

life underwriting condensed guide /



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AXA EQUITABLE

redefining / standards

AXA Equitable Underwriting Criteria — Preferred Guidelines

All Applicants			
Term Series, Athena Universal Life Series 150, and Incentive Life Legacy II	Preferred Elite Non-Tobacco	Preferred Non-Tobacco	Standard Plus Non-Tobacco Preferred Tobacco Use
All Other Products	N/A	Preferred Plus Non-Tobacco	Preferred Non-Tobacco Preferred Tobacco Use
Total Cholesterol & Chol/HDL Ratio	220 and 5.0 and HDL > 35 or 240 and 4.5 and HDL > 35	250 and 5.0 and HDL > 35 or 270 and 4.5 and HDL > 35	270 and 6.0 and HDL > 35 or 300 and 5.0 and HDL > 35
Tobacco Use	No nicotine use past 5 years	No nicotine use past 3 years	No nicotine use for past 12 months to qualify for non-tobacco use rates
Alcohol and/or Substance Abuse	No history	No history of abuse for 8 years	No history of abuse for 5 years
Aviation/Private, Avocation and Occupation	Permanent flat extra up to \$3.50 per thousand may be allowed for all products except Incentive Life Legacy® and Survivorship Incentive Life SM		
Medical History/ Physical Condition	No personal history of cancer (except certain skin cancers), diabetes or heart disease, even if not ratable		

AXA Equitable Underwriting Criteria — Preferred Guidelines Cont'd

Applicants 0–69			
Term Series, Athena Universal Life Series 150, and Incentive Life Legacy II	Preferred Elite Non-Tobacco	Preferred Non-Tobacco	Standard Plus Non-Tobacco Preferred Tobacco Use
All Other Products	N/A	Preferred Plus Non-Tobacco	Preferred Non-Tobacco Preferred Tobacco Use
Medication	No Rx for HTN (no exceptions)	All Rx considered	All Rx considered
Family History	No deaths from CAD, CVD, or Ca for M or F or S < 65	No deaths from CAD or Ca for M & F < 60	No more than 1 death from CAD for M & F < 60
Blood Pressure	145/80 (150/90 ages 60–69)	145/90 (150/90 ages 60–69)	Non-ratable BP readings
Driving History mv = moving violations	No DWI, Reckless Driving No mv past 3 years ≤ age 44 No > 1 mv past 3 years ages 45–69	No DWI or Reckless Driving in 5 years No > 1 mv past 3 years ≤ age 44 No > 2 mv past 3 years ages 45–69	No DWI or Reckless Driving in 3 years No > 2 mv past 3 years ≤ age 44 for Term No > 3 mv past 3 years ages 45–69 for Term No > 3 mv past 3 years age ≤ age 69 Permanent plans

Applicants 70 and Over			
Medication	All BP and cholesterol Rx considered	All BP and cholesterol Rx considered	All BP and cholesterol Rx considered
Family History	No criteria	No criteria	No criteria
Blood Pressure	150/90	150/90	150/90
Driving History mv = moving violations	No DWI, Reckless Driving No mv in 2 years	No DWI, Reckless Driving in 5 years No mv in 2 years	No DWI, Reckless Driving in 3 years No mv in 2 years

Abbreviations are as follows:

Coronary Artery Disease (CAD), Cerebrovascular Disease (CVD), Cancer (Ca), Mother (M), Father (F), Siblings (S), Hypertension (HTN), Blood Pressure (BP), Medication (Rx).

BMI/Build Charts

Term Series, Athena Universal Life Series 150, and Incentive Life Legacy II		Preferred Elite Non-Tobacco	Preferred Non-Tobacco	Standard Plus Non-Tobacco Preferred Tobacco Use
All Other Products		N/A	Preferred Plus Non-Tobacco	Preferred Non-Tobacco Preferred Tobacco Use
Height	Maximum Weight ¹BMI 28	Maximum Weight ¹BMI 29.5	Maximum Weight ¹BMI 31	
4' 6"	116	122	129	
4' 7"	121	127	133	
4' 8"	125	131	138	
4' 9"	130	136	143	
4' 10"	134	141	148	
4' 11"	139	146	154	
5' 0"	144	151	159	
5' 1"	148	156	164	
5' 2"	153	161	170	
5' 3"	158	166	175	
5' 4"	163	171	181	
5' 5"	168	179	186	
5' 6"	174	183	192	
5' 7"	179	188	198	
5' 8"	184	194	204	
5' 9"	190	200	210	
5' 10"	195	205	216	
5' 11"	201	211	222	
6' 0"	207	218	229	
6' 1"	212	223	235	
6' 2"	218	229	241	
6' 3"	224	236	248	
6' 4"	230	242	255	
6' 5"	236	248	261	
6' 6"	242	255	268	
6' 7"	249	262	275	
6' 8"	255	268	282	
6' 9"	261	275	289	
6' 10"	268	282	296	
6' 11"	274	289	304	
7' 0"	281	296	311	

¹ BMI = Body Mass Index Note: Chart is unisex, maximum weight is in pounds.

