

## Life Underwriting Requirements

Face Amounts	ISSUE AGES										
	0-15	16-30	31-35	36-40	41-50	51-60	61-65	66-69	70-75	76-80	81 & over
<b>\$0 to \$50,000</b>	Non-Med	Non-Med	Non-Med	Non-Med	Non-Med	Paramed	Paramed	Paramed	Paramed APS	Paramed APS	MD Exam APS
<b>\$50,001 to \$75,000</b>	Non-Med	Non-Med	Non-Med	Non-Med	Non-Med	Paramed	Paramed APS	Paramed APS	Paramed APS	Paramed APS	MD Exam APS
<b>\$75,001 to \$99,999</b>	Non-Med	Non-Med	Non-Med	Non-Med	Non-Med	Paramed	Paramed APS	Paramed APS	Paramed APS	Paramed APS	MD Exam APS
<b>\$100,000</b>	Non-Med	Non-Med HOS, Blood	Non-Med HOS, Blood	Non-Med HOS, Blood	Non-Med HOS, Blood	Paramed HOS, Blood	Paramed HOS, Blood APS	Paramed HOS, Blood APS	Paramed HOS, Blood APS	Paramed HOS, Blood APS	MD Exam HOS, Blood APS
<b>\$100,001 to \$249,999</b>	Non-Med	Non-Med HOS, Blood	Non-Med HOS, Blood	Non-Med HOS, Blood	Paramed HOS, Blood	Paramed HOS, Blood	Paramed HOS, Blood APS	Paramed HOS, Blood APS	Paramed HOS, Blood APS	Paramed HOS, Blood APS	MD Exam HOS, Blood APS
<b>\$250,000</b>	Non-Med	Non-Med HOS, Blood MVR	Non-Med HOS, Blood MVR	Non-Med HOS, Blood MVR	Paramed HOS, Blood MVR	Paramed HOS, Blood MVR	Paramed HOS, Blood APS MVR	Paramed HOS, Blood APS MVR	Paramed HOS, Blood APS MVR	Paramed HOS, Blood APS MVR	MD Exam HOS, Blood APS MVR
<b>\$250,001 to \$500,000</b>	Non-Med	Non-Med HOS, Blood MVR	Non-Med HOS, Blood MVR	Paramed HOS, Blood MVR	Paramed HOS, Blood MVR	Paramed HOS, Blood MVR	Paramed HOS, Blood APS MVR	Paramed HOS, Blood APS MVR	Paramed HOS, Blood APS MVR	Paramed HOS, Blood APS MVR	MD Exam HOS, Blood APS MVR
<b>\$500,001 to \$1,000,000</b>	Non-Med	Paramed HOS, Blood MVR	Paramed HOS, Blood MVR	Paramed HOS, Blood MVR	Paramed HOS, Blood APS MVR	Paramed HOS, Blood APS MVR	Paramed HOS, Blood APS MVR	Paramed HOS, Blood APS MVR	Paramed HOS, Blood APS MVR	Paramed HOS, Blood APS MVR	MD Exam HOS, Blood APS MVR
<b>\$1,000,001 to \$1,500,000</b>	Non-Med	Paramed HOS, Blood MVR	Paramed HOS, Blood APS MVR	Paramed HOS, Blood APS MVR	Paramed HOS, Blood APS MVR	Paramed HOS, Blood APS MVR	Paramed HOS, Blood APS MVR	Paramed HOS, Blood APS MVR	Paramed HOS, Blood APS MVR	MD Exam HOS, Blood APS MVR	MD Exam HOS, Blood APS MVR
<b>\$1,500,001 to \$1,999,999</b>	Non-Med APS	Paramed HOS, Blood APS MVR	Paramed HOS, Blood APS MVR	Paramed HOS, Blood APS MVR	Paramed HOS, Blood APS MVR	Paramed HOS, Blood APS MVR	Paramed HOS, Blood EKG APS MVR	Paramed HOS, Blood EKG APS MVR	Paramed HOS, Blood EKG APS MVR	MD Exam HOS, Blood EKG APS MVR	MD Exam HOS, Blood EKG APS MVR
<b>\$2,000,000</b>	Non-Med APS	Paramed HOS, Blood APS MVR	Paramed HOS, Blood APS MVR	Paramed HOS, Blood APS MVR	Paramed HOS, Blood APS MVR	Paramed HOS, Blood EKG APS MVR	Paramed HOS, Blood EKG APS MVR	Paramed HOS, Blood EKG APS MVR	Paramed HOS, Blood EKG APS Inspection MVR	MD Exam HOS, Blood EKG APS Inspection MVR	MD Exam HOS, Blood EKG APS Inspection MVR
<b>\$2,000,001 to \$5,000,000</b>	Non-Med APS Inspection	Paramed HOS, Blood APS Inspection MVR	Paramed HOS, Blood APS Inspection MVR	Paramed HOS, Blood APS Inspection MVR	Paramed HOS, Blood APS Inspection MVR	Paramed HOS, Blood EKG APS Inspection MVR	Paramed HOS, Blood EKG APS Inspection MVR	Paramed HOS, Blood EKG APS Inspection MVR	Paramed HOS, Blood EKG APS Inspection MVR	MD Exam HOS, Blood EKG APS Inspection MVR	MD Exam HOS, Blood EKG APS Inspection MVR
<b>\$5,000,001 to \$7,500,000</b>	Non-Med APS Inspection	Paramed HOS, Blood APS Inspection MVR	Paramed HOS, Blood EKG APS Inspection MVR	Paramed HOS, Blood EKG APS Inspection MVR	Paramed HOS, Blood EKG APS Inspection MVR	MD Exam HOS, Blood EKG APS Inspection MVR	MD Exam HOS, Blood EKG APS Inspection MVR	MD Exam HOS, Blood EKG APS Inspection MVR	MD Exam HOS, Blood EKG APS Inspection MVR	MD Exam HOS, Blood EKG APS Inspection MVR	MD Exam HOS, Blood EKG APS Inspection MVR
<b>\$7,500,001 to \$10,000,000</b>	Non-Med APS Inspection	MD Exam HOS, Blood APS Inspection MVR	MD Exam HOS, Blood EKG APS Inspection MVR	MD Exam HOS, Blood EKG APS Inspection MVR	MD Exam HOS, Blood EKG APS Inspection MVR	MD Exam HOS, Blood EKG APS Inspection MVR	MD Exam HOS, Blood EKG APS Inspection MVR	MD Exam HOS, Blood EKG APS Inspection MVR	MD Exam HOS, Blood EKG APS Inspection MVR	MD Exam HOS, Blood EKG APS Inspection MVR	MD Exam HOS, Blood EKG APS Inspection MVR
<b>Over \$10,000,000</b>	Non-Med APS Inspection	MD Exam HOS, Blood APS Inspection MVR	MD Exam HOS, Blood EKG APS Inspection MVR	MD Exam HOS, Blood EKG APS Inspection MVR	MD Exam HOS, Blood EKG APS Inspection MVR	MD Exam HOS, Blood EKG Treadmill EKG APS Inspection MVR	MD Exam HOS, Blood EKG Treadmill EKG APS Inspection MVR	MD Exam HOS, Blood EKG Treadmill EKG APS Inspection MVR	MD Exam HOS, Blood EKG Treadmill EKG APS Inspection MVR	MD Exam HOS, Blood EKG Treadmill EKG APS Inspection MVR	MD Exam HOS, Blood EKG Treadmill EKG APS Inspection MVR

