

SERFF Tracking Number: GEFA-126405668 State: Arkansas
Filing Company: Genworth Life and Annuity Insurance Company State Tracking Number: 44235
Company Tracking Number: GNW1800 1107
TOI: L08 Life - Other Sub-TOI: L08.000 Life - Other
Product Name: Replacement Form
Project Name/Number: Replacement Form/GNW1800 1107

Filing at a Glance

Company: Genworth Life and Annuity Insurance Company

Product Name: Replacement Form

TOI: L08 Life - Other

Sub-TOI: L08.000 Life - Other

Filing Type: Form

SERFF Tr Num: GEFA-126405668 State: Arkansas

SERFF Status: Closed-Approved-
Closed State Tr Num: 44235

Co Tr Num: GNW1800 1107

Authors: Richard Cromwell, June
Lipscomb, Camisha Jones

Date Submitted: 12/03/2009

State Status: Approved-Closed

Reviewer(s): Linda Bird

Disposition Date: 12/03/2009

Disposition Status: Approved-
Closed

Implementation Date:

Implementation Date Requested: On Approval

State Filing Description:

General Information

Project Name: Replacement Form

Project Number: GNW1800 1107

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 12/03/2009

Deemer Date:

Submitted By: Camisha Jones

Filing Description:

Re:Genworth Life and Annuity Insurance Company

NAIC# 4011-65536 FEIN# 54-0283385

Status of Filing in Domicile: Not Filed

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 12/03/2009

Created By: Camisha Jones

Corresponding Filing Tracking Number:

FORM DESCRIPTION

GNW1800 1107 Important Notice:Replacement of Life Insurance or Annuities

50135 01/01/10 Life Insurance and Annuities Replacement Memorandum

SERFF Tracking Number: GEFA-126405668 State: Arkansas
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Dear Sirs:

We are submitting the above referenced replacement forms for your review and approval. These forms are being filed in compliance with Arkansas Rule 97.

These forms are being used in the replacement process for both life insurance and annuities.

We trust that this submission will be acceptable to your Department. Please let me know if you should have any questions or comments

Sincerely,

Camisha Jones

Camisha Jones
Contracts Analyst
Camisha.jones@genworth.com
804-484-7044

Company and Contact

Filing Contact Information

Camisha Jones, Compliance Analyst Camisha.Jones@genworth.com
6610 W. Broad Street 804-484-7044 [Phone]
Bldg 2, 5th Floor 804-281-6057 [FAX]
Richmond, VA 23230

Filing Company Information

Genworth Life and Annuity Insurance Company CoCode: 65536 State of Domicile: Virginia
6620 W Broad Street Group Code: 350 Company Type: LifeHealth &
Annuity
Richmond, VA 23230 Group Name: State ID Number:
(804) 281-6600 ext. [Phone] FEIN Number: 54-0283385

Filing Fees

SERFF Tracking Number: GEFA-126405668 State: Arkansas
Filing Company: Genworth Life and Annuity Insurance Company State Tracking Number: 44235
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Fee Required? Yes
Fee Amount: \$60.00
Retaliatory? No
Fee Explanation: \$20 per form x 3 = \$60
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Genworth Life and Annuity Insurance Company	\$60.00	12/03/2009	32443407

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	12/03/2009	12/03/2009

SERFF Tracking Number: GEFA-126405668 State: Arkansas
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Project Name/Number: Replacement Form/GNW1800 1107

Disposition

Disposition Date: 12/03/2009

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: GEFA-126405668 State: Arkansas
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 Company Tracking Number: GNW1800 1107
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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		No
Supporting Document	Application		No
Form	Important Notice:Replacement of Life Insurance or Annuities		Yes
Form	Life Insurance and Annuities Replacement Memorandum		Yes

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 Company Tracking Number: GNW1800 1107
 TOI: L08 Life - Other Sub-TOI: L08.000 Life - Other
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Form Schedule

Lead Form Number: GNW1800 1107

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	GNW1800 1107	Other	Important Notice:Replacement of Life Insurance or Annuities	Initial		0.000	GNW1800_113007_fill_gnw (2).pdf
	50135 01/01/10	Other	Life Insurance and Annuities Replacement Memorandum	Initial		0.000	50135_010110_gnw (2).pdf



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Genworth Life & Annuity
Genworth Life
genworth.com

Important notice: replacement of life insurance or annuities

from Genworth Life and Annuity Insurance Company and Genworth Life Insurance Company

Page 1 of 3

Original to Insurer

This document must be signed by you and the producer, if there is one, and a copy left with you.