Life Underwriting Requirements Ages 0–50

(See Notes Section on Page 6 for Definitions and Additional Requirements.)

Face Amounts	Issue Ages				
	0-15	16-30	31-35	36-40	41-50
\$0 to \$99,999	²Non-Med				
\$100,000	²Non-Med	²Non-Med, HOS, Blood, MVR			²Non-Med, HOS, Blood
\$100,001 to \$249,999					Paramed, HOS, Blood
\$250,000					Paramed, HOS, Blood, MVR
\$250,001 to \$500,000		²Non-Med, HOS, Blood, MVR		Paramed, HOS, Blood, MVR	
\$500,001 to \$1,500,000		Paramed, HOS, Blood, MVR			
\$1,500,001 to \$1,999,999					
\$2,000,000	²Non-Med, APS	Paramed, HOS, Blood, MVR	Paramed, HOS, Blood, APS, MVR		
\$2,000,001 to \$5,000,000		Paramed, HOS, Blood, APS, MVR			Paramed, HOS, Blood, EKG, APS, MVR
\$5,000,001 to \$10,000,000		Paramed, HOS, Blood, APS, MVR	Paramed, HOS, Blood, EKG, APS, MVR		
Over \$10,000,000		MD Exam, HOS, Blood, APS, MVR	MD Exam, HOS, Blood, EKG, APS, MVR		

Life Underwriting Requirements Ages 51 and Above

(See Notes Section on Page 6 for Definitions and Additional Requirements.)

Face Amounts	Issue Ages							
	51-60	61-65	66-69	70-75	76-80	81 & Above		
\$0 to \$50,000	²Paramed			²Paramed, APS		²MD Exam, APS		
\$50,001 to \$99,999	²Paramed		²Paramed, APS					
\$100,000 to \$249,999	Paramed, HOS, Blood	Paramed, HOS, Blood, APS		Paramed, HOS, Blood, APS, MVR		MD Exam, HOS, Blood, APS, MVR		
\$250,000	Paramed, HOS, Blood, MVR	Paramed, HOS, Blood, APS, MVR						
\$250,001 to \$500,000		Paramed, HOS, Blood, APS, MVR	Paramed, HOS, Blood, EKG, APS, MVR	Paramed, HOS, Blood, EKG, APS, MVR		MD Exam, HOS, Blood, EKG, APS, MVR		
\$500,001 to \$1,000,000		Paramed, HOS, Blood, EKG, APS, MVR						
\$1,000,001 to \$1,999,999	Paramed, HOS, Blood, EKG, APS, MVR				MD Exam, HOS, Blood, EKG, APS, MVR			
\$2,000,000								
\$2,000,001 to \$5,000,000	MD Exam, HOS, Blood, EKG, APS, MVR							
\$5,000,001 to \$10,000,000								
Over \$10,000,000	MD Exam, HOS, Blood, Treadmill EKG, APS, MVR			MD Exam, HOS, Blood, EKG, APS, MVR				

2 Preferred Rate Classes Additional Requirements — Paramed Exam is required if proposed Insured seeks Preferred Elite NT or Preferred NT rates on Term Series and Athena Universal Life Series 150, or Preferred Plus on all other products. MVR, Full Blood Profile and HOS are required if applicant seeks any Preferred rate, including the Standard Plus NT rate for Term Series and Athena Universal Life Series 150. For all ages, including Juveniles (0–17), refer to the Product Guides for age and Face Amount limits or specific product guidelines for the Preferred rating.

Financial Underwriting Requirements (See Notes Section on Page 6 for Definitions.)

Face Amounts	Age 65 and Below	Ages 66–69	Ages 70 and Above
\$2,000,000	<ul style="list-style-type: none"> Financial Supplement I (below age 65) Financial Supplement II (at age 65) 	<ul style="list-style-type: none"> Financial Supplement II For Trusts: Complete Trust Document 	<ul style="list-style-type: none"> Financial Supplement II Inspection Report For Trusts: Complete Trust Document
\$2,000,001–\$4,999,999			
\$5,000,000		<ul style="list-style-type: none"> Financial Supplement II Documentation of Net Worth For Trusts: Complete Trust Document 	<ul style="list-style-type: none"> Financial Supplement II Inspection Report with Third-Party Verification of Net Worth For Trusts: Complete Trust Document
\$5,000,001–\$10,000,000			<ul style="list-style-type: none"> Financial Supplement II Inspection Report with Third-Party Verification of Net Worth Documentation of Net Worth For Trusts: Complete Trust Document
\$10,000,001 +	<ul style="list-style-type: none"> Financial Supplement I (below age 65) Financial Supplement II (at age 65) Inspection Report with Third-Party Verification of Net Worth Documentation of Net Worth Prior year's federal income tax statement 	<ul style="list-style-type: none"> Financial Supplement II Inspection Report with Third-Party Verification of Net Worth Documentation of Net Worth For Trusts: Complete Trust Document Prior year's federal income tax statement 	<ul style="list-style-type: none"> Financial Supplement II Inspection Report with Third-Party Verification of Net Worth Documentation of Net Worth For Trusts: Complete Trust Document Prior year's federal income tax statement

