

SERFF Tracking Number:	AEGD-125936024	State:	Arkansas
Filing Company:	Transamerica Life Insurance Co.	State Tracking Number:	41165
Company Tracking Number:	08054		
TOI:	L08 Life - Other	Sub-TOI:	L08.000 Life - Other
Product Name:	1-014 11-108		
Project Name/Number:	Modification of Incontestability and Suicide Provisions Endorsements/08054		

## Filing at a Glance

Company: Transamerica Life Insurance Co.

Product Name: 1-014 11-108

TOI: L08 Life - Other

Sub-TOI: L08.000 Life - Other

Filing Type: Form

SERFF Tr Num: AEGD-125936024 State: ArkansasLH

SERFF Status: Closed

State Tr Num: 41165

Co Tr Num: 08054

State Status: Approved-Closed

Co Status:

Reviewer(s): Linda Bird

Author: Patricia Ray

Disposition Date: 12/23/2008

Date Submitted: 12/18/2008

Disposition Status: Approved

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

## General Information

Project Name: Modification of Incontestability and Suicide Provisions Endorsements

Status of Filing in Domicile: Authorized

Project Number: 08054

Date Approved in Domicile: 12/10/2008

Requested Filing Mode: Review & Approval

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Group Market Size:

Overall Rate Impact:

Group Market Type:

Filing Status Changed: 12/23/2008

State Status Changed: 12/23/2008

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

Transamerica Life Insurance Company

NAIC #: 468-86231

FEIN #: 39-0989781

Form Filing – Individual Life Insurance

Form 1-014 11-108, Modification of Suicide Provision Endorsement

Form 1-015 11-108, Modification of Incontestability and Suicide Provisions Endorsement

Form 1-016 11-108, Modification of Incontestability and Suicide Provisions Endorsement

*SERFF Tracking Number:* AEGD-125936024                      *State:* Arkansas  
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*TOI:* L08 Life - Other                      *Sub-TOI:* L08.000 Life - Other  
*Product Name:* 1-014 11-108  
*Project Name/Number:* Modification of Incontestability and Suicide Provisions Endorsements/08054

Dear Commissioner:

Enclosed please find the above-captioned forms for your review and approval. These forms are new and will not replace any forms currently on file with your Department.

These forms are submitted in final printed form in which they will be distributed to insureds. These forms are subject to only minor modifications in paper size and stock, ink, border, Company logo, Company address, adaptation to computer printing, and Officers' signatures.

These forms do not contain any unusual or possibly controversial items or provisions that deviate from normal company or industry standards.

Form 1-014 11-108 is intended to be used with new policies issued as replacements for one or more existing policies to define our limits of liability for suicide. The form can be used with the following products: Term Life, Universal Life, Variable Universal Life, Interest Sensitive Whole Life, and Whole Life.

Form 1-015 11-108 is intended to be used with new policies issued as replacements for one or more existing policies to define our limits of liability for contestability and suicide. The form can be used with the following products: Term Life, Universal Life, Variable Universal Life, Interest Sensitive Whole Life, and Whole Life.

Form 1-016 11-108 is intended to be used with new policies issued as a result of conversion from existing Term Life insurance policies to define our limits of liability for contestability and suicide. The form can be used with the following products: Universal Life, Variable Universal Life, Interest Sensitive Whole Life, and Whole Life.

We have included the Certification of Readability in this submission.

Iowa, our domiciliary state, does not require filing fees.

Please review this submission and contact me with any questions, comments or concerns at your earliest convenience. You can reach me by e-mail at [pat.ray@transamerica.com](mailto:pat.ray@transamerica.com), or by phone at 213-741-6762 (call collect), or by fax at 213-741-5839.

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Thank you for your time and attention to this filing.

## Company and Contact

### Filing Contact Information

Pat Ray, Analyst Pat.Ray@Transamerica.com  
 1150 South Olive St (213) 741-6762 [Phone]  
 Los Angeles, CA 90015 (213) 741-5839[FAX]

### Filing Company Information

Transamerica Life Insurance Co. CoCode: 86231 State of Domicile: Iowa  
 Contract Development T-03-06 Group Code: 468 Company Type:  
 1150 S. Olive St.  
 Los Angeles, CA 90015 Group Name: State ID Number:  
 (213) 742-2241 ext. [Phone] FEIN Number: 39-0989781  
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## Filing Fees

Fee Required? Yes  
 Fee Amount: \$60.00  
 Retaliatory? No  
 Fee Explanation: \$20.00 per each endorsement  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Transamerica Life Insurance Co.	\$60.00	12/18/2008	24618639

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Product Name: 1-014 11-108  
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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved	Linda Bird	12/23/2008	12/23/2008

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## Disposition

Disposition Date: 12/23/2008

Implementation Date:

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: AEGD-125936024 State: Arkansas  
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<b>Item Type</b>	<b>Item Name</b>	<b>Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	Certification/Notice		Yes
<b>Supporting Document</b>	Application		No
<b>Form</b>	Modification of Suicide Provision		Yes
<b>Form</b>	Modification of Incontestability and Suicide Provisions Endorsement		Yes
<b>Form</b>	Modification of Incontestability and Suicide Provisions Endorsement		Yes