### NOTES:

- **Face amount** is defined as all life insurance in force and applied for or placed with AXA, MONY and/or its affiliates within the past 12 months from the date of the application.
- **Paramed Exam** is required if applicant seeks Term Preferred Elite NT, Term Preferred NT or Non-Term Preferred Plus rates. **Full Blood Profile and HOS** are required if applicant seeks any Preferred rate, including Term Standard Plus NT rate. 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.
- 13 jurisdictions — CA, CT, DC, FL, GA, IL, MA, MD, NJ, NY, PA, PR, and TX — require a **Modified Blood Profile and HOS** for applicants over age 15 applying for \$50,000 to \$99,999.
- Abbreviations: **HOS** = Home Office Specimen or Urine specimen **MVR** = Motor Vehicle Report
- **EKG** = An electrocardiogram made within six months may be borrowed in lieu of a current test. Actual tracings (not the EKG report) are required.
- **Treadmill EKG** — Do not request if there is a history of coronary disease, chest pain, or insulin-dependent diabetes.
- **APS** (Attending Physician Statement) is suggested as indicated in the above chart if the proposed insured had a checkup within 2 years of the date of the application. Your Underwriter has discretion to waive this requirement if circumstances warrant.
- A Financial Supplement is needed for face amounts of \$2 million or more.

