ING Individual Life Underwriting - Fully Underwritten Products



Distributor Underwriting Reference Guide November 2013



LIFE INSURANCE

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Distributor Underwri⁻

-The ING Distributor Underwriting Reference provides general information about our typical information needs and representative risk decisions for some commonly encountered situations regarding fully underwritten life insurance products.

The ING Life Companies reserve the right to request information in addition to that described in this Reference Guide. Our underwriting decisions take into account all the aspects of the application and the other information that we obtain. Therefore, actual underwriting case decisions may vary from the general guidelines given in the Reference Guide.

For additional information, please contact your ING Life Companies' underwriting representative.

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ting Reference Guide



How to Use this Reference

- Guidelines for medical and non-medical impairments are included to assist the producer in providing all the information necessary for the most favorable underwriting assessment.
- General information on our Financial Underwriting perspectives is located on pages 12-13.
- For additional information about a specific situation, or for more details, please consult your ING Underwriting representative.
- Submission ("age-and-amount") requirements, Preferred criteria, and details of financial underwriting guidelines are found in the ING Fully Underwritten Life Insurance Underwriting Requirements Guide (#113151).
- When you submit your application, please provide a cover letter to include as much relevant information as you have available.

Maximum Ratings for ING Life Companies' Products

Non-term products may be issued through Table 16 (500%).

ING TermSmart and ING ROP Endowment Term products may be issued through Table 8 (300%).

Table Rating Equivalents

Letter	Numerical	Average Mortality Percentage
В	2	150%
С	3	175%
D	4	200%
E	5	225%
F	6	250%
Н	8	300%
J	10	350%
L	12	400%
Р	16	500%

ING TermSmart, policy form series 1315-02/10 (varies by state and may not be available in all states), and ING ROP Endowment term is policy form series 1314-12/09 are issued by ReliaStar Life Insurance Company (not available in New York). ING TermSmart * NY, policy form series 3314-02/10, and ING ROP Endowment Term NY, policy form 3313-12/09 (both available only in NY), are issued by ReliaStar Life Insurance Company of New York. Within the state of New York, only ReliaStar Life Insurance Company of New York is admitted, and its products issued. ReliaStar Life Insurance Company and ReliaStar Life Insurance Company of New York are members of the ING family of companies.

Medical Impairment Underwriting

IMPAIRMENT	UNDERWRITING FACTORS	POSSIBLE RANGE OF UNDERWRITING DECISIONS
Anemia/Blood Disorders A reduction in the number of red blood cells which can be due to a variety of different reasons such as blood loss, failure of the bone marrow to produce sufficient red blood cells or a decrease in red blood cell survivor time	 Type of anemia Underlying cause Details of treatment Recent CBC as well as historical CBCs. Medications Any concurrent serious impairment 	Mild anemia due to blood loss could be rated Standard. More severe anemias such as sickle cell or sideroblastic anemia could be highly rated to a Decline.
Aneurysm An abnormal dilatation of the aorta or other artery associated with an increased risk of rupture or dissection.	 Precise diagnosis Location and size of the aneurysm Treatment Presence or absence of symptoms Any associated CAD, HTN, CVD, COPD or renal disease Smoking status Regular follow-up 	Small, not requiring surgery could be mildly rated. Any larger, treated by surgery or not, could be rated to a Decline.
Arthritis/Rheumatoid Arthritis is a non-specific term	Type of arthritisDuration of disease	Mild cases treated by OTC meds are usually Standard.
describing disease affecting one or more components of a joint but usually with accompanying inflammation. There are over 100 different types of arthritis.	 Drug treatment/surgery Presence of extra-articular manifestations (eye or lung involvement) 	Moderate cases with some physical limitations or more serious meds can have a mild to moderate rating.
	• Functional capacity and lifestyle	Severe cases with disability or other organ involvement can be a Decline.
Asthma	 Frequency of symptoms Duration and intensity of exacerbations Treatment including response to treatment Frequency of night-time symptoms Time off from work Any concurrent serious impairment Smoking status 	Minimal or mild asthma: Standard
Asthma is an obstructive lung disease characterized by reversible airway		Moderate: Table B – F
obstruction and airway hyper- responsiveness.		Severe: Table F – Decline
Atrial Fibrillation Atrial fib is a totally irregular rhythm	 Age at onset Frequency of attacks Associated symptoms and complications Underlying cardiac and non-cardiac disease 	Infrequent attacks of short duration can be rated from Standard to a mild rating.
of the heart caused by the firing of multiple foci in the atria. This causes the atria to "fibrillate" rather than effectively contract.		Prolonged episodes of atrial fib or those requiring antiarrhythmic treatment can be moderate to high Substandard.
	Treatment including the use of anticoagulant medicationFull cardiac evaluation	With any associated cardiac disease, or poor response to treatment, case can be a Decline.
Bariatric Surgery Bariatric surgery treats obesity by altering the digestive process. It is	 Current build Type of surgical procedure as well as date performed Any history of chronic diseases such as diabetes, HTN or CAD. Complications Any functional limitations 	After 5 years, cases without complications and a stable build can be considered for Standard rates.
divided into two categories, restrictive and malabsorptive surgery. Restrictive surgery would include gastric banding; malabsorptive surgery includes		Within 5 years a mild rating may apply. Best case restrictive surgery may be Standard after 2 years, if weight is stable.
bypassing a portion of the digestive tract to prevent absorption of calories and nutrients.		Any significant complications could lead to a high rating or a Decline.

