

SimpleProtect overview

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SimpleProtect overview

Technical Guidelines & Information

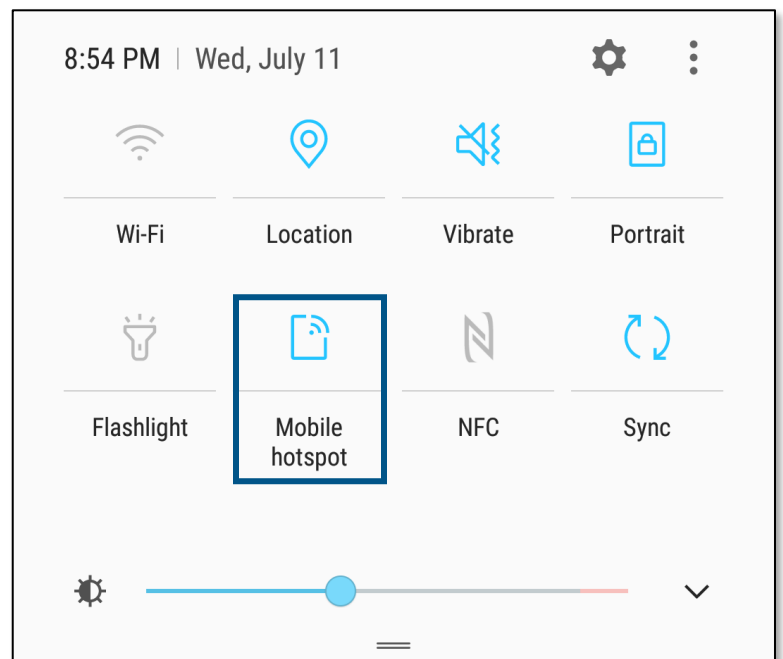
To have the best SimpleProtect experience, follow these technical guidelines

- Use the current version of **Google Chrome** as your default browser

Note: SimpleProtect auto-saves regularly, so if you ever lose your Internet connection, your application will be saved



- If you are outside of the office and no public hotspot or Wi-Fi is available, you may be able to connect your laptop to the Internet using your mobile or other hotspot device:
 - Use your **smartphone** as a mobile hotspot if your data plan allows tethering
 - Use a **personal hot spot device** with a data plan
 - Laptops or tablets with a USB port can use **external wireless devices** with a data plan



SimpleProtect overview

SimpleProtect Home

You can access SimpleProtect from the New Business application for insurance home page

① Before starting any applications, review your NB application **preferences** and make sure your **email address** and **compensation ID** are correct

- If you have not updated your preferences, you will be prompted to do so on login

