

SERFF Tracking Number: PALD-128251460 State: Arkansas
Filing Company: Pacific Life Insurance Company State Tracking Number:
Company Tracking Number: CIU/TIU
TOI: L08 Life - Other Sub-TOI: L08.000 Life - Other
Product Name: CIU/TIU
Project Name/Number: /

Filing at a Glance

Company: Pacific Life Insurance Company

Product Name: CIU/TIU

TOI: L08 Life - Other

Sub-TOI: L08.000 Life - Other

Filing Type: Form

SERFF Tr Num: PALD-128251460 State: Arkansas

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

Co Tr Num: CIU/TIU

State Status: Approved-Closed

Reviewer(s): Linda Bird

Author: Greg Guzman

Disposition Date: 04/13/2012

Date Submitted: 04/10/2012

Disposition Status: Approved-
Closed

Implementation Date:

Implementation Date Requested: On Approval

State Filing Description:

General Information

Project Name:

Project Number:

Requested Filing Mode:

Explanation for Combination/Other:

Submission Type: New Submission

Filing Status Changed: 04/13/2012

State Status Changed: 04/13/2012

Created By: Greg Guzman

Corresponding Filing Tracking Number:

Filing Description:

April 10, 2012

Status of Filing in Domicile:

Date Approved in Domicile:

Domicile Status Comments:

Market Type:

Overall Rate Impact:

Deemer Date:

Submitted By: Greg Guzman

NAIC # 00067466

FEIN # 95-1079000

RE: R12CIU – Accelerated Death Benefit Rider for Chronic Illness

R12TIU – Accelerated Death Benefit Rider for Terminal Illness

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We are submitting the above referenced individual (non-group) life insurance forms in final print for your approval. The riders are new forms, which do not replace any previously approved forms.

The riders referenced above are accelerated death benefit riders that will provide an acceleration of death proceeds upon the diagnosis of chronic or terminal illness with the Insured.

Rider forms R12CIU and R12TIU will be made available for issue with each of the policies listed below:

- P10P1N – Flexible Premium Adjustable Life Insurance, approved 8/20/2010
- P10VN1 – Flexible Premium Adjustable Life Insurance, approved 10/9/2007
- P10VP2 – Flexible Premium Adjustable Life Insurance, approved 3/17/2010
- P10VPM – Flexible Premium Adjustable Life Insurance, approved 3/17/2010
- P10P1U – Flexible Premium Adjustable Life Insurance, approved 9/17/2010

R12CIU – Accelerated Death Benefit Rider for Chronic Illness

Rider form R12CIU is an accelerated death benefit rider for chronic illness, which provides prepayment to the Owner of a portion of the Death Benefit when written proof that the Insured has been certified as a Chronically Ill Individual and the conditions described in the Riders are met. The Chronic Illness Benefit represents a portion of the Death Benefit after applying a Reduction Factor as described in the Riders and is subject to the minimum and maximum amounts as described therein. The Riders may be added to in force policies at a future date.

For products where juvenile risk class is available for issue age 0-19, the chronic illness rider will be available at issue age 20. For products where the juvenile risk class is available for issue age 0-17, the chronic illness rider is available at age 18. If a product is not available for juveniles, the chronic illness rider is available at issue age 20. The maximum issue age for the chronic illness riders is 75.

R12TIU – Accelerated Death Benefit Rider for Terminal Illness

Rider form R12TIU is an accelerated death benefit rider for terminal illness, which provides prepayment to the Owner of a portion of the Death Benefit when written proof that the Insured has been certified as a Terminally Ill Individual and the conditions described in the Rider are met. The Terminal Illness Benefit represents a portion of the Death Benefit after applying a Reduction Factor as described in the Rider and is subject to the minimum and maximum amounts as described therein. The Rider may be added to in force policies at a future date.

The terminal illness benefit rider is available to the same issue ages as the base policies.

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The following pertain to this submission:

- Actuarial memoranda for each rider are included in this filing.
- Statements of Variability for each rider are included in this filing.
- The forms satisfy any relevant readability requirements, with Readability scores of:
 - o 50.6 for form R12CIU
 - o 50.6 for form R12TIU
- The forms will be marketed through our licensed agents. The target release is May 1, 2012 or upon approval.
- The forms will be used mainly with the following applications and consent forms previously approved by Arkansas:
 - o A10IUW2
 - o A09IUW2
 - o A10SUW
 - o A07ISI2
 - o A07IGI2
 - o A07MA2
 - o A07CUW2
 - o A07CGI2
 - o A07CSI2

To the best of my knowledge and belief, this filing complies with the laws and regulations of Arkansas. If you would like to discuss any aspect of this filing, please feel free to contact me at (800) 800-6416, extension 8483.

Sincerely,

Greg Guzman
Senior Compliance Analyst
Product Compliance, Life Division
greg.guzman@pacificlife.com
State Narrative:

SERFF Tracking Number: PALD-128251460 State: Arkansas
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Company and Contact

Filing Contact Information

Greg Guzman, Senior Compliance Analyst greg.guzman@pacificlife.com
 45 Enterprise 800-800-7681 [Phone] 8483 [Ext]
 Aliso Viejo, CA 92656

Filing Company Information

Pacific Life Insurance Company CoCode: 67466 State of Domicile: Nebraska
 45 Enterprise Drive Group Code: 709 Company Type:
 Aliso Viejo, CA 92656 Group Name: State ID Number:
 (949) 420-7080 ext. [Phone] FEIN Number: 95-1079000

Filing Fees

Fee Required? Yes
 Fee Amount: \$100.00
 Retaliatory? No
 Fee Explanation: \$50 per rider
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Pacific Life Insurance Company	\$100.00	04/10/2012	57853291

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	04/13/2012	04/13/2012

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Disposition

Disposition Date: 04/13/2012

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		Yes
Supporting Document	Statements of Variability		Yes
Supporting Document	Actuarial Memoranda		No
Form	Accelerated Death Benefit for Chronic Illness		Yes
Form	Accelerated Death Benefit for Terminal Illness		Yes

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Form Schedule

Lead Form Number: R12CIU

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	R12CIU	Certificate	Accelerated Death Amendmen t, Insert Page, Endorseme nt or Rider	Initial		50.600	R12CIU.pdf
	R12TIU	Certificate	Accelerated Death Amendmen t, Insert Page, Endorseme nt or Rider	Initial		50.600	R12TIU.pdf

ACCELERATED DEATH BENEFIT RIDER FOR CHRONIC ILLNESS

This rider ("Rider") becomes a part of the policy to which it is attached ("Policy") as of the Policy Date and covers only the person named as the Insured in the Policy Specifications. The Application and premium put this Rider In Force as of the Policy Date. A copy of the Application is attached. If the Rider is effective after the Policy Date, the effective date for this Rider will be shown on the Policy Specifications. If the provisions of this Rider and those of the Policy do not agree, the provisions of this Rider will apply. Please read it carefully.