AXA Equitable Approved Vendors

Exams			
APPS 1-800-635-1677 www.appsnational.com	ExamOne 1-877-933-9261 www.examone.com	E M S I 1-800-872-3674 www.emsinet.com	Portamedic/Hooper Holmes 1-800-782-7373 www.portamedic.com

APS Retrieval	
E M S I 1-800-472-0454 www.emsinet.com	Source Access 1-800-550-3781 www.1sourceaccess.com

Inspections	
E M S I 1-800-821-3879	Infolink 1-800-443-1417

Notes:

- **Face Amount** is defined as all life insurance in force and applied for with AXA Equitable, MONY and/or affiliates within the past 12 months from the date of the application. This includes ultimate death benefit amounts of any policy or rider (e.g., ROPR). For Survivorship, order on ½ the Face Amount.
- **Applicants Age 70 and Above** — Paramed and MD exams include a Senior Questionnaire with Cognitive/Frailty tests.
- **17 Jurisdictions** — CA, CT, DC, DE, FL, GA, IL, LA, MA, MD, NJ, NY, PA, PR, SC, TX, and VA — require HOS for applicants over age 15 applying for \$50,000 to \$99,999.
- **HOS** (Home Office Specimen or Urine Specimen).
- **MVR** (Motor Vehicle Report) will also be ordered by the Home Office on all Term products at ages 41–69.
- **EKG** (Electrocardiogram): Resting or Treadmill EKG made within 12 months may be borrowed in lieu of a current test. Actual tracings (not the EKG report) are required.
- **Treadmill EKG** should not be requested if there is a history of coronary disease, chest pain, or insulin-dependent diabetes.
- **APS** (Attending Physician Statement) is suggested as indicated if the proposed Insured had a checkup within two years of the date of the application.
- **Inspection Report:** A telephone interview to confirm information already asked on the application and supplements — about a proposed Insured's personal data, habits, insurance activity, health, finances, etc.
- **Internal Data Verification** will be obtained by the Home Office for applications over \$2,000,000 up to \$10,000,000 at ages under 70.
- **Third-Party Verification of Net Worth:** A telephone interview of the proposed Insured's accountant, attorney, or banker conducted by our preferred vendor.
- **Documentation of Net Worth:** Balance sheets, profit & loss statements, other pro forma documents are examples of acceptable forms of documentation.

Financial Underwriting Guidelines (See Notes Section on Page 6 for Definitions.)

Purpose	Requirements	Amounts
Personal		
Income Replacement	Working Individual — Earned plus unearned income	Growth Potential
		Maximum Ages
	Non-Working Spouse, Co-Breadwinner, and Other Dependent Adults — To determine if any amount is available, require income information and amount of insurance on breadwinner	25 x income 18–45
		20 x income 46–55
		15 x income 56–60
		10 x income 61–65
		5 x income 66–70
	Unemployed — To determine if any amount is available, require information regarding past earnings, current assets, past and future occupation contemplated	1–4 x income 71–79
		Individual consideration 80 and up
Estate Planning	Need clear figure of net worth	life expectancy x appropriate estate growth factor x applicable tax rate
Juvenile	Equal amounts on all children Provide coverage information on application — Total life insurance in force or pending in all companies on the juvenile and on the applicant or child's parent AND reason if there are any other children in the family insured for a lesser amount	to amount on parent or payor. Special rules apply in NY
Debt Repayment	Copy of loan agreement	Loan duration at least 5 years — 100% of loan amount
Business	Insured's percentage of ownership in business. Current balance sheet/cover letter	
Buy-Sell	Confirmation that buy-sell agreement has been executed, information regarding business partners applied in like manner	Percent ownership x market value of business
Key Person	Cover letter describing how amount was determined	10 x compensation (salary plus bonus)
Employee Benefit	Cover letter describing how amount was determined, who is covered, formula for determining coverage amount, and size of company	Individual consideration
Debt Repayment	Cover letter regarding amount of loan, loan duration, date loan committed, name of lender and collateral pledged to secure loan	Loan duration at least 5 years — 100% of loan amount x percent ownership of business
Charitable	Cover letter explaining past interest in the charity and how the amount was determined	Replacement of past contributions

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