Genworth Life Insurance Company Genworth Life and Annuity Insurance Company

Replacement information

The Genworth Financial insurance companies listed above are referred to as “we” in this document.

The owner is referred to as “you” and “your.”

Both questions to the right must be answered.

If either of the answers is “yes,” provide the information noted below and complete the producer replacement sales certification on page 2.

This document must be signed by you and the producer, if there is one, and a copy left with you.

You are contemplating the purchase of a life insurance policy or annuity contract. In some cases this purchase may involve discontinuing or changing an existing policy or contract. If so, a replacement is occurring. Financed purchases are also considered replacements.

A replacement occurs when a new policy or contract is purchased and, in connection with the sale, you discontinue making premium payments on the existing policy or contract, or an existing policy or contract is surrendered, forfeited, assigned to the replacing insurer, or otherwise terminated or used in a financed purchase.

A financed purchase occurs when the purchase of a new life insurance policy involves the use of funds obtained by the withdrawal or surrender of or by borrowing some or all of the policy values, including accumulated dividends, of an existing policy to pay all or part of any premium or payment due on the new policy. A financed purchase is a replacement.

You should carefully consider whether a replacement is in your best interest. You will pay acquisition costs and there may be surrender costs deducted from your policy or contract. You may be able to make changes to your existing policy or contract to meet your insurance needs at less cost. A financed purchase will reduce the value of your existing policy and may reduce the amount paid upon the death of the insured.

We want you to understand the effects of replacements before you make your purchase decision and ask that you answer the following questions and consider the questions on the last page of this form.

Are you considering discontinuing making premium payments, surrendering, forfeiting, assigning to the insurer, or otherwise terminating your existing policy or contract?

Yes No

Are you considering using funds from your existing policies or contracts to pay premiums due on the new policy or contract?

Yes No

The existing policy or contract is being replaced because:

.

If you answered “Yes” to either of the above questions, list each existing policy or contract you are contemplating replacing (include the name of the insurer, the insured or annuitant, and the policy or contract number if available) and whether each policy or contract will be replaced or used as a source of financing:

Insurer name	Contract/policy number
.	.
Insured/annuitant name	Select one
.	<input type="radio"/> Replaced <input type="radio"/> Financing
Insurer name	Contract/policy number
.	.
Insured/annuitant name	Select one
.	<input type="radio"/> Replaced <input type="radio"/> Financing
Insurer name	Contract/policy number
.	.
Insured/annuitant name	Select one
.	<input type="radio"/> Replaced <input type="radio"/> Financing

Make sure you know the facts. Contact your existing company or its agent for information about the old policy or contract. If you request one, an in-force illustration, policy summary or available disclosure documents must be sent to you by the existing insurer. Ask for and retain all sales material used by the agent in the sales presentation. Be sure that you are making an informed decision.



Free Look Period

Upon issuance of your new policy or contract, the policy may be returned within 30 days from the date of delivery. **This return period may be different from what is reflected in your policy or contract; if so, the longer period will be applicable.**

If you return the policy, you will be entitled to receive:

- In Utah: an unconditional full refund of all premiums or considerations paid on the policy or contract
- All other states: an unconditional full refund of all premiums or considerations paid on the policy or contract, including any policy fees or charges or, in the case of a variable or market value adjustment contract, a payment of the cash surrender value provided under the contract plus the fees and other charges deducted from gross premiums or considerations or imposed under the contract.

Signature

I certify that the responses herein are, to the best of my knowledge, accurate:

Owner signature	Owner printed name	Date
X	.	.
Joint Owner signature	Joint Owner printed name	Date
X	.	.
Producer signature	Producer printed name	Date
X	.	.

I do not want this notice read aloud to me. *Applicants must initial only if they do not want the notice read aloud.*

.....