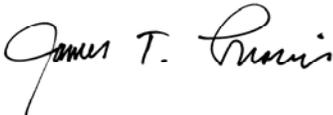
This Rider provides prepayment to the Owner of a portion of the Death Benefit when written proof that the Insured has been certified as a Chronically Ill Individual and the conditions described in this Rider are met. Each Chronic Illness Benefit represents a portion of the Death Benefit after applying a Chronic Illness Reduction Factor as described in this Rider and is subject to the minimum and maximum amounts as described herein.

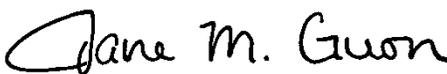
Disclosure – Accelerated death benefits for chronically ill individuals may affect eligibility for, or amounts of, other benefits provided by federal, state, or local government. Payments of accelerated death benefits provided by this Rider are intended to qualify as death benefits under section 101(g) of the Internal Revenue Code. The federal, state, or local tax consequences resulting from payment of accelerated death benefits will depend on your specific facts and circumstances. Consequently, advice and guidance should be obtained from a personal tax advisor prior to the receipt of any accelerated death benefit payments.

Payment of an Accelerated Death Benefit under this rider will reduce the death benefit, cost of insurance charges, and other values under the policy. Further, the premium limitations and death benefits required for the Policy to qualify as a life insurance policy or avoid being classified as a Modified Endowment Contract under the Code will also be affected.

[STATE] Department of Insurance: [(XXX) XXX-XXXX]

Signed for Pacific Life Insurance Company,


Chairman and Chief Executive Officer


Secretary

[www.PacificLife.com]

[(800) 347-7787]

DEFINITIONS

Activities of Daily Living – means the following self-care functions:

Bathing – Washing oneself by sponge bath, or in either a tub or shower, including the task of getting into or out of the tub or shower.

Continence – The ability to maintain control of bowel and bladder function, or, when unable to maintain control of bowel or bladder function, the ability to perform associated personal hygiene (including caring for catheter or colostomy bag.)

Dressing – Putting on and taking off all items of clothing and any necessary braces, fasteners or artificial limbs.

Eating – Feeding oneself by getting food into the body from a receptacle (such as a plate, cup, or table) or by a feeding tube or intravenously.

Toileting – Getting to and from the toilet, getting on and off the toilet, and performing associated personal hygiene.

Transferring – Moving into or out of a bed, chair or wheelchair.

Annual Per Diem Limitation – means the Per Diem Limitation as declared by the Internal Revenue Service on the date the Chronic Illness Benefit Proceeds are effective, multiplied by the Maximum Per Diem Limit Percentage, then multiplied by 365.

Chronic Illness – is the status of an Insured that has been certified to be a Chronically Ill Individual.

Chronically Ill Individual – means the Insured has been certified in writing by a Licensed Health Care Practitioner as:

- Being unable to perform (without Substantial Assistance from another individual) at least two Activities of Daily Living due to a loss of functional capacity and the condition is expected to be permanent; or
- Requiring Substantial Supervision to protect the individual from threats to health and safety due to Severe Cognitive Impairment and the condition is expected to be permanent.

A Chronically Ill Individual shall not include an Insured who otherwise meets these requirements unless within the preceding twelve-month period a Licensed Health Care Practitioner has certified that the Insured meets these requirements.

Coverage Layer – is a Basic Life Coverage Layer, a Basic Coverage Layer, or a layer of insurance coverage on the Insured under the policy and any optional rider.

Death Benefit – means the Death Benefit, as defined in the Policy.

Hands-On Assistance – means physical assistance (minimal, moderate or maximal) without which the individual would not be able to perform an Activity of Daily Living.

Insured – The person covered under the base Policy to which this Rider is attached. This term does not include other persons covered under other riders which are part of the Policy. If this Rider is attached to a last survivor insurance policy, then Insured is the surviving insured.

Initial Eligible Amount – The Initial Eligible Amount is the lesser of the Maximum Lifetime Accelerated Death Benefit or the Death Benefit, as described in the Policy, on the date the initial request for a Chronic Illness Benefit is effective.

Licensed Health Care Practitioner – means a physician, as defined in sub-section 1861(r)(1) of the Social Security Act, a registered professional nurse, licensed social worker or other individual who meets such requirements as may be prescribed by the Secretary of the Treasury of the United States. A

Licensed Health Care Practitioner must reside in the United States, and does not include yourself or anyone who is an immediate family member.

Maximum Lifetime Accelerated Death Benefit – This is the maximum amount of Death Benefit that you can accelerate under this Rider during the lifetime of the Insured. The Maximum Lifetime Accelerated Death Benefit is shown on the Policy Specifications.

Monthly Per Diem Limitation – means the Per Diem Limitation as declared by the Internal Revenue Service on the date the Chronic Illness Benefit Proceeds are effective, multiplied by the Maximum Per Diem Limit Percentage, then multiplied by 30.

Policy Debt – means the Policy Debt, as defined in the Policy.

Severe Cognitive Impairment – means a deficiency in an individual's short or long-term memory, orientation as to person, place and time, deductive or abstract reasoning, or judgment as it relates to safety awareness.

Standby Assistance – means the presence of another person, within arm's reach of the Insured, which is necessary to prevent, by physical intervention, the Insured's injury while the Insured is performing an Activity of Daily Living.

Substantial Assistance – means either Hands-on Assistance or Standby Assistance.

Substantial Supervision – means continual supervision (which may include cueing by verbal prompting, gestures, or other demonstrations) by another person that is necessary to protect the Insured from threats to the Insured's health or safety (including, but not limited to, such threats as may result from wandering.)

Total Face Amount – means the Total Face Amount, as defined in the Policy.

BENEFIT ELIGIBILITY

Eligibility – In order to receive this benefit, the following conditions must be satisfied:

1. This benefit is only available to the Owner of this Policy upon Written Request on a form provided by us while the policy is In Force. We shall provide such claim form within 15 days of your request for an accelerated death benefit payment. If the claim form is not furnished within 15 days, it is considered that you have complied with the claim form requirements if you provide written proof covering the occurrence, the character and the extent of the occurrence for which claim is made.
2. To qualify for this benefit, the Insured's certification must state that the Chronic Illness is expected to be permanent.
3. We must receive written consent of any assignee of record named under the Policy or any irrevocable or permanent beneficiary named under the Policy.
4. This benefit is not available if the law requires the benefit to meet the claims of creditors, whether in bankruptcy or otherwise; or a government agency requires the benefit in order to apply for, obtain, or keep a government benefit or entitlement.
5. This benefit is not available for a Chronically Ill Insured whose illness results from attempted suicide, or intentionally self-inflicted injury.
6. Chronic Illness Benefits are payable immediately upon receipt of due written proof that the Insured is a Chronically Ill Individual and meets the conditions of this Rider.

