



Transamerica Premier Life Insurance Company  
 HOME OFFICE: Cedar Rapids, Iowa  
 Administrative Office:  
 4333 Edgewood Rd NE  
 Cedar Rapids, IA 52499  
 (800) 851-9777  
 premier.transamerica.com

**STATEMENT OF GOOD HEALTH AND INSURABILITY**

Proposed Insured:  
 Proposed Owner:

Please complete the questions listed below and return to the Administrative Office.

Since the date of your application for this Policy/Certificate for insurance with Transamerica Premier Life Insurance Company

	YES	NO
(1) Has there been any change in the health status of the Proposed Insured?	_____	_____/_____
(2) Has the Proposed Insured made an application for insurance, been declined, postponed, or offered modified coverage?	_____	_____/_____
(3) Has the Proposed Insured consulted or been examined by any physician or practitioner?	_____	_____/_____

Please supply details to any "yes" answers:

Dated at \_\_\_\_\_ day \_\_\_\_\_ month \_\_\_\_\_ year \_\_\_\_\_

\_\_\_\_\_  
 Proposed Owner

\_\_\_\_\_  
 Licensed Agent

\_\_\_\_\_  
 Proposed Insured if Other Than Proposed Owner  
 Or Parent/Legal Guardian If Proposed Insured is a Minor

**PLEASE RETURN SIGNED COPY TO THE ADMINISTRATIVE OFFICE  
 NEW BUSINESS DEPARTMENT**