IMPAIRMENT	UNDERWRITING FACTORS	POSSIBLE RANGE OF UNDERWRITING DECISIONS
Barrett's Esophagus Barrett's esophagus is a condition involving changes of the mucosal cells lining the lower esophagus due to injury	 All testing done including biopsies Compliance with treatment and follow-up.	Best cases would involve a short segment of the esophagus and a favorable biopsy. Those may qualify for Standard or a slight rating.
often caused by chronic reflux of the stomach acid.		Any unfavorable biopsy, longer segmental involvement or lack of follow-up, could result in a higher rating or a Decline.
Breast Cancer Breast cancer is a malignancy of the	 Full staging information from all pathology reports 	Small ductal cancers may be Standard to mildly rated.
cells within the breast. It is the most common malignancy in women and can occur in men as well.	 Years since initial treatment Details of all treatment Medications Complications 	Larger tumors or more invasive cancers may be ratable to a Decline.
CAD/MI (Coronary artery disease) Coronary artery disease is most	Age of onsetGender	Older ages with a history of mild CAD may be Standard.
commonly due to an obstruction of the coronary arteries by atherosclerotic plague. Atherosclerosis is caused by a	 Degree of CAD and any progression Results of full cardiac work-ups including any catheterizations or 	More recent CAD at older ages may include a mild to moderate rating.
build up of fatty material and plaque in the walls of the artery causing it to narrow. This narrowing causes blood flow to the heart to stop or slow, robbing it of the oxygen it needs. This can lead to a myocardial infarction (MI) when part of the heart muscle dies or is damaged due to the lack of oxygen.	 Medicating any cathetenzations of treadmills done Medications Any concurrent serious medical impairments Smoking status Treatment, compliance and continued follow-up with cardiologist. 	Younger ages and/or extensive CAD may be highly rated to a Decline.
Chest Pain/Angina Angina is discomfort in the chest and/or	Current age and age at diagnosisResults of current and previous cardiac	Mild to moderate angina with other favorable factors is highly rated.
adjacent areas caused by lack of oxygen to the heart muscle.	testing. • Severity of disease • Any evidence of progression • Treatment • Any concurrent serious medical impairment	More severe and with any unfavorable factors is highly rated to a Decline.
Cirrhosis Cirrhosis is the replacement of normal liver tissue by bands of fibrosis which interferes with the normal processes of the liver.	 Underlying cause Complications, if any Contemplated liver transplantation Liver function tests 	Generally all cases involving cirrhosis are a Decline.
Colon Cancer Colon cancer can be caused by either malignant transformation of benign polyps into cancer or malignant changes in the lining of the intestines.	 Date(s) and complete pathology reports of polyps and/or cancer removed Colonoscopy results pre-and post-surgery Family history of colon cancer 	Ratings for colon cancer depend on the pathology report and length of time since surgery as well as continued follow-up. Best cases of stage 1 colon cancer could be Standard after 3 years.

Medical Impairment Underwriting continued

IMPAIRMENT	UNDERWRITING FACTORS	POSSIBLE RANGE OF UNDERWRITING DECISIONS	
COPD Chronic obstructive pulmonary disease is a term to cover a variety of disease that causes significant chronic, irreversible or frequent airway obstruction. The two most common forms are chronic bronchitis and emphysema.	 Degree of impaired respiratory function Progression Treatment Smoking status Complications Weight loss Results of any testing including pulmonary function studies Any concurrent significant medical condition 	Mild COPD without any unfavorable factors may be Standard to a mild rating. Moderate COPD may have a mild to more moderate rating. Severe COPD and/or associated CAD may be highly rated to a Decline.	
Dementia/ Alzheimer's Dementia is a chronic, progressive disorder of intellect, cognition, personality and behavior, usually caused by disease within the brain. About 70% of people with dementia have Alzheimer's type.	 Degree of cognitive impairment Whether a definite diagnosis of dementia has been made Cause of dementia 	Generally all cases involving dementia are a Decline.	
Depression Depression is a disturbance of mood characterized by sadness and feelings of hopelessness or worthlessness.	 Complete diagnosis Number of episodes and date of last episode Treatment including compliance and recovery Any history of suicide attempt Concurrent medical impairments Any history of drug or alcohol abuse Functional ability Any hospitalization 	Mild depression currently under treatment may be Standard to low Substandard rating. Moderate depression will have a more moderate rating. Severe depression will be highly rated to a Decline. All ratings depend on favorable findings.	
Diabetes There are different types of diabetes with the most common of those being diabetes mellitus. This is a metabolic disorder characterized by a deficiency of insulin secretion resulting in elevations of blood sugar.	 Age at diagnosis Blood testing to include an HGB A1C Extent of medical supervision and compliance Vascular complications Smoking status Any concurrent serious medical impairment Development of nephropathy, neuropathy, or retinopathy. 	Well controlled, older age diabetes may be mildly rated or even Standard.The younger the diagnosis the higher the rating becomes. The rating is also influenced by degree of control and any complications.Cases involving young applicants or uncontrolled diabetes may be highly rated to a Decline.	
Drugs/Alcohol abuse Drug abuse is the use of any substance in a manner which deviates from the accepted medical, social or legal patterns that exist within a given society. Alcohol abuse is present when the consumption of alcohol interferes with a person's ability to maintain control over his or her actions.	 Details of past and present levels of alcohol consumption and/or type of drug Current blood tests Any medical complications Past history of treatment for alcohol or other substance abuse Any psychiatric disorders History of marital or job instability 	Current use of alcohol or drugs after treatment is a Decline. After 3 years from treatment, favorable cases may be moderately to highly rated. After 6 years, cases with favorable factors may be Standard.	