Producer replacement sales certification *Must be completed and signed by the producer*

Complete this section if the answer to either question on page 1 is yes.

Please list all company-approved sales materials used, including any electronically presented materials, in the sale of this policy or contract including, but not limited to, sales material kit names, form numbers and brochure titles. If any individualized company-approved sales materials were used, such as illustrations or ledgers, identify them below and attach copies to this form. Please note that electronically presented sales materials must be given to the policy owner in printed form no later than the time of policy delivery.

-
-
-
-

I, the producer, certify that: (a) only company-approved sales materials listed above were used in this transaction and they are appropriate for the policy or contract applied for; (b) if used, any company-approved electronic sales materials will be printed and provided to the policy or contract owner prior to or at policy or contract delivery; (c) this sale conforms with the company's replacement policy (set forth below).

Producer must sign at right.

Producer signature	Date
X	.

Replacement policy

We believe that replacement of an existing insurance or annuity policy must be appropriate for the customer and meet his or her needs or financial objectives. From a customer's perspective, an appropriate replacement is also one that is justified from either an economic or personal standpoint. The provisions, features and benefits of both the current and proposed product should be considered in relation to the client's needs, circumstances and goals. Some examples of the types of provisions that should be considered are: premium rate differences, differences in suicide and incontestability provisions for individual life insurance and pre-existing conditions, waiting periods, elimination periods, and probationary periods for health insurance policies. In addition, factors such as the age and health of the customer must be considered. Distributors are expected to provide all material information that the customer needs in order to ascertain whether replacement of an existing policy or contract is appropriate.

All replacements must be in compliance with applicable regulations and company rules. Many states require accurate written comparisons of existing and proposed contracts to be provided to the customer when proposing a replacement. Distributors are expected to know and comply with these requirements.

Important notice

A replacement may not be in your best interest, or your decision could be a good one. You should make a careful comparison of the costs and benefits of your existing policy or contract and the proposed policy or contract. One way to do this is to ask the company or agent that sold you your existing policy or contract to provide you with information concerning your existing policy or contract. This may include an illustration of how your existing policy or contract is working now and how it would perform in the future based on certain assumptions. Illustrations should not, however, be used as a sole basis to compare policies or contracts.

You should discuss the following with your agent to determine whether replacement or financing your purchase makes sense:

Premiums

Are they affordable? Could they change? You're older—are premiums higher for the proposed new policy? How long will you have to pay premiums on the new policy? On the old policy?

Policy values

New policies usually take longer to build cash values and to pay dividends. Acquisition costs for the old policy may have been paid, you will incur costs for the new one. What surrender charges do the policies have? What expense and sales charges will you pay on the new policy? Does the new policy provide more insurance coverage?

Insurability

If your health has changed since you bought your old policy, the new one could cost you more, or you could be turned down. You may need a medical exam for a new policy. Claims on most new policies for up to the first two years can be denied based on inaccurate statements. Suicide limitations may begin anew on the new coverage.

If you are keeping the old policy as well as the new policy

How are premiums for both policies being paid? How will the premiums on your existing policy be affected? Will a loan be deducted from death benefits? What values from the old policy are being used to pay premiums?

If you are surrendering an annuity or interest sensitive life product

Will you pay surrender charges on your old contract? What are the interest rate guarantees for the new contract? Have you compared the contract charges or other policy expenses?

Other issues to consider for all transactions

What are the tax consequences of buying the new policy? Is this a tax free exchange? (See your tax advisor.) Is there a benefit from favorable "grandfathered" treatment of the old policy under the federal tax code? Will the existing insurer be willing to modify the old policy? How does the quality and financial stability of the new company compare with your existing company?

Mailing instructions

Mail this form with the application.

