

Applicant Refusal Form Further Action Still Required

If either ExamRight or AppRight is not completed at time of exam;

Initials Required – I hereby attest (applicant must initial next to each item) that I understand:

_____ 1. I must contact my agent to receive a copy of my application and that I will be required to complete the application in order to start the underwriting process.

_____ 2. If I was eligible for temporary life insurance coverage I will not be covered until my application has been fully completed.

_____ 3. I understand that the underwriting process cannot start until this application has been completed.

Explanation: I am not signing or am unable to execute this document at this time due to one or more of the reasons stated below:

☐ **Client Stopped Application:**

- ☐ I have questions for the agent before I sign.
- ☐ I need additional time to complete the application.
- ☐ Other, please specify _____

☐ **Examiner Stopped the Application:**

☐ **Connection Issue**

Examiner - Please briefly describe the nature of the issue:

☐ **Website Issue**

- ☐ Screen Froze
 - ☐ Access Restricted Message
 - ☐ Other - *Please briefly state the nature of the difficulty:*
- _____

☐ **Laptop Issue**

Examiner - Please briefly describe the nature of the issue:

Applicant Signature

Date

Examiner Signature

Date