IMPAIRMENT	UNDERWRITING FACTORS	POSSIBLE RANGE OF UNDERWRITING DECISIONS	
Gallstone Disease The formation of stones within the gallbladder increases with age and is more common in women. They are usually asymptomatic and may be discovered incidentally.	 Site of gallstones Number and frequency of attacks Complications, if any Surgery and any complications Results of all investigations 	Most cases involving gallstones are Standard unless there are significant complications or associated bile tract disease.	
Gastritis/Ulcers Gastritis is an inflammation of the inner	 Underlying cause Alcohol consumption Any complications including 	Most cases of simple gastritis are Standard.	
lining of the stomach. There are many causes of gastritis.	 Any complications including hemorrhage or hospitalization for symptoms 	Cases that are alcohol induced or have more serious underlying causes, can be rated or Declined.	
GERD (Gastro-esophageal Reflux	 Frequency and severity of symptoms Any complications 	Most cases of GERD are Standard risks.	
Disease) Gastroesophageal reflux is reflux of stomach contents into the lower esophagus through an incompetent gastroesophageal sphincter	 Any complications Treatment including surgery 	Any complications or any current investigation pending may warrant a rating or postponement.	
HBP (High Blood Pressure) High blood pressure is a sustained elevation in blood pressure above the level considered acceptable for the individual's age and gender. Primary hypertension accounts for 95% of HBP and has no identifiable cause. Secondary HBP is due to an underlying disease process or external cause.	 BP readings over the last year Any recent change in the pattern of the readings Treatment and duration Alcohol intake Blood pressure response to exercise Concurrent medical conditions. Other cardiovascular risk factors such as age, cholesterol readings and family history 	Ratings for blood pressure depend upon average of recent blood pressure readings and overall picture of stability over the last 6 months. Controlled blood pressure usually can be Standard. Secondary hypertension may require a rating for the underlying disease. Blood pressure not under control may require a rating or a Decline.	
Headaches/Migraines Headaches are generally a very	TypeFrequency and severity	Most cases involving headaches will be Standard.	
 common occurrence. They can be due to something as simple as tension or something more concerning, such as a tumor or stroke. Work-up, if any Treatment Underlying cause, if any 		Cases involving any significant underlying cause may be rated or Declined.	
Heart Murmur/Valve Disorder Heart murmurs are extra heart sounds that are produced as a result of turbulent flow of blood through the	 Age of applicant Recent and past echo cardiogram testing results Type, severity and number of valve disorders Treatment including date(s) of any surgery 	Rating depends on type and severity of valve disorders. Slight/mild murmur, evidence of no progression, valve structurally normal: Standard	
heart. A murmur is usually present when there is a heart valve disorder.		Moderate valve disorder: Table B – Decline	
	 Medications Any underlying coronary artery disease Active lifestyle 	Murmur – Severe valve disorder: usually Decline	

Medical Impairment Underwriting continued

IMPAIRMENT	UNDERWRITING FACTORS	POSSIBLE RANGE OF UNDERWRITING DECISIONS
Hepatitis Inflammation of the liver and can occur as acute or chronic. Acute hepatitis is a result of a viral infection or damage by drugs or alcohol. Chronic hepatitis may occur as a consequence of acute hepatitis.	 Hepatitis type (e.g., Hepatitis A, B, C, or variation) Details on alcohol usage Liver function testing results (past and current) Liver biopsy results (if applicable) Complications Treatment and medication details 	Full clinical recovery, normal liver enzymes for a specified amount of time: Standard (dependent on hepatitis type) Ongoing cases: Moderate Substandard to decline based on type, severity, treatment and damage caused by the hepatitis
HIV Human immunodeficiency virus infection	• Positive HIV lab testing	All cases: Decline
Hyperthyroidism Disorder of the thyroid where there is an excessive production of thyroid hormone.	 Recent/past thyroid function tests Thyroid scan results (if applicable) Treatment including date(s) of any surgery Medications Complications 	Medically treated and controlled: Standard Untreated/uncontrolled: Table B – Postpone (dependent on individual case specifics)
Kidney Disease/Disorder There are many types of kidney diseases such as polycystic kidney disease (PKD) and renal artery stenosis. These diseases and disorders can ultimately lead to renal failure.	 Age of applicant Definitive diagnosis Severity and degree of progression Treatment (e.g., dialysis, kidney transplant) Current and past kidney function test (KFT) results Family history of polycystic kidney disease Other associated medical conditions such as cysts causing bleeding in the kidney, liver, pancreas or spleen 	No family history of renal disease, no diabetes, CAD, or collagen vascular disease, no history of hypertension (unless documented as controlled), and normal, stable lab testing: Standard Most cases: Rated – Decline (based on severity and progression)
Leukemia A cancer of the body's blood forming tissues, including bone marrow and the lymphatic system.	 Age of applicant Date of diagnosis Type of leukemia and stage of cancer Treatment Date treatment completed Recurrence or secondary cancer 	Any rating assumes full staging information, confirmation of radical treatment and no recurrence. Standard is unlikely but may be available dependent on the above conditions and no recurrence or residual problems for over a certain period of time. Most cases: Rated – Decline (based on type, date diagnosed, severity, treatment and progression)
 Lung Cancer One of the most common malignancies that begins in the lungs. Ear agent use only. Not for public distribution 	 Age of applicant Date of diagnosis Pathology report showing stage of cancer and type of cancer cell Treatment including date(s) of any surgery Date treatment completed Recurrence or spread Associated risk factors (e.g., tobacco use) Other associated medical impairments (e.g., chronic bronchitis or emphysema) Complications from treatment 	Lung cancer can only be considered if treatment completed, not smoking, stable, and no recurrence for over a certain period of time.