Annuity New Business:

6610 West Broad Street, Richmond, VA 23230

Fixed Life New Business for Genworth Life and Annuity Insurance Company:

P.O. Box 320, Lynchburg, VA 24505-0320

Fixed Life and Linked Benefit New Business for Genworth Life Insurance Company:

P.O. Box 461, Lynchburg, VA 24505-0461

For questions call:

Variable Annuities: 800 352.9910

Fixed Annuities: 800 221.3576

Single Premium Immediate Annuities: 888 322.4629

Fixed Life: 888 325.5433



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Genworth Life
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Important notice: replacement of life insurance or annuities

from Genworth Life and Annuity Insurance Company and Genworth Life Insurance Company

Page 1 of 3

Copy to Applicant

This document must be signed by you and the producer, if there is one, and a copy left with you.

Genworth Life Insurance Company Genworth Life and Annuity Insurance Company

Replacement information

The Genworth Financial insurance companies listed above are referred to as “we” in this document.

The owner is referred to as “you” and “your.”

Both questions to the right must be answered.

If either of the answers is “yes,” provide the information noted below and complete the producer replacement sales certification on page 2.

This document must be signed by you and the producer, if there is one, and a copy left with you.

You are contemplating the purchase of a life insurance policy or annuity contract. In some cases this purchase may involve discontinuing or changing an existing policy or contract. If so, a replacement is occurring. Financed purchases are also considered replacements.

A replacement occurs when a new policy or contract is purchased and, in connection with the sale, you discontinue making premium payments on the existing policy or contract, or an existing policy or contract is surrendered, forfeited, assigned to the replacing insurer, or otherwise terminated or used in a financed purchase.

A financed purchase occurs when the purchase of a new life insurance policy involves the use of funds obtained by the withdrawal or surrender of or by borrowing some or all of the policy values, including accumulated dividends, of an existing policy to pay all or part of any premium or payment due on the new policy. A financed purchase is a replacement.

You should carefully consider whether a replacement is in your best interest. You will pay acquisition costs and there may be surrender costs deducted from your policy or contract. You may be able to make changes to your existing policy or contract to meet your insurance needs at less cost. A financed purchase will reduce the value of your existing policy and may reduce the amount paid upon the death of the insured.

We want you to understand the effects of replacements before you make your purchase decision and ask that you answer the following questions and consider the questions on the last page of this form.

Are you considering discontinuing making premium payments, surrendering, forfeiting, assigning to the insurer, or otherwise terminating your existing policy or contract?

Yes No

Are you considering using funds from your existing policies or contracts to pay premiums due on the new policy or contract?

Yes No

The existing policy or contract is being replaced because:

.....

If you answered “Yes” to either of the above questions, list each existing policy or contract you are contemplating replacing (include the name of the insurer, the insured or annuitant, and the policy or contract number if available) and whether each policy or contract will be replaced or used as a source of financing:

Insurer name Contract/policy number

.....

Insured/annuitant name *Select one*

..... Replaced Financing

Insurer name Contract/policy number

.....

Insured/annuitant name *Select one*

..... Replaced Financing

Insurer name Contract/policy number

.....

Insured/annuitant name *Select one*

..... Replaced Financing

Make sure you know the facts. Contact your existing company or its agent for information about the old policy or contract. If you request one, an in-force illustration, policy summary or available disclosure documents must be sent to you by the existing insurer. Ask for and retain all sales material used by the agent in the sales presentation. Be sure that you are making an informed decision.



Free Look Period

Upon issuance of your new policy or contract, the policy may be returned within 30 days from the date of delivery. **This return period may be different from what is reflected in your policy or contract; if so, the longer period will be applicable.**

If you return the policy, you will be entitled to receive:

- In Utah: an unconditional full refund of all premiums or considerations paid on the policy or contract
- All other states: an unconditional full refund of all premiums or considerations paid on the policy or contract, including any policy fees or charges or, in the case of a variable or market value adjustment contract, a payment of the cash surrender value provided under the contract plus the fees and other charges deducted from gross premiums or considerations or imposed under the contract.

Signature

I certify that the responses herein are, to the best of my knowledge, accurate:

Owner signature	Owner printed name	Date
X	.	.
Joint Owner signature	Joint Owner printed name	Date
X	.	.
Producer signature	Producer printed name	Date
X	.	.

I do not want this notice read aloud to me. *Applicants must initial only if they do not want the notice read aloud.*

Producer replacement sales certification *Must be completed and signed by the producer*

Complete this section if the answer to either question on page 1 is yes.