For each Chronic Illness Benefit requested we must receive written certification from a Licensed Health Care Practitioner that the Insured is Chronically Ill. We reserve the right to obtain at any time an additional opinion of the Insured's condition from a Licensed Health Care Practitioner at our expense. Should this opinion differ from that of the Insured's Licensed Health Care Practitioner, eligibility for

benefits will be determined by a third Licensed Health Care Practitioner who is mutually acceptable to the Owner and us.

ACCELERATED DEATH BENEFIT VALUES

Chronic Illness Benefit – If the insured qualifies as a Chronically Ill Individual and meets the Eligibility conditions of this Rider, you may submit a Written Request for a Chronic Illness Benefit on a form provided by us. Only one request may be made in a twelve month period. The request should include the following information:

- The amount of Chronic Illness Benefit requested; and
- Payment on an annual or monthly basis.

At the time of each benefit payment, we will do the following:

- Verify that the Policy is not in the Grace Period. If it is, the benefit payment will be reduced by the amount needed to pay any portion of the Monthly Deduction due;
- Limit the Chronic Illness Benefit to the Maximum Annual Benefit Amount or Maximum Monthly Benefit Amount, as applicable;
- Calculate the Chronic Illness Benefit Proceeds; and
- Reduce Policy and Rider values as described herein.

If your policy has an accidental death rider, the accidental death benefit amount is not eligible for acceleration under the terms of this Rider.

Chronic Illness Benefit Option – At the time of your Written Request, you may elect a Chronic Illness Benefit on an annual or monthly basis. If you provide no such election, we will pay the Chronic Illness Benefit as an annual payment.

Chronic Illness Benefit Proceeds – This is the amount payable upon request under this Rider. It is equal to the Chronic Illness Benefit reduced by an amount equal to the Policy Debt prior to the benefit payment multiplied by the Acceleration Percentage.

To Whom We Will Pay Benefits – All benefits will be payable to the Owner or the Owner's estate while the Insured is still living, unless otherwise assigned or designated by the Owner, subject to any required acknowledgment of concurrence for payout. We will be discharged to the extent of any such payment made in good faith.

Election of Annual Benefit Proceeds – If you elect an Annual Benefit, we will provide you with one lump-sum payment. The following will apply:

1. Your request for an annual Chronic Illness Benefit may not be less than \$5,000; and
2. The Chronic Illness Benefit will never be greater than the Maximum Annual Benefit Amount.

Maximum Annual Benefit Amount – The Maximum Annual Benefit Amount is the lesser of:

- The Annual Per Diem Limitation; or
- The Chronic Illness Reduction Factor multiplied by the Eligible Accelerated Annual Death Benefit.

Eligible Accelerated Annual Death Benefit – As of the benefit payment date, the Eligible Accelerated Annual Death Benefit is the lesser of the following values:

- 24% of the Initial Eligible Amount; or

- The excess of the Maximum Lifetime Accelerated Death Benefit over the Total Accelerated Death Benefit, or;
- The Death Benefit.

Election of Monthly Benefit Proceeds – If you elect a Monthly Benefit, we will pay the Chronic Illness Benefit up to the Maximum Monthly Benefit over a 12 month period. The following will apply:

1. Your request for monthly Chronic Illness Benefit may not be less than \$500;
2. Only one request may be made in a twelve month period;
3. The Chronic Illness Benefit will never be greater than the Maximum Monthly Benefit;
4. You may not change the amount of the requested benefit payment; and
5. You may choose to suspend payments for the remainder of the year.

Maximum Monthly Benefit Amount – The Maximum Monthly Benefit Amount as of each payment date is the lesser of:

- Monthly Per Diem Limitation; or
- The Chronic Illness Reduction Factor multiplied by the Eligible Accelerated Monthly Death Benefit.

Eligible Accelerated Monthly Death Benefit – As of each benefit payment date, the Eligible Accelerated Monthly Death Benefit is the lesser of the following values:

- 2% of the Initial Eligible Amount; or
- The excess of the Maximum Lifetime Accelerated Death Benefit over the Total Accelerated Death Benefit; or
- The Death Benefit.

Total Accelerated Death Benefit – This is the sum of all Death Benefit amounts that have been accelerated under this Rider. The Total Accelerated Death Benefit is equal to zero at the date of issue of this Rider.

At the time each Chronic Illness Benefit is paid, the Total Accelerated Death Benefit is increased by an amount equal to the Chronic Illness Benefit divided by the Chronic Illness Reduction Factor.

Death of the Insured – If the Insured dies and we receive written notice of the death at our Administrative Office before Chronic Illness Benefits are paid, no such payments will be made. However, any payment made by us prior to receiving written notice of the Insured's death at our Administrative Office is effective and will reduce the Death Benefit Proceeds payable under the Policy.

Death Benefit Proceeds are paid according to the terms of the Policy to which this Rider is attached. Any Chronic Illness Benefit Proceeds, plus any required interest, paid by us after the date of death will reduce the Death Benefit Proceeds.

Chronic Illness Reduction Factor – A Chronic Illness Reduction Factor will be calculated for each Chronic Illness Benefit and is equal to {the sum of (a) plus (b)} divided by (c), where:

- a) is equal to 100% of the Cash Surrender Value;
- b) is equal to the CIR Factor times the results of the Death Benefit less the greater of zero or the Accumulated Value; and
- c) is the Death Benefit.

Chronic Illness Risk Factor – The Chronic Illness Risk Factor (CIR Factor) will vary based on the Insured's attained Age, gender and Risk Class, as well as the Accelerated Death Benefit Interest Rate and a mortality table for disabled lives declared by us.

Accelerated Death Benefit Interest Rate – The Accelerated Death Benefit Interest Rate will not exceed the greater of:

- a) the current yield on the ninety-day Treasury bill; or
- b) the maximum fixed annual rate of 8% in arrears or a variable rate determined in accordance with state law.

EFFECT ON THE POLICY

Acceleration Percentage – Based on the payment made we will adjust the policy's values by the Acceleration Percentage.

The Acceleration Percentage is calculated as (a divided by b), where:

a = the Chronic Illness Benefit

b = the Chronic Illness Reduction Factor multiplied by the Death Benefit on the date of each benefit payment.