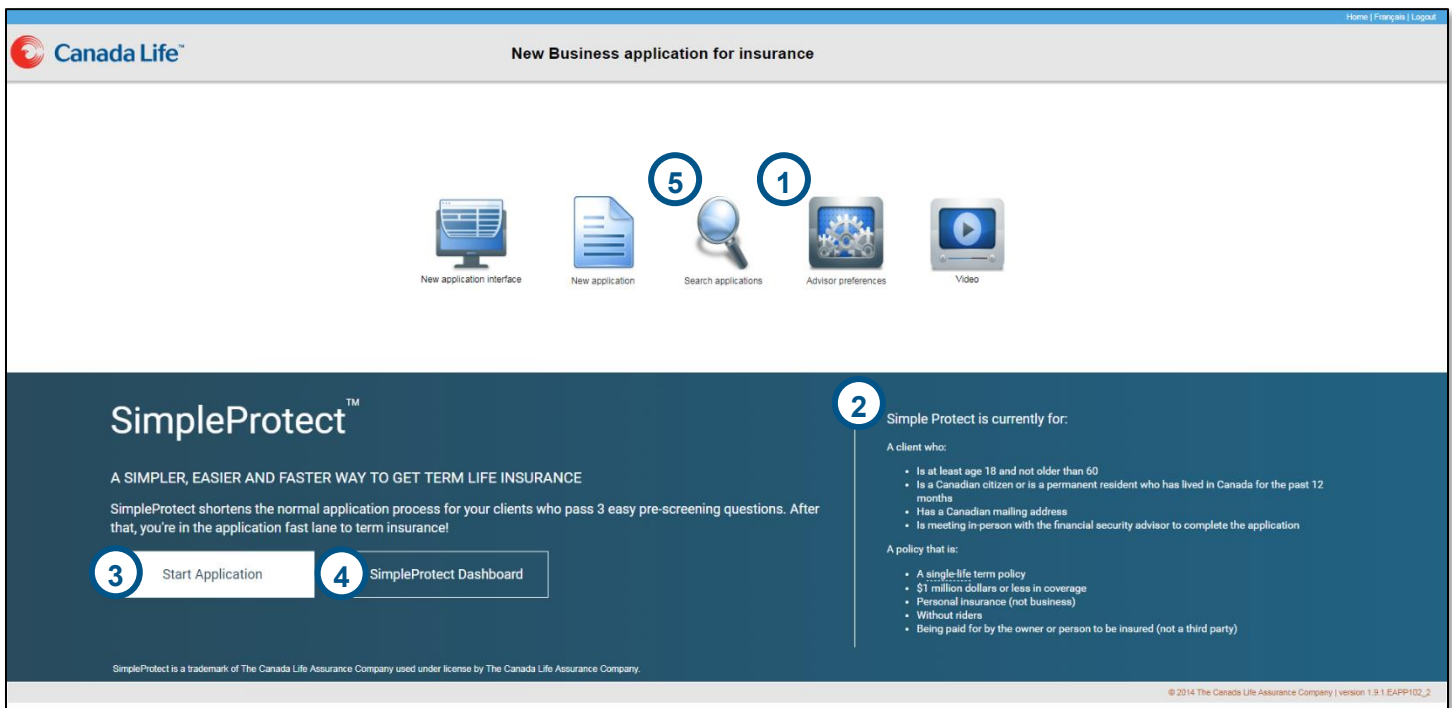
Note: Notifications for SimpleProtect will be sent to the email address selected to receive a **Copy of Insurance application summary**

② Determine if a client will be **eligible** for SimpleProtect by reviewing the **eligibility criteria**

③ Select **Start application** to begin the application process

④ Find, review and submit incomplete apps from the **SimpleProtect dashboard**

⑤ Review and check the status of submitted applications using the **Search applications** feature



Canada Life™

New Business application for insurance

Home | Français | Logout

New application interface

New application

⑤ Search applications

① Advisor preferences

Video

SimpleProtect™

A SIMPLER, EASIER AND FASTER WAY TO GET TERM LIFE INSURANCE

SimpleProtect shortens the normal application process for your clients who pass 3 easy pre-screening questions. After that, you're in the application fast lane to term insurance!

③ Start Application

④ SimpleProtect Dashboard

② Simple Protect is currently for:

A client who:

- Is at least age 18 and not older than 60
- Is a Canadian citizen or is a permanent resident who has lived in Canada for the past 12 months
- Has a Canadian mailing address
- Is meeting in-person with the financial security advisor to complete the application

A policy that is:

- A single-life term policy
- \$1 million dollars or less in coverage
- Personal insurance (not business)
- Without riders
- Being paid for by the owner or person to be insured (not a third party)

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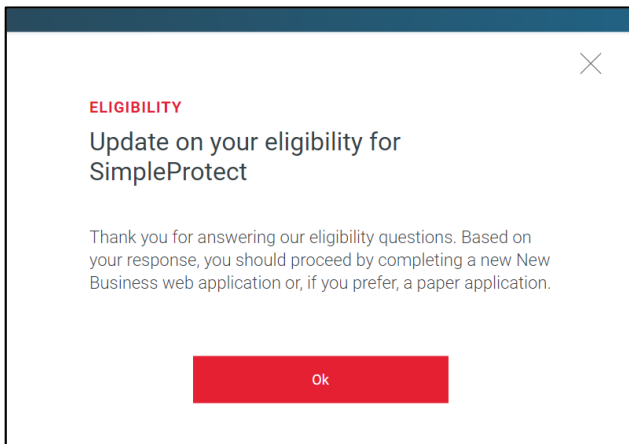
SimpleProtect overview