IMPAIRMENT	UNDERWRITING FACTORS	POSSIBLE RANGE OF UNDERWRITING DECISIONS
Malignant Melanoma A serious malignant cancer of the pigment producing cells of the skin (melanocytes).	 Age of applicant Date of diagnosis Pathology report showing the type of melanoma, depth and thickness of tumor and any ulceration Type of treatment and date completed Complications from treatment Recurrence or spread Ongoing risk factors like dysplastic nevi Regular follow-up screening 	If in-situ and some favorable thin melanomas: Standard Many of the cases can be offered a flat extra following one year from excision of the melanoma. Deeper lesions must be Declined for a longer period of time from treatment.
Mental Illness Accounts for significant morbidity and mortality in the world today. The primary mortality issue of mental disorders relates to suicides and accidents.	 Age of applicant Diagnosis Severity, duration Type of treatment (e.g., psychiatric medications) Current mental state Family history of mental illness or suicide Occupation, employment and social functioning history Family structure and relationships Any hospitalizations Any suicide attempts or suicidal thoughts 	Mild cases with several favorable features present and over 1 year since last symptoms: Standard Moderate cases with satisfactory response to treatment and several favorable features present: Table B – D Severe cases: usually Decline
Multiple Sclerosis (MS) A chronic condition characterized by lesions in the spinal cord and the brain usually beginning in the 20-40 age group	 Definite diagnosis Relapsing-remitting or progressive Age of diagnosis Current symptoms Date of last attack Frequency of attacks Complications Degree of disability Progression Family history 	 Benign MS, stable with no signs or symptoms for five years: Standard Possible MS, symptoms consistent with diagnosis but not confirmed and no progression: Table B – D (dependent on number of years since last signs or symptoms) MS cases with definite or probable MS diagnosis are rated higher to Declined.
Organ Transplants The moving of an organ from one body to another, or from a donor site on the patient's own body	• Type of transplant (heart, liver, lung, and renal)	Most cases: Decline Some renal transplants may be highly Substandard.
Obstructive Sleep Apnea (OSA) Most common type of potentially serious sleep disorder where breathing repeatedly stops and starts during the phases of sleep.	 Compliance with treatment Results of sleep studies Type, frequency, severity and duration of symptoms Associated medical impairments Other risk factors (e.g., CAD, HTN, obesity) History of motor vehicle accidents due to sleepiness 	Suspected OSA with snoring only, no signs or symptoms and no tests pending: Standard Mild OSA with good response to treatment: Standard Moderate OSA with ongoing treatment: Standard to low Substandard (dependent on number of years since last signs or symptoms) Moderate or Severe OSA, no treatment, poor compliance usually: Decline

Medical Impairment Underwriting continued

IMPAIRMENT	UNDERWRITING FACTORS	POSSIBLE RANGE OF UNDERWRITING DECISIONS
Peripheral Artery Disease (PAD) The most common type of Peripheral Vascular Disease (PVD)	 Age of applicant Date of diagnosis Treatment and medications Compliance with medical treatment, response and follow up 	Standard is unlikely but may be available dependent on the age of the applicant (e.g. > 65), successful treatment and current health of the individual.
	 Smoking status Associated medical impairment (e.g., CAD, DM, HTN, build) 	Most cases: Rated – Decline (based on severity, treatment, progression, and other risk factors)
Pancreatitis Characterized with inflammation of	Number and frequency of episodesUnderlying cause	Single idiopathic acute attack over 1 year ago and fully recovered: Standard
the pancreas which may be acute or chronic. A majority of cases are caused by gallstones or excessive alcohol.	Medical or surgical treatment detailsAny complications	Recurrent idiopathic acute attacks over 3 yrs ago and fully recovered: Standard
		May be: Decline based on underlying cause (e.g., excessive alcohol use)
Paralysis Impairment or loss of motor function usually caused by nerve damage or muscle disorders	 Cause for paralysis (e.g., stroke, injury) Extent of disability Self sufficiency Rehabilitation efforts Chronic infections Bladder and bowel function Any concurrent conditions 	Paralysis caused by injury with minimal effect on function, able to walk unaided may be: Standard (dependent on case specifics)
		All others will most likely be rated or declined dependent on the severity and cause for the paralysis.
Parkinson's Progressive movement disorder	 Age of applicant Symptoms Rate of progression of the disease Extent of disability 	Mild, no treatment required: Standard – Table C
		Moderate, minimal disability: Table B – Table D
		Severe, greater disability or progression: Table D – Decline
Pregnancy	 Current health and medical history Current blood pressure, build and insurance lab testing results 	Good health and no history of complications: Standard
Prostate Cancer Most common malignancy found in American males	 Age of applicant Date of diagnosis Type of treatment Date treatment completed Pathology report showing Stage and Gleason grade Recurrence or spread Pre-treatment PSA Post- treatment records, including follow-up and current PSA results 	If localized tumor, undetectable PSA post-op: Standard is possible dependent on time from treatment, no recurrence and current age. Otherwise, there will be a flat extra, rating or Decline based on the age of the applicant and staging/spread of the cancer.
Peripheral Vascular Disease (PVD) Presence of atherosclerosis mainly in the abdominal and lower extremity arteries	 Age of applicant Date of diagnosis Treatment and medications Compliance with medical treatment, response and follow up 	Standard is unlikely but maybe available dependent on the age of the applicant (e.g. > 65), successful treatment and current health of the individual. Most cases: Rated – Decline (based on
	 Smoking status 	severity, treatment, progression, and other risk factors)