Effect on Policy Values – The following values are reduced by an amount equal to the value below multiplied by the Acceleration Percentage:

1. The Total Face Amount;
2. The Accumulated Value of your Policy;
3. The Surrender Charge for each Coverage Layer;
4. If your policy has a Death Benefit calculated as the Face Amount plus premiums less withdrawals (referred to as "Option C"), the sum of the premiums less withdrawals; and
5. If your policy has a Death Benefit calculated as the Face Amount plus premiums less withdrawals (referred to as "Option C"), the Option C Death Benefit Limit.

Reduction to Total Face Amount – The Total Face Amount under your policy is reduced on the date of each benefit payment by an amount equal to the Acceleration Percentage multiplied by the Total Face Amount prior to the benefit payment. For each Coverage Layer under the Policy or any term insurance on the Insured, the Face Amount of each layer will be reduced according to the terms of the Policy and Rider.

Reduction to Death Benefit – The Policy Death Benefit will continue to be calculated according to the terms of the Policy to which this Rider is attached.

Reduction to Accumulated Value and Fixed Accumulated Value – The Accumulated Value and the Fixed Accumulated Value under your policy will be reduced on the date of each benefit payment by an amount equal to the Acceleration Percentage multiplied by the Accumulated and Fixed Accumulated Values prior to the benefit payment.

Reduction to Cost of Insurance Charges – Cost of Insurance Charges will continue to be calculated according to the terms of the Policy to which this rider is attached, but will be based upon the reduced Policy values following the benefit payment.

Policy Loans – Policy Loan availability will continue according to the terms of the Policy to which this Rider is attached.

Reduction to Policy Loans – Policy Loans (also referred to as "Standard Policy Loans") are reduced by benefit payments under this Rider. Policy Debt, Loan Account, Loan Collateral, and the Loan Interest Charge are all reduced on the date of each benefit payment by an amount equal to their respective values prior to the benefit payment multiplied by the Acceleration Percentage.

Benefit Payments under this Rider are reduced by an amount equal to the Policy Debt prior to the benefit payment multiplied by the Acceleration Percentage.

Reduction to Cash Surrender Value and Net Cash Surrender Value – The Policy Cash Surrender Value and Net Cash Surrender Value after the benefit payment will be calculated according to terms of the contract. Within 30 days after a policy anniversary, the Cash Surrender Value will not be less than the anniversary value, adjusted, if necessary, for any withdrawal or benefit payment received since the anniversary.

Coordination with Other Payments – If there is another transaction requested on the same day as a Chronic Illness Benefit Proceeds is paid under the Policy, the Chronic Illness Benefit Proceeds will be processed after the other transactions.

Other Effects on the Policy – After the initial claim payment under this Rider:

1. Death Benefit Option Changes are allowed, but only into Death Benefit Option A;
2. Requested Increases in benefits under the Policy or any Riders are not permitted; and
3. Any Systematic Distribution Program in effect will be discontinued.

When a benefit payment is made, the Policy will be modified by an endorsement, which shall include a statement of the effect of the benefit payment on the Accumulated Value, Death Benefit, Premium, Cost of Insurance Charges and Policy Loans (including loans to pay premiums).

Chronic Illness Benefit Payment Notice – Prior to or concurrent with the election to effect the Chronic Illness Benefit, we will send the Owner a statement demonstrating the effect of the Chronic Illness Benefit on the Accumulated Value, Death Benefit, Premium, Cost of Insurance Charges, and Policy Loans (including loans to pay premiums).

EFFECT ON THE RIDERS

In General, optional rider benefits under this policy will continue to remain In Force subject to the terms and conditions of the policy and riders unless otherwise stated. Charges for optional riders will be calculated according to the terms of the rider form, and may be affected by the reduction in benefits and policy values.

Effect on Term Insurance on the Insured – If your policy has term insurance, Face Amounts for any term insurance rider on the Insured will be reduced as the Total Face Amount is reduced (see “Reduction to Total Face Amount” above). If the term insurance rider contains any provision for a termination credit, the termination credit basis is reduced on the date of each benefit payment by an amount equal to the value of the termination credit basis prior to the benefit payment multiplied by the Acceleration Percentage.

Effect on No Lapse Guarantee Riders using a No Lapse Guarantee Value – If your policy has a no lapse guarantee rider using a no lapse guarantee value, the No-Lapse Guarantee Value is reduced on the date of each benefit payment by an amount equal to the No-Lapse Guarantee Value prior to the benefit payment multiplied by the Acceleration Percentage. The amount of reduction will be processed against the No-Lapse Guarantee Value according to the terms of the No Lapse Guarantee Rider.

Effect on No Lapse Guarantee Riders using No Lapse Guarantee Premiums – If your policy has a no lapse guarantee rider using no lapse guarantee premiums, the No Lapse Premium is reduced on the date of each benefit payment by an amount equal to the No Lapse Premium prior to the benefit payment multiplied by the Acceleration Percentage. The No Lapse Credit is reduced on the date of each benefit payment by an amount equal to the No Lapse Credit prior to the benefit payment multiplied by the Acceleration Percentage.

Effect on Overloan Protection Rider – If your policy has an overloan protection rider, it will terminate at the time the first Chronic Illness Benefit Proceeds are paid.

GENERAL PROVISIONS

Incontestability – This Rider will follow the Incontestability provision of the Policy.

Reinstatement – If the Policy is reinstated, this Rider may be reinstated on the same terms.

Premium Requirement – There is no separate premium required for this benefit. However, this Rider does not eliminate the need to pay premiums to keep the Policy In Force. The Owner must continue to pay any premiums necessary to avoid policy lapse as described in the Policy or in any applicable riders attached to the Policy.

Effective Dates – This Rider is effective on the Policy Date unless otherwise stated. It will terminate on the earlier of:

1. Your Written Request;
2. The acceleration of any part of the Death Benefit of the Policy while the insured is still living for reason of terminal illness;
3. The date the Maximum Lifetime Accelerated Death Benefit has been accelerated under this Rider;
4. Exercise of an overloan protection rider;
5. The date the Rider or the Policy terminates; or
6. The date we receive notice of the death of the Insured.

Termination of this Rider shall not prejudice the payment of benefits for any claim that occurred while the Rider was In Force.

