

---

## AGENT INFORMATION SHEET

---

December 04, 2007

AG000-E003

Policy: 00A23456Z

Policy Effective Date: December 04, 2007

**AGENT NAME**  
**AGENT NUMBER**

**Please deliver the enclosed contract to SIMON DOE**

---

This policy is only effective if there has been no adverse change in the health of the Life Insureds between the date of the Application and the date the Policy is delivered. Acceptance of the Policy by the Owner represents that, since the date of the original Application, the Life Insureds have not had a change in their health condition; have not made an application for insurance with any other company which has been declined, postponed or modified; and have not consulted a physician or other health care practitioner for any illness, injury or impairment.

If you become aware of such circumstance, please advise Us immediately and return this Policy to Head Office.

We calculate the initial modal premium to be:	\$ 212.03
Amount Received/Total Credits:	\$ 0.00
Total Credit/Balance Payable:	\$ 212.03

The Policy will not be issued on the Life System until the outstanding premium is received.

The balance payable to complete the initial premium MUST be collected by you upon delivery.

If the balance is not collected within 21 days from the date of this memo, the Policy MUST be returned as NOT TAKEN.

Processing to set up commissions, billings, etc., CANNOT be completed until the balance is received.

The initial premium amount pays for the month the Policy is Effective. If premiums are in arrears, we will collect the arrears, as well as the present months premium on the PAC date selected by the client. This is very important information that yourself and your client should be aware of.

A risk class of NS1 has been assigned to Simon Doe based on the following reason: Non-Smoker.



FP001-E003

**POLICY NUMBER:** 00A23456Z  
**POLICY OWNER(S):** Simon Doe

SAMPLE



FP000-E003

**POLICY NUMBER:** 00A23456Z  
**POLICY OWNER(S):** Simon Doe  
**TOTAL INITIAL  
SEMI ANNUAL PREMIUM:** \$212.03

**LIFE INSURED(S):**  
Simon Doe

---

We, Co-operators Life Insurance Company, agree to pay the Benefits provided by this Policy, subject to the terms and conditions stated in this Policy.

The Policy is only effective if there has been no adverse change in the health of the Life Insured(s) between the date of the Application and the date the Policy is delivered. Acceptance of the Policy by the Owner represents that, since the date of the original Application, the Life Insured(s) have not had a change in their health condition; have not made an application for insurance with any other company which has been declined, postponed or modified; and have not consulted a physician or other health care practitioner for any illness, injury or impairment.

Signed for Co-operators Life Insurance Company, Regina, Saskatchewan, Canada on the Policy Date.

Kevin Daniel  
Chief Operating Officer

---

## POLICY INFORMATION

---

**POLICY NUMBER:** 00A23456Z      **LIFE INSURED(S):** Simon Doe      PI001-E004

**POLICY DATE:** December 04, 2007

**INSURANCE AGE:** 31

**RISK CLASS:** Non-Smoker

**GENDER:** Male

**OWNER(S):** Simon Doe

**INITIAL POLICY PREMIUM:** \$212.03

**PREMIUM FREQUENCY:** Semi Annual

### INSURANCE, BENEFITS AND COVERAGES INCLUDED AS PART OF THIS POLICY:

INITIAL PREMIUM	DESCRIPTION	FACE AMOUNT	EFFECTIVE DATE	CONVERSION DATE	EXPIRY DATE
\$212.03	Versatile Level to Age 75 Term Plan (Convertible)	\$275,000.00	December 04, 2007	December 04, 2041	December 04, 2051
\$212.03	Total Coverage Premium on the Life Insured(s) stated above.				

Premiums for each Insurance, Benefit or Rider Coverage are payable semi-annually until expiry date of the coverage.

---

**BENEFICIARY INFORMATION**

---

BE000-E001

**Insured: Simon Doe**  
**Beneficiary**  
**Name**  
Estate Of Simon Doe

**Beneficiary**  
**Type**  
Primary

**Relationship to**  
**Life Insured**  
Other

**Percentage**  
100.000%

**Type**  
Revocable

SAMPLE

---

## GENERAL PROVISIONS

---

VTSGP-E001

### DEFINITIONS

"Policy Date" is the date used to determine premium due dates, policy anniversaries and policy years.

"We", "Our" and "Us" refers to The Co-operators Life Insurance Company.

"Benefit Date" is the date used to determine benefit anniversaries and premium due dates for benefits.

### THE CONTRACT

The Contract consists of:

- a) the Policy;
- b) the Application, which consists of the following:
  - i) the Pre-Application Section;
  - ii) the Tele-underwriting Section (if applicable);
  - iii) the Paramedical Plus Section (if applicable); and
  - iv) any other information provided during any medical or paramedical examination, any supplements and information provided by way of an amendment;
- c) all documents attached at issue;
- d) any application for change to or reinstatement of this Policy; and
- e) any amendments agreed upon in writing after this Policy has been issued.

