial and insurance advisors, bakers, foreman, chefs, carpenters, retail sales supervisors	* \$500,000 Life coverage, All products * \$150,000 CI coverage, All products	* Copy of Provincial Nominee <b>acceptance letter</b> , or Quebec selection certificate. * Copy of Valid Work Permit * Confirmation of pending application for permanent resident status in process * Minimum <b>6 months</b> residence in Canada	* Up to age 50 - Blood Profile with Hepatitis B and C screens and Paramedical Exam. Over age 50 -Medical Exam by a Physician, Blood profile with Hepatitis B and C Screen * Urinalysis * If there is medical history requiring treatment, the client must have established care with a physician in Canada and an APS will be required.	* Financial justification is based on income, net worth and assets in Canada * Advisor Cover Letter (as per above) * Travel questionnaire if travelling indicated on application	* Standard to a maximum rating of 200%. Waiver of Premium Benefit and Accidental Death benefits are not available until Permanent Resident status has been obtained.
<b>Provincial Nominee Program Level C:</b> Individuals approved under the provincial nominee program for skill level C occupations and who have applied for Permanent Resident status	Skill level C usually require completion of secondary school and some courses or training specific to the occupation or specific work experiences.	Examples of skill level C occupations are managers/ supervisors of restaurants who have people reporting to them, personal support workers, transit drivers, machine operator, assembly workers, heavy equipment operators, sewing machine operators, Oil and gas drilling related workers	* \$500,000 Life coverage, All products * \$150,000 CI coverage, All products	* Copy of Provincial Nominee <b>acceptance letter</b> , or Quebec selection certificate. * Copy of Valid Work Permit * Confirmation of pending application for permanent resident status in process * Minimum <b>6 months</b> residence in Canada	* Up to age 50 - Blood Profile with Hepatitis B and C screens and Paramedical Exam. Over age 50 -Medical Exam by a Physician, Blood profile with Hepatitis B and C Screen * Urinalysis * If there is medical history requiring treatment, the client must have established care with a physician in Canada and an APS will be required.	* Financial justification is based on income, net worth and assets in Canada * Advisor Cover Letter (as per above) * Travel questionnaire if travelling indicated on application	* Standard to a maximum rating of 200%. Waiver of Premium Benefit and Accidental Death Benefits are not available until Permanent Resident status has been obtained
<b>Provincial Nominee Program Level D:</b> <b>Are not eligible for coverage, specifically class 6711 (Fast food preparers and fast food service attendants)</b>	N/A	Cashiers, Food Counter attendants, , kitchen helpers, trades helpers, construction labourers, public works and other labourers, harvesting, landscaping labourers etc.	N/A	N/A	N/A	N/A	N/A

Status	Education	Examples of Occupations	Plans and Benefits Available	Proof of residency status	If a resident for <u>less than 1 year</u> Medical Requirements must be completed in Canada. The following requirements need to be completed in addition to the routine age and amount requirements	Non-Medical Requirements	Eligible Underwriting Assessments:
<b>Individuals who have applied for Canadian Residency Status but have not yet received Landed papers-who are married to Canadian citizens or permanent residents of Canada</b>	N/A	N/A	* \$2,000,000 Life Coverage, All products * \$250,000 CI Coverage, All products	* Copy of Valid Work Permit * Confirmation of pending application for permanent resident status in process * Minimum <b>3 months</b> residence in Canada	* Up to age 50 - Blood Profile with Hepatitis B and C screens and Paramedical Exam. Over age 50 -Medical Exam by a Physician, Blood profile with Hepatitis B and C Screen * Urinalysis * If there is medical history requiring treatment, the client must have established care with a physician in Canada and an APS will be required.	* Financial justification is based on income, net worth and assets in Canada * Advisor Cover Letter (as per above) * Travel questionnaire if travelling indicated on application	* Standard to a maximum rating of 250%. Waiver of Premium Benefit and Accidental Death Benefits are not available until Permanent Resident status has been obtained.
<b>Domestic workers or Nannies/ Live-In Caregivers</b>	N/A	N/A	* Maximum \$300,000 Life Coverage, all products * \$50,000 CI Coverage	* Copy of Valid Work Permit * Minimum <b>3 months</b> residence in Canada.	* Up to age 50 - Blood Profile with Hepatitis B and C screens and Paramedical Exam. Over age 50 -Medical Exam by a Physician, Blood profile with Hepatitis B and C Screen * Urinalysis * If there is medical history requiring treatment, the client must have established care with a physician in Canada and an APS will be required.	* Financial justification is based on income, net worth and assets in Canada * Advisor Cover Letter (as per above) * Travel questionnaire if travelling indicated on application	* Standard to a maximum rating of 250%. Waiver of Premium Benefit and Accidental Death Benefits are not available until Permanent Resident status has been obtained.
<b>Foreign Trained Physicians/Skilled Workers</b>	N/A	Trained and licensed physicians or skilled workers/professional degrees who are working in Canada under the provincial program for federal immigration purposes.	* \$2,000,000 Life Coverage, All products * \$250,000 CI Coverage, All products	* Copy of employment contract * Confirmation of pending application for permanent resident status in process. * Copy of Valid Work Permit * Minimum <b>3 months</b> residence in Canada	* Up to age 50 - Blood Profile with Hepatitis B and C screens and Paramedical Exam. Over age 50 -Medical Exam by a Physician, Blood profile with Hepatitis B and C Screen * Urinalysis * If there is medical history requiring treatment, the client must have established care with a physician in Canada and an APS will be required.	* Financial justification is based on income, net worth and assets in Canada * Advisor Cover Letter (as per above) * Travel questionnaire if travelling indicated on application	* Standard to a maximum rating of 250%. Waiver of Premium Benefit and Accidental Death Benefits are not available until Permanent Resident status has been obtained.

Status	Education	Examples of Occupations	Plans and Benefits Available	Proof of residency status	If a resident for <u>less than 1 year</u> Medical Requirements must be completed in Canada. The following requirements need to be completed in addition to the routine age and amount requirements	Non-Medical Requirements	Eligible Underwriting Assessments:
<b>OTHERS THAT DO NOT QUALIFY</b>	N/A	<ul style="list-style-type: none"> <li>* Foreign Students</li> <li>* Temporary work permit holders other than above</li> <li>* Refugees</li> <li>* Foreign Nationals</li> <li>* Skill Level D</li> <li>* Spouses and dependents of primary applicants for permanent resident status</li> </ul>	N/A	N/A	N/A	N/A	N/A