POLICY SPECIFICATIONS

SUMMARY OF COVERAGES EFFECTIVE ON THE POLICY DATE

R12CIU	ACCELERATED DEATH BENEFIT RIDER FOR CHRONIC ILLNESS	
	MAXIMUM LIFETIME ACCELERATED DEATH BENEFIT FOR CHRONIC ILLNESS:	[\$1,500,000.00]*
	*THE ACCELERATED DEATH BENEFIT WILL NOT EXCEED THE ACTUAL DEATH BENEFIT AT TIME OF RIDER EXERCISE.	
	MAXIMUM PER DIEM LIMIT PERCENTAGE:	[125%]
	[EFFECTIVE DATE]	[November 1, 2012]

ACCELERATED DEATH BENEFIT RIDER FOR TERMINAL ILLNESS

This rider ("Rider") becomes a part of the policy to which it is attached ("Policy") as of the Policy Date and covers only the person named as the Insured in the Policy Specifications. The Application and premium put this Rider In Force as of the Policy Date. A copy of the Application is attached. If the Rider is effective after the Policy Date, the effective date for this Rider will be shown on the Policy Specifications. If the provisions of this Rider and those of the Policy do not agree, the provisions of this Rider will apply. Please read it carefully.

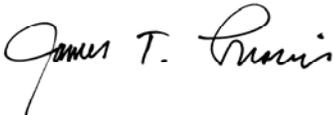
This Rider provides prepayment to the Owner of a portion of the Death Benefit when written proof that the Insured has been certified as a Terminally Ill Individual and the conditions described in this Rider are met. The Terminal Illness Benefit represents a portion of the Death Benefit after applying a Terminal Illness Reduction Factor as described in this Rider and is subject to the minimum and maximum amounts as described herein.

Disclosure – Accelerated death benefits for terminally ill individuals may affect eligibility for, or amounts of, other benefits provided by federal, state, or local government. Payment of an accelerated death benefit provided by this Rider are intended to qualify as death benefits under section 101(g) of the Internal Revenue Code. The federal, state, or local tax consequences resulting from payment of an accelerated death benefit will depend on your specific facts and circumstances. Consequently, advice and guidance should be obtained from a personal tax advisor prior to the receipt of any accelerated death benefit payments.

Payment of an Accelerated Death Benefit under this rider will reduce the death benefit, cost of insurance charges, and other values under the policy. Further, the premium limitations and death benefits required for the Policy to qualify as a life insurance policy or avoid being classified as a Modified Endowment Contract under the Code will also be affected.

[STATE] Department of Insurance: [(XXX) XXX-XXXX]

Signed for Pacific Life Insurance Company,


Chairman and Chief Executive Officer


Secretary

[www.PacificLife.com]

[(800) 347-7787]

DEFINITIONS

Terminally Ill Individual – means the Insured has been certified in writing by a Licensed Physician to have a medical condition that is reasonably expected to result in a life expectancy of 12 months or less from the date of Written Request.

Coverage Layer – is a Basic Life Coverage Layer, a Basic Coverage Layer, or a layer of insurance coverage on the Insured under the policy and any optional rider.

Death Benefit – means the Death Benefit, as defined in the Policy.

Eligible Coverage – is the portion of the policy Face Amount that will qualify for determining the Terminal Illness Benefit under this Rider. Eligible Coverage is listed in the Policy Specifications under the title of this rider.

Eligible Coverage does not include:

- Any insurance under the Policy on the life of someone other than the Insured; and
- Any other rider on the Insured other than explicitly listed under Eligible Coverage above.

Insured – The person covered under the base Policy to which this Rider is attached. This term does not include other persons covered under other riders which are part of the Policy. If this Rider is attached to a last survivor insurance policy, then Insured is the surviving insured.

Licensed Physician – means a physician licensed and residing in the United States. A Licensed Physician does not include yourself or anyone who is an immediate family member.

Policy Debt – means the Policy Debt, as defined in the Policy.

Total Face Amount – means the Total Face Amount, as defined in the Policy.

BENEFIT ELIGIBILITY

Eligibility – In order to receive this benefit, the following conditions must be satisfied:

1. This benefit is only available to the Owner of this Policy upon Written Request on a form provided by us while the policy is In Force. We shall provide such claim form within 15 days of your request for an accelerated death benefit payment. If the claim form is not furnished within 15 days, it is considered that you have complied with the claim form requirements if you provide written proof covering the occurrence, the character and the extent of the occurrence for which claim is made.
2. We must receive written consent of any assignee of record named under the Policy or any irrevocable or permanent beneficiary named under the Policy.
3. This benefit is not available if the law requires the benefit to meet the claims of creditors, whether in bankruptcy or otherwise; or a government agency requires the benefit in order to apply for, obtain, or keep a government benefit or entitlement.
4. Accelerated Death Benefit Rider for Chronic Illness will terminate once a Written Request for Terminal Illness Benefit has been received by us under this Rider.
5. This benefit is not available for a Terminally Ill Individual whose illness results from attempted suicide, or intentionally self-inflicted injury.
6. Terminal Illness Benefits are payable immediately upon receipt of due written certification from a Licensed Physician that the Insured is a Terminally Ill Individual and meets the conditions of this Rider. Certification must include clinical, radiological or laboratory evidence of the condition that supports the certification of the licensed physician. We reserve the right to obtain at any time an additional opinion of the Insured's condition from a Licensed Physician at our expense. Should this opinion differ from that of the Insured's Licensed Physician, eligibility for benefits will be determined by a third Licensed Physician who is mutually acceptable to the Owner and us.

7. Last survivor policies will be eligible for a Terminal Illness Benefit only after the death of the first insured and only if the survivor is a Terminally Ill Individual.

ACCELERATED DEATH BENEFIT VALUES

Terminal Illness Benefit – If the Insured qualifies as a Terminally Ill Individual and meets the Eligibility conditions of this Rider, you may submit a Written Request for a Terminal Illness Benefit on a form provided by us. The request should include the amount of Terminal Illness Benefit requested.

At the time of benefit payment, we will do the following:

- Limit the Terminal Illness Benefit to the lesser of 75% of the Eligible Coverage or \$250,000, as applicable;
- Calculate the Terminal Illness Benefit Proceeds; and
- Reduce Policy and Rider values as described herein.

If your policy has an accidental death rider, the accidental death benefit amount is not eligible for acceleration under the terms of this Rider.

Terminal Illness Benefit Proceeds – This is the amount payable upon request under this Rider. It is a one-time payment and is equal to the Terminal Illness Benefit multiplied by a) and reduced by b) and c) where:

- a) The Terminal Illness Reduction Factor,
- b) The Policy Debt multiplied by the Acceleration Percentage; and
- c) A processing charge, not to exceed \$100.

We will refund the amounts discussed in a) and c) above should the death of the Insured occur within 30 days of the Terminal Illness Benefit Proceeds.