### NO WAIVER/AMENDMENT

This Policy may not be amended nor any provision waived except by written agreement signed by an authorized signing officer of the Company.

### POLICY EFFECTIVE DATE

This Policy is effective on the Policy Date indicated on the Policy Information/Policy Amendment Page(s), unless any portion of the Policy has been underwritten by tele-underwriting. If any portion of the Policy has been underwritten by tele-underwriting, the Policy is effective on the Policy Date indicated on the Policy Information/Policy Amendment Page(s), unless a Life Insured has contacted the Company in accordance with the Tele-Underwriting Pre-Application. If any Life Insured reports incorrect or inaccurate answers in the Tele-Underwriting Section to the Company, the Policy is suspended until the Company has had an opportunity to review any amended answers and obtain such further examinations or medicals as it deems necessary as a result of those amended answers and will only be reinstated if the amended answers provide no change in the underwriting risk.

### OWNER

While the Life Insured is living, all benefits, rights and privileges under the Contract belong to the current Owner(s). Unless specifically provided otherwise, if there is more than one Owner, all Owners must agree to any amendments or changes to the Policy, including Beneficiary changes.

### BENEFICIARY

The Owner(s) may appoint a Beneficiary, and may change the Beneficiary unless the previous appointment was irrevocable under law. Unless specifically provided otherwise, if there is more than one Owner, all Owners must consent to the same Beneficiary designation (although there may be multiple beneficiaries within a single Beneficiary designation) and all Owners must consent to any change of Beneficiary designation. If there is no Beneficiary living when the Life Insured dies, the Owner(s) or the estate(s) of the Owner(s) is the Beneficiary.

**NON-PARTICIPATING**

This Policy does not participate in the surplus distribution of the Company.

**PAYMENT OF PREMIUMS**

Premiums are due in full on the dates and in the amounts indicated on the applicable Policy Information/Policy Amendment Page(s). If any cheque, payment or other instrument given for payment is not honoured, the premium remains unpaid.

**CURRENCY AND PLACE OF PAYMENT**

All amounts payable to or by Us will be payable in Canadian dollars at any of Our offices.

**DAYS OF GRACE**

Thirty-one days of grace are allowed for payment of each premium except the first. During this time, the Policy will stay in force. If the Life Insured dies during this time, any premium due but unpaid will be deducted from the amount payable.

**LAPSE**

This Contract will lapse and Our liability will cease at the end of the days of grace of an unpaid premium.

**ASSIGNMENT**

We will not recognize an assignment until We receive written notice of it at Our Head Office. We are not responsible for the validity of any assignment.

**MISSTATEMENT OF AGE**

If the date of birth of the Life Insured or any other person insured under this Policy has been misstated, the insurance money provided by the Contract shall be increased or decreased to the amount that would have been provided for the same premium at the correct insurance age or ages.

**VALIDITY**

We may contest the coverage on any Life Insured if any statement or answer on any application misrepresents or fails to disclose any fact material to the insurance. We shall not contest any coverage for these reasons after it has been in force during the lifetime of the Life Insured for that coverage for two years from the date it takes effect on issue, on reissue for an increased amount or on reinstatement.

In cases involving fraud, We may contest the Contract at any time.

In the event this coverage insures multiple lives, any misrepresentation by any party to the application, whether or not known to the remaining parties, may render the entire Policy voidable.

**REINSTATEMENT**

This Contract may be reinstated within three years of lapse. Reinstatement requires all of the following:

- a) a written application;
- b) evidence that satisfies Us that the Life Insured(s) insured under this Policy are acceptable risks; and
- c) payment of all overdue premiums from the date of lapse, together with interest at the yearly rate determined by Us.

This Contract shall not be deemed to be reinstated until Our official notification of reinstatement has been issued.

**SUICIDE/SELF-DESTRUCTION**

If the Life Insured dies from suicide, attempted suicide or self-inflicted injuries while the Life Insured is sane or insane:

- a) within two years of the Effective Date of the Policy, or in the case of a Rider within two years of the effective date of the Rider, the amount payable is limited to the premiums paid;
- b) within two years of the effective date of any Additional Benefits\* under this Policy, or in the case of a Rider within two years of the effective date of the Additional Benefits under the Rider, the amount payable in respect of the additional Benefits is limited to the premiums paid for the additional Benefits;  
\*Additional Benefits includes, but is not limited to, an increase in the sum insured.
- c) within two years of the date of the Application for any reinstatement of this Policy and/or any Rider, the amount payable is limited to the premiums paid since the date of the last reinstatement for the Policy and/or Rider as the case may be.

