



Ameritas Life Insurance Corp.

475 Fallbrook Blvd. / Lincoln, NE 68521-9033
800-659-2223 / Facsimile: (402) 467-7338

NOTICE TO APPLICANT REGARDING REPLACEMENT OF ACCIDENT AND
SICKNESS INSURANCE

According to your application, you intend to lapse or otherwise terminate existing accident and sickness insurance and replace it with a policy to be issued by Ameritas Life Insurance Corp. For your own information and protection, you should be aware of and seriously consider certain factors which may affect the insurance protection available to you under the new policy.

a. You may wish to secure the advice of your present insurer or its agent regarding the proposed replacement of your present policy. This is not only your right, but it is also in your best interest to make sure you understand all the relevant factors involved in replacing your present coverage.

b. If, after due consideration, you still wish to terminate your present policy and replace it with new coverage, be certain to truthfully and completely answer all questions on the application. Failure to complete this accurately may provide a basis for the company to deny any future claims and to refund your premium as stated in the coverage of your Policy. After the application has been completed and before you sign it, reread it carefully to be certain that all information has been properly recorded.

The above "Notice to Applicant" was delivered to me on:

(Date)

(Applicant's Signature)