The Terminal Illness Benefit will be paid as a lump sum. The minimum Terminal Illness Benefit is the lesser of \$500 or 25% of your policy face amount. We place no restrictions on how you use any Terminal Illness Benefit Proceeds that may be paid under this rider. **WE WILL PAY THE TERMINAL ILLNESS BENEFIT PROCEEDS ONLY ONCE PER POLICY.**

Terminal Illness Reduction Factor – A Terminal Illness Reduction Factor will be calculated for the Terminal Illness Benefit and is equal to (a) divided by (b) where:

- a) is equal to 1; and
- b) is equal to 1 plus the Accelerated Death Benefit Interest Rate.

To Whom We Will Pay Benefits – All benefits will be payable to the Owner or the Owner's estate while the Insured is still living, unless otherwise assigned or designated by the Owner, subject to any required acknowledgment of concurrence for payout. We will be discharged to the extent of any such payment made in good faith.

Death of the Insured – If the Insured dies and we receive written notice of the death at our Administrative Office before Terminal Illness Benefit is paid, no such payment will be made. However, any payment made by us prior to receiving written notice of the Insured's death at our Administrative Office is effective and will reduce the Death Benefit Proceeds payable under the Policy.

Death Benefit Proceeds are paid according to the terms of the Policy to which this Rider is attached. Any Chronic Illness Benefit Proceeds, plus any required interest, paid by us after the date of death will reduce the Death Benefit Proceeds.

Accelerated Death Benefit Interest Rate – The Accelerated Death Benefit Interest Rate will not exceed the greater of:

- a) the current yield on the ninety-day Treasury bill; or
- b) the maximum fixed annual rate of 8% in arrears or a variable rate determined in accordance with state law.

EFFECT ON THE POLICY

Acceleration Percentage – Based on the payment made we will adjust the policy's values by the Acceleration Percentage.

The Acceleration Percentage is calculated as (a divided by b), where:

- a = the Terminal Illness Benefit
- b = the Eligible Coverage on the date of the benefit payment.

Effect on Policy Values – The following values are reduced by an amount equal to the value below multiplied by the Acceleration Percentage:

1. The Total Face Amount;
2. The Accumulated Value of your Policy;
3. If your policy has a Death Benefit calculated as the Face Amount plus premiums less withdrawals (referred to as "Option C"), the sum of the premiums less withdrawals; and
4. If your policy has a Death Benefit calculated as the Face Amount plus premiums less withdrawals (referred to as "Option C"), the Option C Death Benefit Limit.

Upon payment of the Accelerated Benefit, the Policy will be modified by an endorsement, which shall include a statement of the effect of the benefit payment on the Accumulated Value, Death Benefit, Premium, Cost of Insurance Charges and Policy Loans (including loans to pay premiums).

Reduction to Total Face Amount – The Total Face Amount under your policy is reduced on the date of the benefit payment by an amount equal to the Acceleration Percentage multiplied by the Total Face Amount prior to the benefit payment. For each Coverage Layer under the Policy or any term insurance on the Insured, the Face Amount of each layer will be reduced according to the terms of the Policy and Rider.

Reduction to Death Benefit – The Policy Death Benefit will continue to be calculated according to the terms of the Policy to which this Rider is attached.

Reduction to Accumulated Value and Fixed Accumulated Value – The Accumulated Value and the Fixed Accumulated Value under your policy will be reduced on the date of each benefit payment by an amount equal to the Acceleration Percentage multiplied by the Accumulated and Fixed Accumulated Values prior to the benefit payment.

Reduction to Cost of Insurance Charges – Cost of Insurance Charges will continue to be calculated according to the terms of the Policy to which this rider is attached, but will be based upon the reduced Policy values following the benefit payment.

Policy Loans – Policy Loan availability will continue according to the terms of the Policy to which this Rider is attached.

Reduction to Policy Loans – Policy Loans (also referred to as "Standard Policy Loans") are reduced by benefit payments under this Rider. Policy Debt, Loan Account, Loan Collateral, and the Loan Interest Charge are all reduced on the date of the benefit payment by an amount equal to their respective values prior to the benefit payment multiplied by the Acceleration Percentage.

Reduction to Cash Surrender Value and Net Cash Surrender Value – The Policy Cash Surrender Value and Net Cash Surrender Value after the benefit payment will be calculated according to terms of the contract. Within 30 days after a policy anniversary, the Cash Surrender Value will not be less than the anniversary value, adjusted, if necessary, for any withdrawal or benefit payment received since the anniversary.

Coordination with Other Payments – If there is another transaction requested on the same day as a Terminal Illness Benefit Proceeds is paid under the Policy, the Terminal Illness Benefit Proceeds will be processed after the other transactions.

Terminal Illness Benefit Payment Notice – Prior to or concurrent with the election to effect the Terminal Illness Benefit, we will send the Owner a statement demonstrating the effect of the Terminal Illness Benefit on the Accumulated Value, Death Benefit, Premium, Cost of Insurance Charges, and Policy Loans (including loans to pay premiums).

EFFECT ON THE RIDERS

In General, optional rider benefits under this policy will continue to remain In Force subject to the terms and conditions of the policy and riders unless otherwise stated. Charges for optional riders will be calculated according to the terms of the rider form, and may be affected by the reduction in benefits and policy values.

Effect on Term Insurance on the Insured – If your policy has term insurance, Face Amounts for any term insurance rider on the Insured will be reduced as the Total Face Amount is reduced (see “Reduction to Total Face Amount” above). If the term insurance rider contains any provision for a termination credit, the termination credit basis is reduced on the date of the benefit payment by an amount equal to the value of the termination credit basis prior to the benefit payment multiplied by the Acceleration Percentage.

Effect on No Lapse Guarantee Riders using a No Lapse Guarantee Value – If your policy has a no lapse guarantee rider using a no lapse guarantee value, the No-Lapse Guarantee Value is reduced on the date of the benefit payment by an amount equal to the No-Lapse Guarantee Value prior to the benefit payment multiplied by the Acceleration Percentage. The amount of reduction will be processed against the No-Lapse Guarantee Value according to the terms of the No Lapse Guarantee Rider.

Effect on No Lapse Guarantee Riders using No Lapse Guarantee Premiums – If your policy has a no lapse guarantee rider using no lapse guarantee premiums, the No Lapse Premium is reduced on the date of the benefit payment by an amount equal to the No Lapse Premium prior to the benefit payment multiplied by the Acceleration Percentage. The No Lapse Credit is reduced on the date of the benefit payment by an amount equal to the No Lapse Credit prior to the benefit payment multiplied by the Acceleration Percentage.

Effect on Overloan Protection Rider – If your policy has an overloan protection rider, it will terminate at the time the Terminal Illness Benefit Proceeds are paid.