SAMPLE



---

## BENEFIT PROVISIONS

---

VTSBP-E001

### INSURING CLAUSE

We agree that the amount payable under the terms of this Policy will be paid on the death of the Life Insured. Death must occur while this Policy is in force.

### DEATH BENEFIT

Subject to the terms of this Contract, the amount payable on the death of any Life Insured will be the amount of insurance in force at that time (including the amounts payable under any additional Benefits or Riders), less any indebtedness.

### PAYMENT ON DEATH

The amount payable on the death of a Life Insured will be paid when sufficient evidence is received as to the death of the Life Insured, the age of the Life Insured, the right of the claimant to be paid and the identity and age of the Beneficiary (if any).

### CONVERSION

While this Policy is in force, the Owner(s) may convert it to a new Policy on the Life Insured at any time prior to the Conversion Date indicated on the Policy Information Page/Policy Amendment Page(s) without submitting evidence of insurability. The new Policy will conform with the following:

**Type:** Any permanent plan of insurance We are then offering. Additional Benefits or Riders will be included in the new Policy only with Our approval.

**Face Amount:** Same as face amount of this Policy (or a lesser amount if agreed to by Us).

**Class of Risk:** The Class of Risk for the new Policy will be determined by the Company's rules at the time of conversion.

**Premium:** The premiums will be determined from Our rates in effect, at the date of conversion, based on the following:

- a) the Class of Risk applicable to the Life Insured and the new Policy; and
- b) the then attained age (nearest birthday) of the Life Insured; and
- c) any substandard rating which may have applied to the original Policy (which will continue to apply).

If this Policy contains the Disability Premium Waiver Benefit, and if on the Conversion Date the Life Insured is totally disabled in accordance with the terms of that provision, the Policy will automatically be converted to a Permanent Life plan as described above which will contain the Disability Premium Waiver Benefit.

### SETTLEMENT OPTIONS

The amount payable on the death of the Life Insured may be paid in cash, left on deposit at interest, used to provide an annuity or settled on any other agreed basis.

The choice of settlement may be made by the Owner(s). If the Owner(s) does not make a choice, the Beneficiary shall make the choice of settlement. The Beneficiary may change a settlement chosen by the Owner(s) (unless the Owner(s) has specified otherwise) with Our consent.

Details of settlement options and the conditions under which they are available will be provided on request.

---

## NOTICE TO OWNER(S)

---

21000-E001

### **21 DAY RIGHT TO EXAMINE POLICY**

Please read Your Policy. If it does not meet with Your satisfaction, it may be returned to Co-operators Life Insurance Company for cancellation within 21 days after You receive it. The premium paid will then be refunded in full. The Owner's right of cancellation prevails over any rights of the Beneficiary under this right of cancellation.

Note: This offer does not apply to policies reissued or modified at Your request.

### **REPLACEMENTS OR DISCONTINUATIONS**

This Policy provides valuable protection. It also contains many benefits You might not be aware of - benefits that have accrued over time.

Therefore, check with Us before You sign anything to replace or discontinue Your Co-operators Life Insurance Company Policy. What might seem like a better deal at first glance may not prove to be so if You're not comparing similar products (e.g., those with the same benefits, for the same term).

### **PRIVACY STATEMENT**

We are committed to protecting the privacy, confidentiality, accuracy and security of the personal information that We collect, use, retain and disclose in the course of conducting business.

---

## APPLICATION AMENDMENT

---

AMD00-E002

**POLICY NUMBER:** 00A23456Z

**POLICY EFFECTIVE DATE:** December 04, 2007

**POLICY OWNER:** Simon Doe

On October 30, 2007 you completed an application for life insurance with Co-operators Life Insurance Company.

We have amended your application as follows:

- A risk class of NS1 has been assigned to SIMON DOE for Versatile Level to Age 75 Term Plan (Convertible).

The information contained in this Amendment forms part of your Contract with Co-operators Life. We have relied on the information you have provided on the Application to issue the Policy which is attached to this Amendment. In the event that this information is not accurate, contact us by calling Individual Life New Business Services at 1-800-675-0608 within 72 hours of receipt of this document.

All of the other provisions of the Policy and the Contract remain in full force and effect unmodified except only as specifically amended by the provisions of this Application Amendment.

**PLEASE ATTACH THIS FORM TO YOUR POLICY**

Kevin Daniel  
Chief Operating Officer

**SIGNED** for Co-operators Life Insurance Company, Regina, Saskatchewan, on the Effective Date.

Copyright 2007 by Co-operators Life Insurance Company ("Co-operators Life"). All rights reserved. This sample contract is for reference only exclusive for agents of Co-operators Life, and is not to be distributed, copied or altered in any way without the express written consent of Co-operators Life. In the event of any discrepancy between this sample contract and any contract issued by Co-operators Life, the terms and conditions of the issued contract will prevail.