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Seizures/E

UNDERWRITING FACTORS

POSSIBLE RANGE OF UNDERWRITING DECISIONS

Seizures/Epilepsy Episodes of abnormal neuronal signaling in the brain which may cause strange sensations, convulsions, muscle spasms and loss of consciousness.	 Age of applicant Type of epilepsy Results of neurological testing Cause - Idiopathic or secondary Frequency of seizures Time since last seizure Treatment Compliance with treatment Alcohol usage Occupation MVR 	 Standard possible if: history of a single seizure diagnosed before age 30 seizure free for 5 years no treatment needed in the last 5 years no history of alcohol or drug overuse no history of high risk avocations no MVR violations within the past 2 years Otherwise, the rating or Decline will be based on the severity and type of epilepsy along with the current age of the applicant.
Stroke/TIA Stroke: Permanent damage to the brain caused by a vascular event, thrombosis, or hemorrhage resulting in permanent neurological deficit. TIA: An episode of neurological dysfunction lasting less than 24 hours and no permanent neurological deficit.	 Associated medical impairment (e.g., CAD, DM, HTN, build) Age of applicant Type of event (stroke or TIA) Date of diagnosis Current symptoms, neurological deficits Number of episodes Treatment and medications Smoking history Neurological test results Active lifestyle 	Single TIA for applicants over age 40: > 4 years: Standard 1-4 years: Table B (best case) Most stroke cases: Rated – Decline (based on severity, treatment, progression, and other risk factors)
Tumor/Cancer Benign tumors are usually localized and grow slowly. Malignant tumors (cancer) usually infiltrate into other parts of the body (e.g., surrounding tissues, blood vessels) and establish secondary growths (metastases).	 Age of applicant Date of diagnosis Location of tumor(s) Diagnosis post biopsy/pathology Treatment Recurrence or spread Post- treatment records 	Best case: Standard dependent on type of tumor (benign or malignant), location, diagnosis, treatment, and any recurrence or spread.
Ulcerative Colitis/Crohn's Disease Crohn's is a chronic inflammatory disease that most commonly affects the colon and distal ileum but can occur anywhere in the GI tract. Ulcerative colitis is an inflammatory disease of the large bowel.	 Age of onset Extent and duration of disease Severity of disease and frequency of symptoms Date of last episode Complications Treatment: medications or surgery 	Cases involving mild disease, in remission, with no unfavorable factors may be Standard. Ratings or Declination will apply to more extensive disease with unfavorable factors and frequent attacks.

• Current follow-up to include

colonoscopy

Non-Medical Risks

NON-MEDICAL RISKS

Auto Racing

There are many types of motor sport racing activities which include auto cross, drag racing, NASCAR, stock car and vintage race car driving. Auto Racing Questionnaire is required.

UNDERWRITING FACTORS

- Age of applicant
- Type of vehicle, type of fuel
- Frequency of races
- Speeds attained (average and highest)
- Type of course and race track surface
- Safety precautions
- Location of races
- Experience of driver
- Involvement in other avocations
- Medical history
- Current MVR
- Number of solo hours
- Purpose of flights and number of hours flown per year
- Type of license held
- Pilot's experience
- Driving record
- Medical history

POSSIBLE RANGE OF UNDERWRITING DECISIONS

Standard is possible on a best case scenario for some auto racing activities (e.g., stock car or vintage race car driving)

Most cases: Flat extra in the range of \$2.50 to \$7.50 per thousand (or higher) dependent on the specifics of the auto racing.

History of indiscriminate use of alcohol/ drugs or adverse driving history within the past 5 years: Decline

Best cases include those who have over 100 solo hours and fly annually up to 200 hours, or individuals who have over 400 solo hours and fly annually up to 300 hours.

Cases assessed over Table D for medical reasons will not qualify for the flat extra.

Aviation This is coverage on a private pilot or an

individual currently taking flying lessons. Commercial airline pilots are generally not an underwriting concern. is required. Aviation Questionnaire is required.

ING Life Companies currently have a \$.48/thousand extra premium on qualifying private pilots. Standard and Preferred classes may be available. An alternative is the Aviation Exclusion Rider available in some states.

Climbing and Mountaineering

There are many types of climbing and mountaineering such as trail hiking, bouldering, scrambling and rock climbing. The difficulty, location and conditions of the climbs are taken into consideration as well as the skill and experience level of the climber Please submit the climbing and mountaineering questionnaire.

- Age of applicant
- Location of climbs (e.g., North America, South America, etc.)
- How often are the climbs and time of year for climbs
- Any club membership
- Type of terrain (e.g., rock, snow/ice, artificial climbing walls)
- Level of difficulty (e.g. YDS difficulty class)
- Altitude of climbs
- Safety precautions and the availability of rescue equipment
- Training and experience level
- Foreign travel
- Involvement in other avocations
- Medical history

Mild climbing such as trail hiking or trekking with small degree of difficulty in favorable locations and conditions

OR

Sports climbing (top roping) with small degree of difficulty in favorable locations and conditions may be considered standard (dependent on the specifics of the case).

More moderate climbing/ mountaineering cases: flat extra in the range of \$2.50 to \$7.50 per thousand (or higher) dependent on the climbing specifics.

