

State: Arkansas **Filing Company:** National Life Insurance Company
TOI/Sub-TOI: L08 Life - Other/L08.000 Life - Other
Product Name: Computer View Illustration Certification - Informational
Project Name/Number: Computer View Illustration Certification - Informational/20127(0812)

Filing at a Glance

Company: National Life Insurance Company
Product Name: Computer View Illustration Certification - Informational
State: Arkansas
TOI: L08 Life - Other
Sub-TOI: L08.000 Life - Other
Filing Type: Form
Date Submitted: 10/24/2012
SERFF Tr Num: NALF-128742484
SERFF Status: Closed-Accepted For Informational Purposes
State Tr Num:
State Status: Closed-Accepted for Informational Purposes
Co Tr Num: 20127(0812)
Implementation: On Approval
Date Requested:
Author(s): Susan Carey, Michelle Goodwin, Susan Sawyer, Jessica Zelich
Reviewer(s): Linda Bird (primary)
Disposition Date: 10/29/2012
Disposition Status: Accepted For Informational Purposes
Implementation Date:
State Filing Description:

State: Arkansas **Filing Company:** National Life Insurance Company
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General Information

Project Name: Computer View Illustration Certification - Informational Status of Filing in Domicile: Pending
 Project Number: 20127(0812) Date Approved in Domicile:
 Requested Filing Mode: Informational Domicile Status Comments:
 Explanation for Combination/Other: Market Type: Individual
 Submission Type: New Submission Individual Market Type:
 Overall Rate Impact: Filing Status Changed: 10/29/2012
 State Status Changed: 10/29/2012
 Deemer Date: Created By: Jessica Zelich
 Submitted By: Jessica Zelich Corresponding Filing Tracking Number:

Filing Description:

RE: Informational Filing – Computer View Illustration Certification

National Life Insurance Company
 NAIC No. 0634-66680
 FEIN No. 03-0144090

Our Compliance Unit requested that we file for informational purposes, a Computer View Illustration Certification form. Agents are now taking their laptops to their appointments with clients and may show a policy illustration on their laptop instead of giving the client the actual paper illustration at time of appointment. This Computer View Illustration Certification form is to be signed by the client and the agent stating that the computer screen illustration was viewed and that no paper copy of the illustration was given at that time. It further confirms that an illustration conforming to the policy will be provided to the client by the time of policy delivery.

A separate filing has been submitted to our subsidiary company Life Insurance Company of the Southwest.

We appreciate your consideration of this submission. If you have any questions, I may be reached by telephone (collect) at 802/229-7110, by E-mail at JZelich@NationalLife.com, or by Fax at 802/229-3743.

Company and Contact

Filing Contact Information

Jessica Zelich, Support Clerk jzelich@nationallifegroup.com
 National Life Insurance Company 802-229-7110 [Phone]
 Montpelier, VT 05604 802-229-3131 [FAX]

Filing Company Information

National Life Insurance Company CoCode: 66680 State of Domicile: Vermont
 One National Life Drive Group Code: 634 Company Type:
 Montpelier, VT 05604 Group Name: State ID Number:
 (802) 229-3333 ext. [Phone] FEIN Number: 03-0144090

Filing Fees

State: Arkansas **Filing Company:** National Life Insurance Company
TOI/Sub-TOI: L08 Life - Other/L08.000 Life - Other
Product Name: Computer View Illustration Certification - Informational
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Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? Yes
Fee Explanation: VT charges \$50 per filing.
Per Company: No

Company	Amount	Date Processed	Transaction #
National Life Insurance Company	\$50.00	10/24/2012	64231006

SERFF Tracking #:

NALF-128742484

State Tracking #:

Company Tracking #:

20127(0812)

State:

Arkansas

Filing Company:

National Life Insurance Company

TOI/Sub-TOI:

L08 Life - Other/L08.000 Life - Other

Product Name:

Computer View Illustration Certification - Informational

Project Name/Number:

Computer View Illustration Certification - Informational/20127(0812)

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Informational Purposes	Linda Bird	10/29/2012	10/29/2012

SERFF Tracking #:

NALF-128742484

State Tracking #:

Company Tracking #:

20127(0812)

State:

Arkansas

Filing Company:

National Life Insurance Company

TOI/Sub-TOI:

L08 Life - Other/L08.000 Life - Other

Product Name:

Computer View Illustration Certification - Informational

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Computer View Illustration Certification - Informational/20127(0812)

Disposition

Disposition Date: 10/29/2012

Implementation Date:

Status: Accepted For Informational Purposes

Comment:

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		No
Supporting Document	Application		No
Supporting Document	Computer View Illustration Certification		Yes
Supporting Document	Statement of Variability		Yes

SERFF Tracking #:

NALF-128742484

State Tracking #:

Company Tracking #:

20127(0812)

State:

Arkansas

Filing Company:

National Life Insurance Company

TOI/Sub-TOI:

L08 Life - Other/L08.000 Life - Other

Product Name:

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Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	Computer View Illustration Certification		
Comments:			
Attachment(s):			
20127.pdf			

		Item Status:	Status Date:
Satisfied - Item:	Statement of Variability		
Comments:			
Attachment(s):			
SOV.pdf			



National Life Insurance Company®
 Life Insurance Company of the Southwest™
Computer View Illustration Certification

Complete one form for each application

Name of primary Proposed Insured: *(print title, first, middle, last name and suffix, as applicable)*

Name of Owner if other than Proposed Insured:

I certify that I displayed a computer screen illustration for (name) _____

that complies with state requirements and for which no paper copy was furnished. The illustration was based on the following personal and contract information:

Plan of insurance: _____ Underwriting or rating class: _____

Gender	Age	Initial death benefit	Annual Premium	Dividend option/death benefit option
<input type="checkbox"/> M <input type="checkbox"/> F				

Signature of Licensed Agent _____ Date Signed: *(mm/dd/yyyy)* _____

Licensed Agent Name & Number *(Print)* _____

I acknowledge that I viewed a computer screen illustration based on the information as stated above. No paper copy of the illustration was furnished. I understand that an illustration conforming to the contract as issued will be provided to me no later than at the time the contract is delivered.

Signature of Primary Proposed Insured age 15 & up *(or Parent or Guardian)* _____ Date Signed: *(mm/dd/yyyy)* _____

Signature of Other Proposed Insured _____ Date Signed: *(mm/dd/yyyy)* _____

Signature of Applicant/Owner *(if other than First Proposed Insured)* _____ Date Signed: *(mm/dd/yyyy)* _____

**LIFE INSURANCE COMPANY OF THE SOUTHWEST
NATIONAL LIFE INSURANCE COMPANY**

STATEMENT OF VARIABILITY

**COMPUTER VIEW ILLUSTRATION CERTIFICATION
Form Number: 20127(0812)**

Variables for the company address, website address, and logo – these are subject to change.