Please list all company-approved sales materials used, including any electronically presented materials, in the sale of this policy or contract including, but not limited to, sales material kit names, form numbers and brochure titles. If any individualized company-approved sales materials were used, such as illustrations or ledgers, identify them below and attach copies to this form. Please note that electronically presented sales materials must be given to the policy owner in printed form no later than the time of policy delivery.

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.....

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Producer must sign at right.

Producer signature	Date
X	.

Replacement policy

We believe that replacement of an existing insurance or annuity policy must be appropriate for the customer and meet his or her needs or financial objectives. From a customer's perspective, an appropriate replacement is also one that is justified from either an economic or personal standpoint. The provisions, features and benefits of both the current and proposed product should be considered in relation to the client's needs, circumstances and goals. Some examples of the types of provisions that should be considered are: premium rate differences, differences in suicide and incontestability provisions for individual life insurance and pre-existing conditions, waiting periods, elimination periods, and probationary periods for health insurance policies. In addition, factors such as the age and health of the customer must be considered. Distributors are expected to provide all material information that the customer needs in order to ascertain whether replacement of an existing policy or contract is appropriate.

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Will you pay surrender charges on your old contract? What are the interest rate guarantees for the new contract? Have you compared the contract charges or other policy expenses?

Other issues to consider for all transactions

What are the tax consequences of buying the new policy? Is this a tax free exchange? (See your tax advisor.) Is there a benefit from favorable "grandfathered" treatment of the old policy under the federal tax code? Will the existing insurer be willing to modify the old policy? How does the quality and financial stability of the new company compare with your existing company?

Mailing instructions

Mail this form with the application.

Annuity New Business:

6610 West Broad Street, Richmond, VA 23230

Fixed Life New Business for Genworth Life and Annuity Insurance Company:

P.O. Box 320, Lynchburg, VA 24505-0320

Fixed Life and Linked Benefit New Business for Genworth Life Insurance Company:

P.O. Box 461, Lynchburg, VA 24505-0461

For questions call:

Variable Annuities: 800 352.9910

Fixed Annuities: 800 221.3576

Single Premium Immediate Annuities: 888 322.4629

Fixed Life: 888 325.5433



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Tel: 888 436.9678
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Life insurance and annuities replacement memorandum

from Genworth Life and Annuity Insurance Company
and Genworth Life Insurance Company

Page 1 of 1

Policy/Contract Information

Must complete this section for the existing and proposed Policy/Contract.

	Existing Policy/Contract	Proposed Policy/Contract
Owner/Annuitant
Insurer
Policy/Contract Number
Product Type
Product Name

Policy/Contract provisions

Must complete this section for the existing and proposed Policy/Contract.

Policy or Contract Provision	Existing Policy/Contract	Proposed Policy/Contract
Current Proposed Premium/Annual consideration		
Current Contract Value		
Current Surrender Value		
Death Benefit Amount		
Current Interest Rate & Guaranteed Period		
Guaranteed Minimum Accumulation/Interest Rate		
Surrender charge Period in years/charge Percentage per year/Years remaining		
Are free withdrawals available? If yes, what percentage? List options.		
Other significant contract or policy provisions		

If the existing or proposed Policy/Contract is an annuity, the below must also be completed, where applicable

Initial Bonus Percentage or Amount		
Potential Loss of Bonus if Annuity is exchanges, surrendered or funds withdrawn		
Sub-Account choices		
Guaranteed Purchase/Settlement Options		

Acknowledgement and signatures

I have received a copy of this completed form.

Owner/Annuitant Date

Joint Owner/Joint Annuitant Date

I certify that the above provisions, and any other significant provisions, of the existing policy or contract and the proposed policy or contract were discussed with the applicant(s).

Producer Date



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Product Name: Replacement Form
Project Name/Number: Replacement Form/GNW1800 1107

Supporting Document Schedules

	Item Status:	Status Date:
Bypassed - Item: Flesch Certification		
Bypass Reason: N/A to this filing.		
Comments:		

	Item Status:	Status Date:
Bypassed - Item: Application		
Bypass Reason: N/A to this filing.		
Comments:		