

Change form – Long term care insurance



Policy no.

Owner's first name

Middle initial

Last name

1 Changes to Clarica Long Term Care Insurance policies

- Decrease the weekly benefit amount (\$150 min.) to \$
- Lengthen waiting period: 90 days 180 days
- Remove the return of premium on death.
- Decrease the benefit period to: 500 weeks 250 weeks 150 weeks 100 weeks

2 Changes to Sun Long Term Care Insurance policies

- Reduce the coverage provided by my policy as follows:
 - Remove the comprehensive benefit. **Note:** If removing comprehensive benefit, the facility benefit waiting period cannot remain at 0 days. If waiting period is 0 days, complete #3 to change the waiting period.
 - Remove the facility care benefit.
- Reduce the weekly benefit amount (\$150 min.) for:
 - Comprehensive benefit to \$
Note: The comprehensive benefit amount must be at least 50% of the facility care benefit amount.
 - Facility care benefit to \$
- Lengthen the waiting period for:
 - Comprehensive benefit to 90 days 180 days (Not available on policies dated before December 2, 2013.)
 - Facility care benefit to 30 days 90 days
- Decrease the benefit period for:
 - Comprehensive benefit to: 250 weeks 150 weeks 100 weeks
 - Facility care benefit to: 250 weeks 150 weeks 100 weeks
- Return of premiums on death:
 - Remove
- Change the inflation protection so that:
 - the weekly benefit amount will increase at each policy anniversary by 3% only if benefits are being paid.
 - I will start to pay required payments for the increased amounts calculated to date.
 - Any increased amounts calculated to date will also be removed from my policy.
 - inflation protection is removed.
 - I will start to pay required payments for the increased amounts calculated to date.
 - Any increased amounts calculated to date will also be removed from my policy.

Please submit only one copy of this document.

Career Sales Force advisors: Original or fax toll-free to 1-866-487-4745.

All others: Through your MGA or National Account.

3 Changes to Sun Retirement Health Assist policies

1. Reduce weekly benefit amount:

Reduce the weekly benefit amount to \$ (\$500 min.)

2. Lengthen waiting period:

 Lengthen the waiting period to 730 days (2 years)

3. Return of premium on death:

 Remove**4 Declaration****Declaration:** All owners and pre-authorized (PAC) payors confirm:

- they authorize Sun Life Assurance Company of Canada to make the changes requested on this form, and
- they understand how these changes will affect the administration of this policy.

Location signed	Date (dd-mm-yyyy)	Signature
Province:	Signed on -- --	Owner X
Province:	Signed on -- --	Owner X
Province:	Signed on -- --	PAC payor (if other than owner) X
Province:	Signed on -- --	PAC payor (if other than owner) X

Advisor/LTCI specialist's declaration: I confirm that I have reviewed with all owners and pre-authorized (PAC) payors, if other than owner, the above requested changes and everyone understands how these changes will affect the administration of this policy.

Location signed	Date (dd-mm-yyyy)	Signature
Province:	Signed on -- --	Advisor/LTCI specialist X
Province:	Signed on -- --	Supervisor X