**AXA Equitable reserves the right to request additional requirements whenever these are deemed necessary. The requirements submitted do not guarantee any specific underwriting rate classification.**

## Financial Underwriting Chart

Purpose	Requirements	Amounts
<b>Personal</b>		
<b>Income Replacement</b>	<b>Working Individual</b> — Earned plus unearned income <b>Non-Working Spouse, Co-breadwinner, and Other Dependent Adults</b> — To determine if any amount is available, require income information and amount of insurance on breadwinner <b>Unemployed</b> — To determine if any amount is available, require information regarding past earnings, current assets, past, and future occupation contemplated	Growth Potential
		Maximum Ages
		25 x income 18-45
		20 x income 46-55
		15 x income 56-60
		10 x income 61-65
<b>Estate Planning</b>	Need clear figure of net worth	Generally, 10-year projection at 7% annual growth rate
		1/4 to 1/2 amount on parent or payor Special rules apply in NY
<b>Juvenile</b>	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	
<b>Debt Repayment</b>	Copy of loan agreement	Loan duration at least 5 years — 100% of loan amount
<b>Business</b>	Insured's percentage of ownership in business. Current balance sheet/cover letter	
<b>Buy-Sell</b>	Confirmation that buy-sell agreement has been executed, information regarding business partners applied in like manner	Percent ownership x market value of business
<b>Key Person</b>	Cover letter describing how amount was determined	10 x Compensation (salary plus bonus)
<b>Employee Benefit</b>	Cover letter describing how amount was determined, who is covered, formula for determining coverage amount, and size of company	Individual Consideration
<b>Debt Repayment</b>	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
<b>Charitable</b>	Cover letter explaining past interest in the charity and how the amount was determined	Replacement of past contributions

Reminder: Financial Supplement is required for face amounts of \$2 million or more.

### Approved Examiners

**American Para Professional Systems, Inc.**  
1 Jericho Plaza  
Jericho, NY 11753  
516-822-6230  
1-800-635-1677  
[www.appsnational.com](http://www.appsnational.com)

**ExamOne**  
10101 Renner Blvd.  
Lenexa, KS 66219  
877-933-9261  
Fax: 913-859-6682  
[www.EXAMONE.com](http://www.EXAMONE.com)

**E M S I**  
3050 Regent Blvd.  
Suite 400  
Irving, TX 75063  
1-800-872-3674  
[www.emsinet.com](http://www.emsinet.com)

**Portamedic/Hooper Holmes**  
170 Mt. Airy Road  
Basking Ridge, NJ 07920  
980-766-5000  
1-800-782-7373  
[www.portamedic.com](http://www.portamedic.com)

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IU-40294 ADL (10/07)

Cat. #135202 (11/07)

# Life Underwriting Condensed Guide



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## AXA Equitable Underwriting Criteria — Preferred Guidelines