GENERAL PROVISIONS

Incontestability – This Rider will follow the Incontestability provision of the Policy.

Reinstatement – If the Policy is reinstated, this Rider may be reinstated on the same terms.

Premium Requirement – There is no separate premium required for this benefit. However, this Rider does not eliminate the need to pay premiums to keep the Policy In Force. The Owner must continue to

pay any premiums necessary to avoid policy lapse as described in the Policy or in any applicable riders attached to the Policy.

Effective Dates – This Rider is effective on the Policy Date unless otherwise stated. It will terminate on the earlier of:

1. Your Written Request;
2. The date the Terminal Illness Benefit Proceeds are paid;
3. Exercise of an overloan protection rider;
4. The date the Rider or the Policy terminates; or
5. The date we receive notice of the death of the Insured.

Termination of this Rider shall not prejudice the payment of benefits for any claim that occurred while the Rider was In Force.

POLICY SPECIFICATIONS

SUMMARY OF COVERAGES EFFECTIVE ON THE POLICY DATE

R12TIU	ACCELERATED DEATH BENEFIT RIDER FOR TERMINAL ILLNESS
ELIGIBLE COVERAGE:	[BASE POLICY] [SURRENDER VALUE ENHANCEMENT RIDER] [ANNUAL RENEWABLE TERM RIDER] [OTHER]
[EFFECTIVE DATE]	[November 1, 2012]

SERFF Tracking Number: PALD-128251460

State: Arkansas

Filing Company: Pacific Life Insurance Company

State Tracking Number:

Company Tracking Number: CIU/TIU

TOI: L08 Life - Other

Sub-TOI: L08.000 Life - Other

Product Name: CIU/TIU

Project Name/Number: /

Supporting Document Schedules

Item Status:

Status

Date:

Satisfied - Item: Flesch Certification

Comments:

Please see the readability scores for each form included in the Form Schedule tab in the attached Readability Certification document.

Attachments:

AR1 Guar Assoc Notice.pdf

AR Certification of Compliance UL.pdf

READABILITY CERTIFICATION - UL Generic.pdf

Item Status:

Status

Date:

Satisfied - Item: Application

Comments:

A10IUW2 - approved 3/17/2010

A09IUW2 - approved 9/16/2009

A10SUW - approved 4/15//2010

A07ISI2 - approved 9/16/2009

A07IGI2 - approved 9/16/2009

A07MA2 - approved 9/16/2009

A07CUW2 - approved 9/16/2009

A07CGI2 - approved 9/16/2009

A07CSI2 - approved 9/16/2009

Item Status:

Status

Date:

Satisfied - Item: Statements of Variability

Comments:

Please see the attached statements of variability for each of the forms included in the Form Schedule.

Attachments:

Statement of Variability R12CIU.pdf

Statement of Variability R12TIU.pdf

SERFF Tracking Number: PALD-128251460 State: Arkansas
Filing Company: Pacific Life Insurance Company State Tracking Number:
Company Tracking Number: CIU/TIU
TOI: L08 Life - Other Sub-TOI: L08.000 Life - Other
Product Name: CIU/TIU
Project Name/Number: /

Item Status:

**Status
Date:**

Satisfied - Item: Actuarial Memoranda

Comments:

Please see each of the actuarial memoranda attached for their corresponding form numbers.

Attachments:

Actuarial Memorandum Non-Compact R12CIU.pdf

Actuarial Memorandum Non-Compact R12TIU.pdf

LIMITATIONS AND EXCLUSIONS UNDER THE ARKANSAS LIFE AND DISABILITY INSURANCE GUARANTY ASSOCIATION ACT

Residents of this state who purchase life insurance, annuities or disability insurance should know that the insurance companies licensed in this state to write these types of insurance are members of the Arkansas Life and Disability Insurance Guaranty Association ("Guaranty Association"). The purpose of the Guaranty Association is to assure that policy and contract owners will be protected, within certain limits, in the unlikely event that a member insurer becomes financially unable to meet its obligations. If this should happen, the Guaranty Association will assess its other member insurance companies for the money to pay the claims of policy owners who live in this state and, in some cases, to keep coverage in force. The valuable extra protection provided by the member insurers through the Guaranty Association is not unlimited, however. And, as noted in the box below, this protection is not a substitute for consumers' care in selecting insurance companies that are well managed and financially stable.

DISCLAIMER

The Arkansas Life and Disability Insurance Guaranty Association ("Guaranty Association") may not provide coverage for this policy. If coverage is provided, it may be subject to substantial limitations or exclusions and require continued residency in this state. You should not rely on coverage by the Guaranty Association in purchasing an insurance policy or contract.

Coverage is NOT provided for your policy or contract or any portion of it that is not guaranteed by the insurer or for which you have assumed the risk, such as non-guaranteed amounts held in a separate account under a variable life or variable annuity contract.

Insurance companies or their agents are required by law to provide you with this notice. However, insurance companies and their agents are prohibited by law from using the existence of the Guaranty Association to induce you to purchase any kind of insurance policy.

The Arkansas Life and Disability Insurance Guaranty Association
c/o The Liquidation Division
1200 West Third Street (Third & Cross)
Little Rock, Arkansas 72201-1904

Arkansas Insurance Department
1200 West Third Street
Little Rock, Arkansas 72201-1904

The state law that provides for this safety net is called the Arkansas Life and Disability Insurance Guaranty Association Act ("Act"). Below is a brief summary of the Act's coverages, exclusions and limits. This summary does not cover all provisions of the Act; nor does it in any way change anyone's rights or obligations under the Act or the rights or obligations of the Guaranty Association.

COVERAGE

Generally, individuals will be protected by the Guaranty Association if they live in this state and hold a life, annuity or disability insurance contract or policy, or if they are insured under a group insurance contract issued by a member insurer. The beneficiaries, payees or assignees of policy or contract owners are protected as well, even if they live in another state.

EXCLUSIONS FROM COVERAGE

However, persons owning such policies are NOT protected by the Guaranty Association if:

- They are eligible for protection under the laws of another state (this may occur when the insolvent insurer was incorporated in another state whose guaranty association protects insureds who live outside that state);
- The insurer was not authorized to do business in this state;
- Their policy or contract was issued by a nonprofit hospital or medical service organization, an HMO, a fraternal benefit society, a mandatory state pooling plan, a mutual assessment company or similar plan in which the policy or contract owner is subject to future assessments, or by an insurance exchange.

