



SUPPLEMENT TO LIFE APPLICATION PART I – ADDITIONAL INSURABLE INTEREST QUESTIONS

Select one: Genworth Life Insurance Company Genworth Life and Annuity Insurance Company

Proposed Insured:

Full name (first, middle, last, suffix or maiden)	Social Security Number	Date of Birth (MM/DD/CCYY)
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1. Will or has the Proposed Insured, Owner, and/or any other person:
 - a. Receive(d) a cash advance or other inducement, such as "free insurance", in connection with this application for life insurance? Yes No
If "Yes", provide details in #5 below.
 - b. Borrow(ed) money to pay premiums for this policy? Yes No
If "Yes", provide details in #5 below.
 - c. Enter(ed) into a finance agreement that entitles a lender or investor to a portion of the death benefit above and beyond the repayment of principal and interest on the loan? Yes No
If yes, please provide a copy of the finance agreement.
2. Will or has the Proposed Insured and/or Owner transferred a policy for value? Yes No
If "Yes", provide details in #5 below.
3. Does a viatical or life settlement company own a policy on the Proposed Insured? (A viatical or life settlement company buys existing life insurance policies) Yes No
If "Yes", provide details in #5 below.
4. If the policy is issued, does the Owner intend to transfer it by gift or otherwise? Yes No
If "Yes", provide details in #5 below.
5. Detail Section for "Yes" answers to questions above:

Representations

I represent that the statements and answers given in the application are true, complete, and correctly recorded to the best of my knowledge and belief. I agree that: (1) I will notify the Insurer if any statement or answer given in the application changes prior to delivery; and (2) except as provided in the Temporary Insurance Application and Agreement, if any, insurance will not begin unless all persons proposed for insurance are living and insurance as set forth in the application at the time a policy is delivered to the Owner and the first modal premium is paid.

Signature of Proposed Insured	Date

Signature of Owner (if other than Proposed Insured)	Date