Extreme climbing and/or history of indiscriminate use of alcohol/drugs within the past 5 years or adverse driving history: Decline

NON-MEDICAL RISKS	UNDERWRITING FACTORS	POSSIBLE RANGE OF UNDERWRITING DECISIONS
Driving History The driving history of the proposed insured is an important factor in the underwriting assessment. This is used not only to consider insurability but also to determine preferred class consideration.	 Motor vehicle report Blood profile Inspection report Attending physician statement 	Motor vehicle reports are ordered on all cases over \$99,999 and any case below that amount with driving concerns. Higher ratings may apply for younger individuals as well as applicants over the age of 70.
Foreign Travel Given the ever changing nature of global politics and economies, foreign travel guidelines can change quickly. Contact your underwriter about any country that may cause some concerns. Please submit the Foreign Travel & Foreign Residence Questionnaire.	 All destination countries Areas in the country where the applicant will be traveling Length of time in each country Purpose of travel 	Amounts may be limited by the type of plan applied for, as well as the current citizenship of the proposed insured. Purpose of travel is also important, as coverage is not available for politicians, journalists and missionaries (among others).
Hazardous Sports There are many other sports that are not addressed in this brochure (e.g., gliding, motor sports, parachuting, snow-mobile racing, etc) and are considered hazardous due to the risks involved. For any questionable hazardous sport activity, please submit the proper ING sports avocation questionnaire.	 Age of applicant Type and details of sport activity Frequency of participation Safety precautions (e.g., training, club memberships, etc.) Experience level Involvement in other avocations Medical history 	Mild involvement in hazardous sport activities in favorable locations and conditions may be considered Standard (dependent on the specifics of the case) All other hazardous sports activities may be rated with a flat extra in the range of \$2.50 to \$7.50 per thousand (or higher) dependent on the sport activity specifics. Extreme hazardous sports activities and/or history of indiscriminate use of alcohol/drugs or adverse driving history within the past 5 years: Decline
Scuba Diving Originally known as an acronym for "Self Contained Underwater Breathing Apparatus," scuba has become a popular sport activity. The experience level of the diver and the location, depth, frequency and conditions of diving are taken into consideration for underwriting purposes. Please submit the diving questionnaire.	 Age of applicant Experience and certification Frequency and depths of dives Lifestyle Location of dives (e.g., open ocean, lake, beach, etc) Diving activities (e.g., cave, wreck, rescue, etc) Commercial diving Involvement in other avocations Medical history 	Snorkel or diving in lakes, rivers, or coastal waters less than 100 feet deep with an experienced diver: usually Standard All other diving activities usually require a flat extra in the range of \$2.50 to \$7.50 per thousand (or higher) dependent on the specifics of the diving activities. History of indiscriminate use of alcohol/ drugs within the past 5 years or adverse driving history: Decline

Financial Underwriting

Financial underwriting is an important part of the overall underwriting evaluation. It is the process of examining the purpose of coverage, insurable interest and financial information to prevent anti-selection or speculation against the insurance company.

Insurable interest is determined by assessing the financial loss that would be suffered by the beneficiary should the insured die prematurely. There also must be insurable interest in the ownership of the policy since the owner will have the ability to change the contract provisions on the policy, and in some cases, even the beneficiary itself. There are many different purposes of insurance. These are some of the most common:

Income Replacement- Income replacement insurance is coverage to protect a family from the loss of income should the proposed insured prematurely die.

Estate Planning- The purpose of estate planning insurance is help to pay the debts of an estate, including taxes, so that the estate can pass to the heirs intact.

Creditor Insurance- This coverage is used to pay off a loan or other debt in the event of the premature death of the borrower.

Charitable Giving- Proceeds of a charitable giving policy are used to make a donation to a charity or school which the insured supported during his/her lifetime.

Key Executive- Utilization of life insurance to fund the continuation of a business which faces an uncertain future due to the death of an owner or vitally important employee(s.)

Buy/sell- Buy-sell agreements are legal contracts between partners, owners, or stockholders of a business entity and can be funded by life insurance. Within these agreements terms are set forth to allow the purchase of the deceased's share of the business by the specifically identified buyers.

Cover letters are invaluable in explaining the insurance sale to the underwriter. Sometimes it is not obvious what the client is trying to accomplish and the purpose of the insurance is not clear-cut. In these types of instances, a cover letter written by the agent can detail out the actual purpose of the insurance and what the proceeds are intended to fund. For example, a one-way buy-sell between two dentists, one who is going to buy out the established practice of a more senior dentist, would be a situation that called for a cover letter. It is not readily apparent what the purpose of the insurance is upon review of the application by the underwriter and the cover letter allows the agent to explain the sales concept.

Cover letters also should be written on any large face amount case, giving the underwriter any background information that is not readily apparent on the application and (2) to explain how the client can afford the premium, in circumstances where that is not obvious from application information.

In estate preservation cases, the percentage of growth of a current estate is influenced by the assets that make up the estate. Real estate, stocks and bonds as well as gold all appreciate differently so sharing the breakdown of the estate by a cover letter can help the underwriter justify a particular face amount. There are also situations where a handicapped child may need to be taken care of throughout their life and a cover letter could explain to the underwriter why the face amount requested is higher than normally expected. In any situation where the facts on the application do not explain the insurance applied for, a cover letter should be submitted.



A history of filing for bankruptcy is appearing more frequently on life insurance applications. Individuals who have a remote history of declaring bankruptcy are not usually a concern to the underwriter. A proposed insured that has had a recent bankruptcy, or is currently in proceedings, is a concern. Applicants who are currently involved in bankruptcy proceedings are usually not eligible for insurance until after the bankruptcy has been discharged. For clients who have recently had a bankruptcy discharged, a cover letter to the underwriter can help explain the circumstances such as medical expenses due to an illness or a recent divorce. Any history of more than one bankruptcy definitely requires some explanation.