### BMI Charts

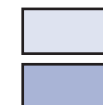
	TERM RATE CLASS	PREFERRED ELITE NT	PREFERRED NT	STANDARD PLUS NT
	NON-TERM RATE CLASS	N/A	PREFERRED PLUS	PREFERRED NON-TOBACCO
All Applicants	Total Cholesterol & Chol/HDL Ratio	210 and 4.5	230 and 5.0 If Ratio ≤ 4.5, then Total Chol can be 250	270 and 6.0 If Ratio ≤ 5.0, then Total Chol can be 300
	Tobacco Use	No nicotine use past 5 years	No nicotine use past 3 years	No nicotine use for past 12 months to qualify for Preferred (Select) 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
	Citizenship/Residence	US Citizen/FT Perm Resident	No criteria	No criteria
	Aviation, Private	Permanent flat extra up to \$3.50 per thousand allowed	Individual consideration in non-ratable situations. No ratable participation in aviation activities <b>except</b> on Term, Athena UL <sup>SM</sup> -LPR, Athena UL <sup>SM</sup> -DB and Athena UL <sup>SM</sup> -ESLI — permanent flat extra up to \$3.50 per thousand allowed	No ratable participation in aviation activities <b>except</b> on Term, Athena UL <sup>SM</sup> -LPR, Athena UL <sup>SM</sup> -DB and Athena UL <sup>SM</sup> -ESLI — permanent flat extra up to \$3.50 per thousand allowed
	Avocation and Occupation	Permanent flat extra up to \$3.50 per thousand allowed for participation in an avocation, sport or occupation	No ratable participation in an avocation or sport. No employment requiring flat extra or feature modification <b>except</b> on Term, Athena UL <sup>SM</sup> -LPR, Athena UL <sup>SM</sup> -DB and Athena UL <sup>SM</sup> -ESLI — permanent flat extra up to \$3.50 per thousand allowed for participation in an avocation, sport or occupation	No ratable participation in an avocation or sport. No employment requiring flat extra or feature modification <b>except</b> on Term, Athena UL <sup>SM</sup> -LPR, Athena UL <sup>SM</sup> -DB and Athena UL <sup>SM</sup> -ESLI — permanent flat extra up to \$3.50 per thousand allowed for participation in an avocation, sport or occupation
Applicants 0–69	Medication	No Rx for HTN (no exceptions)	No Rx for HTN	All Rx is considered
	Family History	No deaths from CAD, CVD, or Ca for M or F or Sib < 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)	No criteria
	Driving History mv = moving violations	No DWI, Reckless Driving No mv past 2 years ≤ age 44 No > 1 mv past 2 years ages 45–69	No DWI or Reckless Driving in 5 years No > 1 mv past 2 years ≤ age 44 No > 2 mv past 2 years ages 45–69	No DWI or Reckless Driving in 3 years No > 2 mv past 2 years ≤ age 44 for Term No > 3 mv past 2 years ages 45–69 for Term No > 3 mv past 2 years age ≤ age 69 Permanent plans
	Medical History/ Physical Condition	No personal history of cancer or heart disease, even if not ratable (except certain skin cancers)	No personal history of cancer or heart disease, even if not ratable (except certain skin cancers)	No personal history of cancer or heart disease, even if not ratable (except certain skin cancers)
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	No DWI, Reckless Driving No moving violations in 2 years	No DWI, Reckless Driving in 5 years No moving violations in 2 years	No DWI, Reckless Driving in 3 years No moving violations in 2 years
	Medical History/ Physical Condition	No personal history of cancer (except certain skin cancers), diabetes or heart disease	No personal history of cancer (except certain skin cancers), diabetes or heart disease	No personal history of cancer (except certain skin cancers), diabetes or heart disease

Standard Plus NT		Preferred Elite NT	Preferred NT
Preferred Non-Tobacco		Preferred Plus	
Height	BMI* 31	Height	BMI* 28
4' 6"	129	4' 6"	116
4' 7"	133	4' 7"	121
4' 8"	138	4' 8"	125
4' 9"	143	4' 9"	130
4' 10"	148	4' 10"	134
4' 11"	154	4' 11"	139
5' 0"	159	5' 0"	144
5' 1"	164	5' 1"	148
5' 2"	170	5' 2"	153
5' 3"	175	5' 3"	158
5' 4"	181	5' 4"	163
5' 5"	186	5' 5"	168
5' 6"	192	5' 6"	174
5' 7"	198	5' 7"	179
5' 8"	204	5' 8"	184
5' 9"	210	5' 9"	190
5' 10"	216	5' 10"	195
5' 11"	222	5' 11"	201
6' 0"	229	6' 0"	207
6' 1"	235	6' 1"	212
6' 2"	241	6' 2"	218
6' 3"	248	6' 3"	224
6' 4"	255	6' 4"	230
6' 5"	261	6' 5"	236
6' 6"	268	6' 6"	242
6' 7"	275	6' 7"	249
6' 8"	282	6' 8"	255
6' 9"	289	6' 9"	261
6' 10"	296	6' 10"	268
6' 11"	304	6' 11"	274
7' 0"	311	7' 0"	281

Elderly is defined as ages 70 and above, no ratable disorder.

Abbreviations are as follows:

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



**Issue Ages 0–69 Additional Criteria**

**Elderly Additional Criteria**

\*BMI = Body Mass Index

Note: Chart is unisex, maximum weight is in pounds.