



Life Insurance Replacement Summary

Required Information:

Current Carrier _____ Premium \$ _____

Face Amount \$ _____ Cash Value \$ _____

Reduced Paid Up Amount \$ _____

Calculation:

\$ _____ + \$ _____ = \$ _____
new insurance face amount reduced paid up amount total coverage amount

Is total coverage amount greater than current carrier's face amount? yes no

Answered *No* to *all* the health questions on the life insurance application? yes no

Our Recommendation:

Keep Current Company's Reduced Paid Up Insurance

Face Amount \$ _____ Premium: \$0/month

No changes will be made to your current coverage until your new policy is approved.

Buy New Insurance from _____

Face Amount \$ _____ Total Premium \$ _____

Your New Total Coverage Amount will be:

Company _____ Face Amount \$ _____

Company _____ Face Amount \$ _____

Total Coverage Amount \$ _____

**You will have \$ _____ MORE coverage for only
\$ _____/month more/less!**