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## Form Schedule

**Lead Form Number:** 1-014 11-108

Review Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	1-014 11-108	Policy/Cont Modification of ract/Fratern Suicide Provisional Certificate: Amendment, Insert Page, Endorsement or Rider	Initial		55	1-014 11-108 Endorsement.pdf
	1-015 11-108	Policy/Cont Modification of ract/Fratern Incontestability and al Suicide Provisions Certificate: Endorsement Amendment, Insert Page, Endorsement or Rider	Initial		52	1-015 11-108 Endorsement.pdf
	1-016 11-108	Policy/Cont Modification of ract/Fratern Incontestability and al Suicide Provisions Certificate: Endorsement Amendment, Insert Page, Endorsement or Rider	Initial		50	1-016 11-108 Endorsement.pdf

TRANSAMERICA LIFE INSURANCE COMPANY

MODIFICATION OF SUICIDE PROVISION

Transamerica Life Insurance Company has issued this endorsement as a part of the policy to which it is attached.

This policy has been issued as a replacement of existing insurance.

In applying the provision of the policy titled "Amount We Pay is Limited in the Event of Suicide", the date of issue for \$ \_\_\_\_\_ of face amount will be \_\_\_\_\_.

The suicide provision will apply to the balance of the face amount for a period of 2 years after the issue date of this policy.

Signed for the Company at Cedar Rapids, Iowa, on the date of issue of this policy.



Secretary



President

TRANSAMERICA LIFE INSURANCE COMPANY

MODIFICATION OF INCONTESTABILITY AND SUICIDE PROVISIONS  
ENDORSEMENT

Transamerica Life Insurance Company has issued this endorsement as a part of the policy to which it is attached.

This policy has been issued as a replacement of existing insurance.

In applying the provision of this policy titled "Incontestability of the Policy", the date of issue for \$ \_\_\_\_\_ of face amount will be \_\_\_\_\_. The incontestability provision will apply to the balance of the face amount for a period of 2 years after the issue date of this policy.

In applying the provision of this policy titled "Amount We Pay is Limited in the Event of Suicide", the date of issue for \$ \_\_\_\_\_ of face amount will be \_\_\_\_\_. The suicide provision will apply to the balance of the face amount for a period of 2 years after the issue date of this policy.

Signed for the Company at Cedar Rapids, Iowa, on the date of issue of this policy.



Secretary



President

TRANSAMERICA LIFE INSURANCE COMPANY

MODIFICATION OF INCONTESTABILITY AND SUICIDE PROVISIONS  
ENDORSEMENT

Transamerica Life Insurance Company has issued this endorsement as a part of the policy to which it is attached.

A portion of this policy has been issued as a conversion of \$ \_\_\_\_\_ of Term Insurance which had a date of issue of \_\_\_\_\_.

In applying the provisions of this policy relating to incontestability or suicide, the "date of issue" shall mean the date of issue shown in the Policy Data, except that with respect to the portion of the face amount represented by \$ \_\_\_\_\_, the date of issue shall be considered the date shown above for such amount.

This endorsement shall not affect or modify such provisions as they may apply to any riders attached to this policy.

Signed for the Company at Cedar Rapids, Iowa, on the date of issue of the policy.



Secretary



President

*SERFF Tracking Number:*      *AEGD-125936024*                      *State:*                      *Arkansas*  
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*TOI:*                      *L08 Life - Other*                      *Sub-TOI:*                      *L08.000 Life - Other*  
*Product Name:*              *1-014 11-108*  
*Project Name/Number:*      *Modification of Incontestability and Suicide Provisions Endorsements/08054*

## **Rate Information**

Rate data does NOT apply to filing.

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Product Name: 1-014 11-108  
Project Name/Number: Modification of Incontestability and Suicide Provisions Endorsements/08054

## Supporting Document Schedules

### Review Status:

**Satisfied -Name:** Certification/Notice

12/08/2008

**Comments:**

Readability Certification

**Attachment:**

AR Readability Certification 08054.pdf

**TRANSAMERICA LIFE INSURANCE COMPANY**  
**Home Office: Cedar Rapids, Iowa**

**ARKANSAS CERTIFICATION OF READABILITY**

This is to certify that the attached life insurance forms have each achieved a Flesch Reading Ease Score as shown.

<b><u>Form Number</u></b>	<b><u>Form Description</u></b>	<b><u>Flesch Score</u></b>
1-014 11-108	Modification of Suicide Provision Endorsement	55.9
1-015 11-108	Modification of Incontestability and Suicide Provisions Endorsement	52.3
1-016 11-108	Modification of Incontestability and Suicide Provisions Endorsement	50.2

and each form complies with the requirements of Arkansas Statutes Annotated Sections 66-3251 through 66-3258, cited as the Life and Disability Insurance Policy Language Simplification Act.



\_\_\_\_\_  
Fred Alvarado, Manager  
Contract Development

12/18/2008  
Date



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Cheryl Bock, Assistant Vice President  
Contract Development