The concerns with bankruptcy are twofold. First, a client who is in the midst of financial problems may see an insurance policy with a premature death as a way to help his family out of a bad situation. Secondly, a tenuous financial situation also increases the chance that the policy may lapse due to non-payment.

Please see ING Life Companies' Fully Underwritten Life Insurance Underwriting Requirements Guide (#113151) for financial underwriting requirements including Acceptable 3rd Party Financial documentation.

Older Ages (71 and up)

Special Questionnaire

Every proposed insured that is age 71 or older must complete the ING Age 71+ Questionnaire. This Questionnaire provides underwriting information about the cognitive and functional status of older age proposed insureds.

Included in the Questionnaire are:

- Questions about activities of daily living
- A 3-word Delayed Word Recall test
- A Clock Draw test
- A Timed Get-Up-and-Go test
- As an alternative to the Timed Get-Up-and-Go, a Timed Chair Stand test may be performed
- Examiner's comments about the administration of the Questionnaire.

Underwriting evaluation of the 71+ Questionnaire includes integration of the results with all the information in the underwriting file, particularly the attending physicians' statements, examination findings, and inspection results.

Underwriting Considerations

- Please note that there are separate preferred class criteria for individuals age 61+. See the Life Underwriting Requirements Guide for details.
- Financial underwriting for older age individuals will take into account the shortened period during which estate values can be expected to grow.
- ING Life Companies' underwriters have access to Medical Directors with special training and expertise in the underwriting and mortality of older age risks.

Preferred Criteria: Build

Effective for applications dated 6/1/2011 and later.

Minimum weight applies for Super Preferred, Preferred and Select classes.

Height/weight criteria apply to both males and females.

BMI=Body Mass Index, calculated as (weight in pounds divided by height in inches²) x 703.

		MAXIMUM Weight			
Height	MINIMUM Weight	Super Preferred	Preferred	Select	Standard*
4'8"	80	129	138	147	
4'9"	83	134	143	153	
4'10"	86	139	148	158	
4'11"	89	144	154	163	
5'0"	92	149	159	169	198
5'1"	95	153	164	175	204
5'2"	98	159	170	180	211
5'3"	102	164	175	186	218
5'4"	105	169	181	192	225
5'5"	108	174	186	198	232
5'6"	112	180	192	204	239
5'7"	115	185	198	211	246
5'8"	118	191	204	217	254
5'9"	122	196	210	223	261
5'10"	125	202	216	230	269
5'11"	129	208	222	237	277
6'0"	133	214	229	243	284
6'1"	136	220	235	250	292
6'2"	140	226	241	257	300
6'3"	144	232	248	264	309
6'4"	148	238	255	271	317
6'5"	152	245	261	278	325
6'6"	156	251	268	286	
6'7"	160	257	275	293	
BMI	18	29	31	33	

Ages 16- 60

Ages 61+

MAXIMUM Weight

Height	MINIMUM Weight	Super Preferred (max age 80)	Preferred	Select	Standard*
4'8"	80	(max age 80) 138	147	165	Stanuaru
4 8 4'9"	80	138	147	165	
4'10"	86	148	158	177	
4'11"	89	154	163	183	
5'0"	92	159	169	189	198
5'1"	95	164	175	196	204
5'2"	98	170	180	202	211
5'3″	102	175	186	209	218
5'4″	105	181	192	216	225
5′5″	108	186	198	222	232
5'6″	112	192	204	229	239
5'7"	115	198	211	236	246
5'8″	118	204	217	243	254
5'9"	122	210	223	251	261
5'10"	125	216	230	258	269
5'11"	129	222	237	265	277
6'0"	133	229	243	273	284
6'1"	136	235	250	280	292
6'2"	140	241	257	288	300
6'3"	144	248	264	296	309
6'4"	148	255	271	304	317
6'5"	152	261	278	312	325
6'6"	156	268	286	320	
6'7"	160	275	293	328	
BMI	18	31	33	37	

*These weights are provided only for estimation purposes, since eligibility for the Standard underwriting class is not determined by cut-points such as these.

Temporary Insurance Receipt

The Temporary Insurance Receipt (TIR) provides coverage for a limited amount, for a limited period of time, provided certain qualifications are met. Please read the TIR carefully to become familiar with its provisions, including the coverage beginning and ending dates (located in Section III: Terms and Conditions).

If the TIR cannot be given, do not accept any pre-payment or advance premium on an application.

Pre-payments should not be accepted if the proposed insured(s):

- Are age 70 or older
- Have answered "yes" to any of the TIR Representations (Section II).
- Have left any of the TIR Representations (Section II) blank.

The maximum coverage per life under the TIR is the lesser of the amount of death benefit applied for on all applications/TIRs on the individual OR \$1,000,000.

The Proposed Insured(s), Proposed Owner, and Writing Agent must all sign the TIR if the receipt is to be given.

These general comments are designed to make the producer aware of key items on the TIR. In all circumstances, the Terms and Conditions of the TIR for a particular application will govern.



Retention and Reinsurance

Non-term

AGES 0-70, TABLE 4 OR LESS

Retention maximum Automatic issue limit (includes retained amounts) Jumbo Limit \$ 5,000,000 \$65,000,000 \$65,000,000

(Jumbo Limit Definition: Amount of insurance in force and applied for with all companies, including external replacements.)