The Guaranty Association also does NOT provide coverage for:

- Any policy or contract or portion thereof which is not guaranteed by the insurer or for which the owner has assumed the risk, such as non-guaranteed amounts held in a separate account under a variable life or variable annuity contract;
- Any policy of reinsurance (unless an assumption certificate was issued);
- Interest rate yields that exceed an average rate;
- Dividends and voting rights and experience rating credits;
- Credits given in connection with the administration of a policy by a group contract holder;
- Employers' plans to the extent they are self-funded (that is, not insured by an insurance company, even if an insurance company administers them);
- Unallocated annuity contracts (which give rights to group contractholders, not individuals);
- Unallocated annuity contracts issued to/in connection with benefit plans protected under Federal Pension Benefit Corporation ("FPBC")(whether the FPBC is yet liable or not);
- Portions of an unallocated annuity contract not owned by a benefit plan or a government lottery (unless the owner is a resident) or issued to a collective investment trust or similar pooled fund offered by a bank or other financial institution);
- Portions of a policy or contract to the extent assessments required by law for the Guaranty Association are preempted by State or Federal law;
- Obligations that do not arise under the policy or contract, including claims based on marketing materials or side letters, riders, or other documents which do not meet filing requirements, or claims for policy misrepresentations, or extra-contractual or penalty claims;
- Contractual agreements establishing the member insurer's obligations to provide book value accounting guarantees for defined contribution benefit plan participants (by reference to a portfolio of assets owned by a nonaffiliate benefit plan or its trustees).

LIMITS ON AMOUNT OF COVERAGE

The Act also limits the amount the Guaranty Association is obligated to cover: The Guaranty Association cannot pay more than what the insurance company would owe under a policy or contract. Also, for any one insured life, the Guaranty Association will pay a maximum of \$300,000 - no matter how many policies and contracts there were with the same company, even if they provided different types of coverages. Within this overall \$300,000 limit, the Association will not pay more than \$100,000 in health insurance benefits, \$100,000 in present value of annuity benefits, or \$100,000 in life insurance death benefits or net cash surrender values - again, no matter how many policies and contracts there were with the same company, and no matter how many different types of coverages. There is a \$1,000,000 limit with respect to any contract holder for unallocated annuity benefits, irrespective of the number of contracts held by the contract holder. These are limitations for which the Guaranty Association is obligated before taking into account either its subrogation and assignment rights or the extent to which those benefits could be provided out of the assets of the impaired or insolvent insurer.

PACIFIC LIFE INSURANCE COMPANY
45 Enterprise Drive • Aliso Viejo • CA, 92656

STATE OF ARKANSAS

CERTIFICATION OF COMPLIANCE

RE: R12CIU, R12TIU

I hereby certify that to the best of my knowledge and belief, the above forms and their submission comply with Regulation 19, as well as the other laws and regulations of the State of Arkansas.

Signed for the Company at Newport Beach, California on **March 27, 2012**



SIGNATURE

THOMAS S. BEADLESTON

NAME

VICE PRESIDENT

TITLE

Contact Person:

Greg Guzman

Compliance Analyst, Product Compliance, 800-800-7681, extension 8483

(Arkansas)

READABILITY CERTIFICATION

Form Filing for: **Pacific Life Insurance Company**

Policy Form Numbers & Flesch Scores:	R12CIU	50.6
	R12TIU	50.6

(Flesch test was made for entire form, not for selected samples.)

Test type: 10 point

I certify that in my judgment this filing is:

- **READABLE** (simple sentence structure – shortness of sentences – use of common words – avoidance of legal and technical terms to greatest possible extent and defining of those terms which cannot be avoided – minimum of cross-references).
- **LEGIBLE** (ample type size for text with contrasting type for headings and subheadings – ample space between lines – ample white space in margins and between section – ample ink-to-paper contrast).
- **IN LOGICAL ORDER AND FORMAT** (table of contents or index included – sections and subsections self-contained and arranged in logical flow – extensive use of headings and subheadings to facilitate location of particular items – outline form used where desirable for clarity).

I believe this filing:

- Meets or exceeds the requirements of the policy readability legislation already enacted in numerous states; and
- Meets or exceeds the requirements of the NAIC Model Bill on language simplification.

Signed for the Company at Aliso Viejo, California on

03/27/2012



SIGNATURE

THOMAS S. BEADLESTON
NAME

VICE PRESIDENT
TITLE

Statement of Variability
Policy Form R12CIU

Location	Factor	Sample Value	Range	Conditions
Page 1	Officers	James T. Morris Jane M. Guon	Signatures of Officers	Reflects the current holders of the titles indicated below the signatures
Page 1	State Department of Insurance Phone Number	STATE (XXX) XXX-XXXX	One of 50 states and D.C. Dept. of Ins. Phone number of one of 50 states and D.C.	Administrative system assigns based on state where policy is issued
Page 1	Company contact information	www.pacificlife.com , (800) 347-7787	Company web site, telephone number	Reflects current web site and phone number of company
Page 3.1	Maximum Lifetime Accelerated Death Benefit for Chronic Illness	\$1,500,000.00	The maximum value for the Chronic Illness benefits will vary depending on policy owner choice of annual or monthly benefits. The maximum lifetime accelerated death benefit will not exceed \$1,500,000.00.	Policy owner choice
Page 3.1	Maximum Per Diem Limit Percentage	125%	The maximum per diem limit percentage is 125%. The policy owner may elect an amount that is less than 125%.	Policy owner choice
Page 3.1	Effective Date	Effective Date	The words effective date will display if the rider is added after policy issue. Nothing will display if the rider is issued with the policy.	Policy owner choice
Page 3.1	Date	November 1, 2012	This is the effective date of the rider if it is added after policy issue.	Administrative system assigns

Statement of Variability
Policy Form R12TIU

Location	Factor	Sample Value	Range	Conditions
Page 1	Officers	James T. Morris Jane M. Guon	Signatures of officers	Reflects the current holders of the titles indicated below the signatures
Page 1	State Department of Insurance Phone Number	STATE (XXX) XXX-XXXX	One of 50 states and D.C. Dept. of Ins. Phone number of one of 50 states and D.C.	Administrative system assigns based on state where policy is issued
Page 1	Company contact information	www.pacificlife.com , (800) 347-7787	Company web site, telephone number	Reflects current web site and phone number of company
Page 3.1	Eligible Coverage	Surrender Value Enhancement Rider, Annual Renewable Term Rider, Other	SVER Term Insurance Rider – Individual, Annual Renewable Term Rider, any other similar eligible rider we may offer in the future	Administrative system assigns
Page 3.1	Effective Date	Effective Date	The words effective date will display if the rider is added after policy issue. Nothing will display if the rider is issued with the policy.	Policy owner choice
Page 3.1	Date	November 1, 2012	This is the effective date of the rider if it is added after policy issue.	Administrative system assigns