

SERFF Tracking Number: JPFC-125560637 State: Arkansas
Filing Company: Lincoln Life & Annuity Company of New York State Tracking Number: 38653
Company Tracking Number: DM-06034
TOI: A10 Annuities - Other Sub-TOI: A10.000 Annuities - Other
Product Name: Annuity Application
Project Name/Number: /

Filing at a Glance

Company: Lincoln Life & Annuity Company of New York

Product Name: Annuity Application SERFF Tr Num: JPFC-125560637 State: ArkansasLH
TOI: A10 Annuities - Other SERFF Status: Closed State Tr Num: 38653
Sub-TOI: A10.000 Annuities - Other Co Tr Num: DM-06034 State Status: Approved-Closed
Filing Type: Form Co Status: Reviewer(s): Linda Bird
Authors: Tracy Jackson, David Disposition Date: 04/21/2008
Miceli
Date Submitted: 04/09/2008 Disposition Status: Approved
Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

General Information

Project Name: Status of Filing in Domicile: Pending
Project Number: Date Approved in Domicile:
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: 04/21/2008
State Status Changed: 04/21/2008 Deemer Date:
Corresponding Filing Tracking Number:
Filing Description:
RE: DM-06034-70 - Fixed Annuity Application

Lincoln Life & Annuity Company of New York
NAIC #0107-62057
FEIN# 22-0832760

SERFF Tracking Number: JPFC-125560637 State: Arkansas
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Dear Sir or Madam:

Enclosed for your review and approval are final print copies of annuity application DM-06034-70. Form DM-06034-70 is being filed to replace form DM-06033-70 which was approved by your department on September 4, 2003.

Form DM-06034-70 is a direct marketing Annuity Application that will be used by Vanguard, Inc. when marketing form 94-522 to the general public. Form 94-522, Single Premium Deferred Annuity was approved by your Department on February 28, 2006.

Form DM-06034-70 contains no unusual or controversial features or language that deviates from normal insurance industry standards. Form DM-06034 has a Flesch Readability Score of 51.7. The form was filed concurrently in our domiciliary state, New York, where it is pending approval.

Upon approval, the Company reserves the right to change the format of the form without altering the approved language, and to offer it in an electronic version at some later date.

Thank you for your time and prompt review of this submission. Please let me know if I can provide any additional information that would assist you in the review process. I can be reached at 1-800-458-5299, ext. 4178 or email at Tracy.Jackson@LFG.com.

Company and Contact

Filing Contact Information

Tracy Jackson, Jr. Policy Forms Analyst tracy.l.jackson@lfg.com
100 N. Greene St. (800) 458-5299 [Phone]
Greensboro, NC 27401 (111) 111-1111[FAX]

Filing Company Information

Lincoln Life & Annuity Company of New York CoCode: 62057 State of Domicile: New York
100 Madison St. Group Code: 107 Company Type: Insurance
suite 1860
Syracuse, NY 13202-2802 Group Name: State ID Number:

SERFF Tracking Number: JPFC-125560637 State: Arkansas
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(800) 458-5299 ext. [Phone]

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Filing Fees

Fee Required? Yes
Fee Amount: \$20.00
Retaliatory? No
Fee Explanation:
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Lincoln Life & Annuity Company of New York	\$20.00	04/09/2008	19394946

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Linda Bird	04/21/2008	04/21/2008

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Disposition

Disposition Date: 04/21/2008

Implementation Date:

Status: Approved

Comment:

Rate data does NOT apply to filing.

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Certification/Notice		No
Supporting Document	Application		Yes
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	SOV		Yes
Form	Fixed Annuity Application		Yes

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Form Schedule

Lead Form Number: DM-06034-70

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	DM-06034-70	Application/ Fixed Annuity Enrollment Form	Application Form	Initial		52	DM-06034-70.pdf

Daytime Telephone Number

Evening Telephone Number

Check here if the owner is a minor and the policy is to be registered under the Uniform Gifts/Transfers to Minors Act (UGMA/UTMA). UGMA/UTMA policies will be registered using the minor's Social Security number. Fill in the name of the state below, and provide all the following information on the policy's custodian.

This gift or transfer is being made under the _____ (name of state) Uniform Gifts/Transfers to Minors Act.

Name of Custodian (first, middle initial, last)

Male

Female

Citizenship

U.S.
Citizen

Resident
Alien

Birth Date (month, day, year)

Social Security Number

OR

Individual Taxpayer Identification Number
(if a resident alien)

Street Address (P.O. box or rural route number is **not** acceptable.)