- Retention and auto issue limits vary by insured age and policy rating, as well as by aviation and some sports exposures.
- Available retention may vary by policy amount and case characteristics.
- Survivorship retention limit is the lower of the individual retention limit for each of the 2 lives.
- ING Protector UL product automatic issue limit is \$50,000,000.
- Foreign National, Foreign Resident, and Long Term Foreign Travel are covered under a separate International Risk retention and reinsurance pool, for permanent plans only.

ING TermSmart and ING ROP Endowment Term

ALL ISSUE AGES Retention maximum Automatic issue limit (includes retained amounts) Jumbo Limit

\$ 3,000,000 (or available ING retention whichever is less) \$45,000,000 \$65,000,000

(Jumbo Limit Definition: Amount of insurance in force and applied for with all companies, including external replacements.)

• Auto issue limits vary by policy rating, as well as by aviation and some sports exposures.

ING TermSmart, policy form series 1315-02/10 (varies by state and may not be available in all states), and ING ROP Endowment term is policy form series 1314-12/09 are issued by ReliaStar Life Insurance Company (not available in New York). ING TermSmart XNY, policy form series 3314-02/10, and ING ROP Endowment Term NY, policy form 3313-12/09 (both available only in NY), are issued by ReliaStar Life Insurance Company of New York. Within the state of New York, only ReliaStar Life Insurance Company of New York is admitted, and its products issued. ReliaStar Life Insurance Company and ReliaStar Life Insurance Company of New York are members of the ING family of companies.

ING Protector Universal Life, policy form series #87-100 (varies by state) is issued by ReliaStar Life Insurance Company (Minneapolis, MN), a member of the ING family of companies. Guarantees are based on the claims-paying ability of ReliaStar Life Insurance Company who is solely responsible for the obligations under its own policies.



Common Acronyms and Abbreviations

AAA	Aortic abdominal aneurysm	GI	Gastrointestinal
ADHD/ADD	Attention deficit hyperactivity disorder	GU	Genitourinary
AER	Aviation Exclusion Rider	HBP, HTN	High blood pressure, Hypertension
AFIB	Atrial fibrillation	HDL	High density lipoprotein
A1c	Glycohemoglobin A1c	HOS	Home office specimen (urinalysis)
APS/AP	Attending physician's statement/	IFR	Instrument Flight Rating
	Attending physician	KFT	Kidney function test
ASD	Atrial septal Defect	LFT	Liver function test
ATP	Airline Transportation Pilot Certificate	LVH	Left ventricular hypertrophy
BP	Blood pressure	MDD	Major depressive disorder
BPH	Benign prostatic hypertrophy	MI	Myocardial infarction (heart attack)
Bx	Biopsy	MRI	Magnetic resonance imaging
CABG	Coronary Artery Bypass Graft	MS	Multiple sclerosis
CAD	Coronary artery disease	MVA	Motor vehicle accident
CBC	Complete blood count	MVP	Mitral valve prolapse
CFS	Chronic fatigue syndrome	MVR	Motor vehicle report
CHF	Congestive heart failure	OA	Osteoarthritis
CHOL	Cholesterol	OCD	Obsessive compulsive disorder
COPD/COLD	Chronic obstructive pulmonary/Lung disease	OSA	Obstructive sleep apnea
CPE	Complete physical exam	отс	Over the counter (i.e. non-prescription medication)
CRI	Chronic renal insufficiency	PAD/PVD	Peripheral arterial/vascular disease
CVA	Cerebrovascular accident (Stroke)	Path	Pathology report
CVD	Cerebrovascular disease	PFT	Pulmonary function test
CXR	Chest X-ray	PKD	Polycystic kidney disease
DID	Degenerative joint disease	РР	Postpone
DM	Diabetes mellitus	PSA	Prostate specific antigen
DWI/DUI	Driving while impaired/intoxicated/	PTCA	Percutaneous Transluminal Coronary Angioplasty
_	under the influence	RA	Rheumatoid arthritis
Dx	Diagnosis	RAD	Reactive airway disease (Asthma)
EBCT	Electron beam computed tomography	RNA	Risk not acceptable (Declined)
550	(Calcium score)	Rx	Medication, treatment, therapy, prescription
EEG	Electroencephalogram	Sx	Symptoms
EF	Ejection fraction	TIA	Transient ischemic attack
EGD	Esophagogastroduodenoscopy	TIR	Temporary Insurance Receipt
EKG/ECG	Electrocardiogram	TM	Exercise treadmill test
ER	Emergency room Exercise treadmill test	UGI URI	Upper gastrointestinal x-ray series
ETT FBS	Fasting blood sugar	UTI	Upper respiratory infection Urinary tract infection
GAD	Generalized Anxiety Disorder	VFR	Visual Flight Rating
GAD	Gastro-esophageal Reflux Disease	VFR	Ventral septal defect
GFR	Glomerular Filtration Rate	WNL	Within normal limits
SIN		VVIVL	

For more information please contact:

www.inglifeinsurance.com

Life insurance products are issued by ReliaStar Life Insurance Company (Minneapolis, MN), ReliaStar Life Insurance Company of New York (Woodbury, NY) and Security Life of Denver Insurance Company (Denver, CO). Within the state of New York, only ReliaStar Life Insurance Company of New York is admitted, and its products issued. All are members of the ING family of companies.

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NOL FDIC/NCOA Insureu	NOLA DEPOSIL ULA DARK	NOL DARK GUARARIEEU	VOL IVIAY LOSE VAIUE	Not insured by Any rederal dovernment Agency



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