

Name of Proposed Insured \_\_\_\_

## Date of Birth \_\_\_\_\_\_\_\_(mm/dd/yyyy)

\_\_\_ Policy No. (If known)

## Language Barrier Statement for Agent (Application and applicable Supplements/Prospectus)

If the Financial Professional/Insurance Broker is fluent in both English and the language of the Proposed Insured or Policy Owner, the Financial Professional/Insurance Broker should translate the questions on the application and submit the following signed and dated Statement:

I am fluent in the Language of the Proposed Insured and Policy Owner. I have read all the questions and answers herein to the Proposed Insured and Policy Owner, who has/have stated to me that he (she/they) understand(s) them and the answers herein are true and complete. I have also reviewed the Statements and Acknowledgements, and if applicable all Supplements and the Prospectus, with the Proposed Insured and the Policy Owner, who has/have stated to me that he (she/they) understand(s) them.

Signature of Financial Professional/Insurance Broker

Date