



Mailing Address:  
Des Moines, IA 50392-0002

**Principal Life Insurance Company** | **Group Life Conversion Application Instructions**

### **Available Option**

Individual Purchase Rights (conversion) allows qualifying individuals previously covered by employer-sponsored group life insurance to buy individual life insurance coverage without proof of good health. Coverage is provided through an Individual Life Insurance policy issued by Principal Life Insurance Company, a member of the Principal Financial Group®.

You may choose coverage from a

- minimum face amount of \$1,000 to a
- maximum face amount of insurance you had under your employer's policy. (In some situations, depending on the terms of the employer's group policy, the maximum amount may be reduced.)

### **Eligibility and Effective Dates**

You are eligible to buy conversion life insurance if you were insured as an employee under your employer's life insurance or were covered as a dependent under that insurance prior to the date coverage terminated and meet qualification requirements outlined in that insurance.

Coverage takes effect on the 32<sup>nd</sup> day following the date your coverage ended under the employer's life insurance, provided your application and premium are properly submitted within the time frame shown below.

### **How, When, and Where to Apply**

To obtain coverage, you must submit:

- a completed application; and
- your first premium payment

within 31 days following the date your life insurance coverage terminated. Proof of good health is not required.

**Mail your completed application and premium to:**

**Principal Life Insurance Company  
Life Conversion  
Des Moines, IA 50392-0002  
1-800-986-3343, X76398**

## How To Calculate Your Premium

1. Decide how much insurance you wish to convert.
2. Determine your age (See Note 1 below) and smoking status (See Note 2 below) as of the 32<sup>nd</sup> day following the termination date of the insurance you are converting.
3. Using the Premium Rate Table included with these materials, identify the column into which your selected insurance amount falls. This tells you the cost per \$1,000 (unit) of insurance.
4. Divide your insurance amount by 1,000 to determine the number of units to be converted. (Round fractional units up for .5 or greater.)
5. Multiply the unit number determined in Step 4 by the cost per unit found in Step 3.
6. If you select a Premium Mode other than annual, use the Premium Mode computation table below.

**Note 1:** For the purpose of this application and your insurance policy, age refers to your age nearest birthday. Determine the date of the 32<sup>nd</sup> day following the termination date of the insurance you are converting. If that date is closer to your last birthday, use your current age. If that date is closer to your next birthday, use the age you will be on that next birthday.

**Note 2:** For the purpose of this application you will be classified:

- as a smoker, if you have smoked marijuana or cigarettes, or have used the nicotine patch or nicotine gum within the last 12 months (3 yrs at ages 71-85).
- as a non-smoker, if you use chewing tobacco, cigars, or pipes.

Example: The applicant has \$25,000 of life insurance coverage and wishes to convert it. Her last birthday was January 19, 2002. At that time she was 39 years old. Her current coverage terminates on July 25, 2002. The 32<sup>nd</sup> day after coverage termination is August 26, 2002. August 26, 2002 is closer to her next birthday so for our purposes, her age is 40. She does not smoke. She will use the column for "Non-Smoker" to determine her base annual premium rate per \$1,000 of insurance. She will divide \$25,000 by 1,000 to determine the number of units. Then she will multiply the number of units by the rate per unit and calculate her annual cost.

\$25,000 divided by 1,000 equals 25 units

25	X	\$9.26	=	\$231.50
Number of Units		Base Rate for Age & Smoking Status		Annual Cost

Your calculation:

\$ \_\_\_\_\_ divided by 1,000 equals \_\_\_\_\_ units

	X	\$	=	\$
Number of Units		Base Rate for Age & Smoking Status		Annual Cost

## Premium Mode

You may pay your premium annually, semi-annually, or quarterly. If you wish to pay annually, submit the Annual Cost you have computed with our application. Otherwise, multiply your Annual Cost by the factor from the following table:

Semi-annual	0.5
Quarterly	0.25

**Premium Rate Table**

Age	Non-smoker	Smoker
0 - 20	5.05	8.55
21	5.05	8.55
22	5.05	8.55
23	5.05	8.55
24	5.05	8.55
25	5.05	8.55
26	5.31	8.99
27	5.57	9.42
28	5.83	9.86
29	6.09	10.29
30	6.35	10.73
31	6.61	11.16
32	6.87	11.60
33	7.13	12.03
34	7.39	12.47
35	7.65	12.90
36	7.98	13.32
37	8.30	13.74
38	8.62	14.15
39	8.94	14.54
40	9.26	14.97
41	9.95	15.80
42	10.65	16.64
43	11.35	17.47
44	12.14	18.31
45	12.84	19.23
46	13.54	20.06
47	14.24	20.90
48	14.94	21.73
49	15.64	22.57
50	16.34	23.49
51	17.12	24.32
52	17.82	25.16
53	18.52	25.99
54	19.22	26.83
55	19.92	27.66
56	20.86	30.03
57	21.79	32.31
58	22.73	34.59
59	23.66	36.87
60	24.51	39.16
61	25.44	41.53
62	26.38	43.81
63	27.31	46.09
64	28.25	48.37
65	29.18	50.74
66	31.08	55.05
67	32.98	59.35
68	34.87	63.66
69	36.77	68.06
70	38.67	72.37
71	40.57	76.67
72	42.47	80.98
73	44.36	85.29
74	46.26	89.68
75	48.16	93.99