City

State

Zip

Daytime Telephone Number

Evening Telephone Number

2. Joint Policy Owner Information (If there is a joint owner, please provide all information requested. If there is no joint owner, leave this section blank. If this is a rollover to a qualified policy, a joint owner is not permitted.)

Name (first, middle initial, last)

Male

Female

Citizenship

U.S.
Citizen

Resident
Alien

Birth Date (month, day, year)

Social Security Number

OR

Individual Taxpayer Identification Number
(if a resident alien)

Street Address (P.O. box or rural route number is **not** acceptable.)

City

State

Zip

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6. Your Method of Purchase (You can establish your Vanguard Fixed Annuity—Single 5 policy by selecting one of the options below: a 1035 exchange, a check made payable to Lincoln Life & Annuity Company of New York, a wire transfer, or a redemption of shares from an existing Vanguard mutual fund account. Fund shares will be redeemed at their net asset value on the date of redemption. If you are making your purchase by check, do not use a cashier's check. For qualified asset transfers, complete **Section 8**.)

If the Vanguard fund account registration and the policy registration as shown in **Sections 1 and 2** are not identical (e.g., names, initials, abbreviations), a signature guarantee will be required. A signature guarantee can be obtained from a bank, a trust company, or a member of a stock exchange. A signature guarantee cannot be provided by a notary public.

Note: The interest rate in effect at the time your policy is issued is the guaranteed rate you'll receive for five years. The interest rate is subject to change up until the time your policy is issued.)

- 1035 exchange
- Check for \$, , . (payable to Lincoln Life & Annuity Company of New York) is enclosed.
- Wire transfer for \$, , . . I understand that if I select this option, Vanguard will contact me with instructions.
- Redeem \$, , . from my Vanguard fund account listed below:

Fund Name	Account Number

➤ ➤
 Signature of Account Owner (for redemptions only) Signature of Joint Account Owner (if any)

Signature Guaranteed By (applies to all signatures in this section):

➤
Signature of Authorized Bank Officer

Authorized Bank Officer's Title

 --
Bank Name Date (month, day, year)

Guarantee Stamp

7 Replacement Annuity (If you wish to exchange one or more **nonqualified** annuities or life insurance policies from other companies, check the box below marked "Yes," then complete the enclosed 1035 Exchange Assignment Form and return it with this application. Note that the existing annuities or life insurance policies must have a combined value of \$10,000 or more. If you are not making an exchange, check the box marked "No.")

Will this annuity replace, change, or result in the discontinuance of any life insurance or annuity contract from any company?

Yes No

If yes, provide the company name and policy information below:

Company Name

Policy Number

\$, , .

Value

Company Name

Policy Number

\$, , .

Value

Company Name

Policy Number

\$, , .

Value

8. Is This a Rollover? (Complete this section only if you wish to roll over **qualified** funds from an employer-sponsored retirement plan, IRA, or qualified annuity. To find out if your assets are eligible for a tax-free rollover, please consult your employer or custodian. **Note:** Additional forms may be required to complete your rollover. Call us at **800-522-5555** for details.)

My single premium payment is a rollover of a distribution from a qualified employer-sponsored retirement plan, IRA, or qualified annuity, and I intend to establish this annuity as a qualified policy.

Company/Custodian Name

Policy Number

\$, , .

Value

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Rate Information

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Supporting Document Schedules

Review Status:
Bypassed -Name: Certification/Notice 03/20/2008
Bypass Reason: Not required for this filing.
Comments:

Review Status:
Satisfied -Name: Application 03/20/2008
Comments:
This is an application filing. The application is under the Form Schedule Tab.

Review Status:
Bypassed -Name: Life & Annuity - Acturial Memo 03/20/2008
Bypass Reason: not required for this filing
Comments:

Review Status:
Satisfied -Name: SOV 04/08/2008
Comments:
Attachment:
Variability Statement.pdf

STATEMENT OF VARIABILITY

Lincoln Life & Annuity Company of New York

NAIC # 62057 FEIN 22-0832760

Form DM-06034, Annuity Application

The following data has been shown within brackets in the above referenced form for reasons stated as follows:

Page #	Bracketed Item	Explanation
1	Return and overnight Address	If we change locations, we will not have to refile the application.
1	State specific residents	These specified states require a state specific application.
1, 6	Toll-free telephone number	This is an 800 toll-free telephone number for inquiries.
All	Section Numbers	The page numbers will vary depending on the sections that are printed in the application.
All	Page Numbers	The page number will change depending on the sections that print.