Eligibility

Answering the four questions on this screen will determine if the client is eligible for the SimpleProtect application process

1 The application is locked until the client answers the eligibility questions

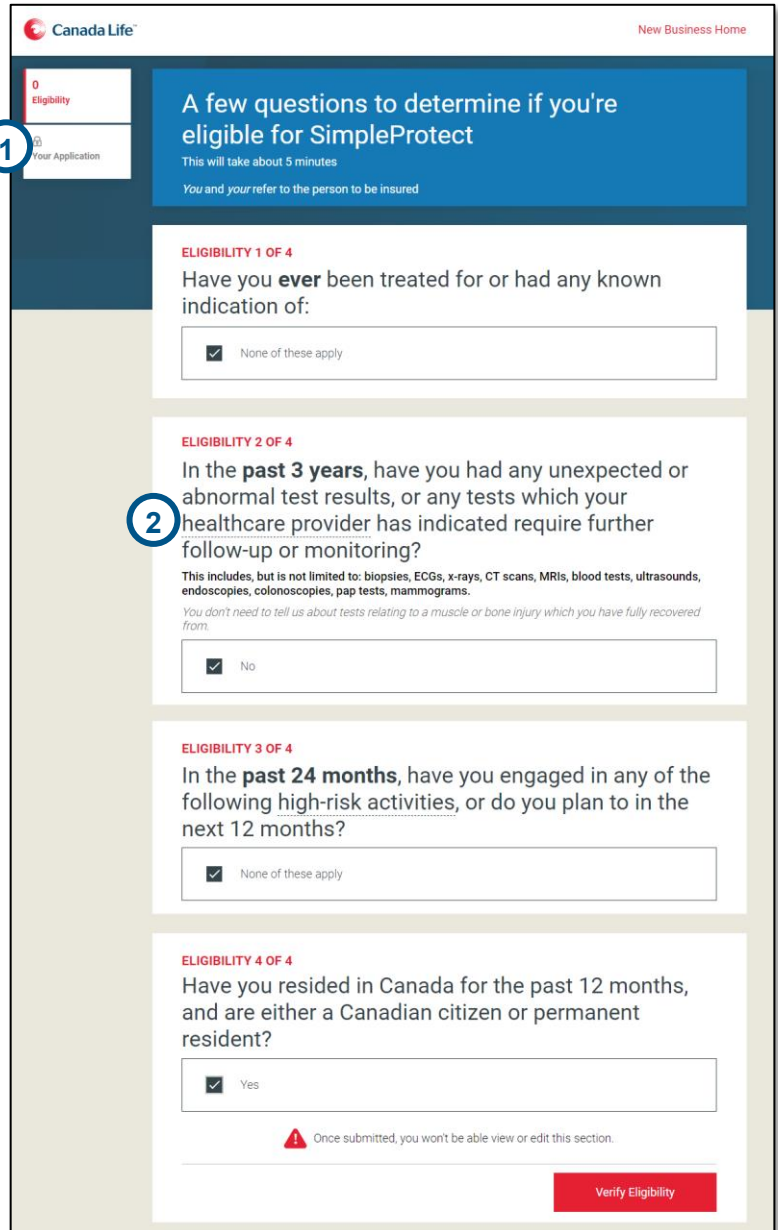
- If there is a problem with any of the eligibility questions, switch to using either a web or paper application



2 Selecting the underlined text will display **contextual help**, which provides underwriting information for you to reference

Healthcare providers include doctors, specialists, clinics, nurses, therapists, naturopaths etc., or anyone the person to be insured has consulted for a medical or health-related reason.

healthcare provider



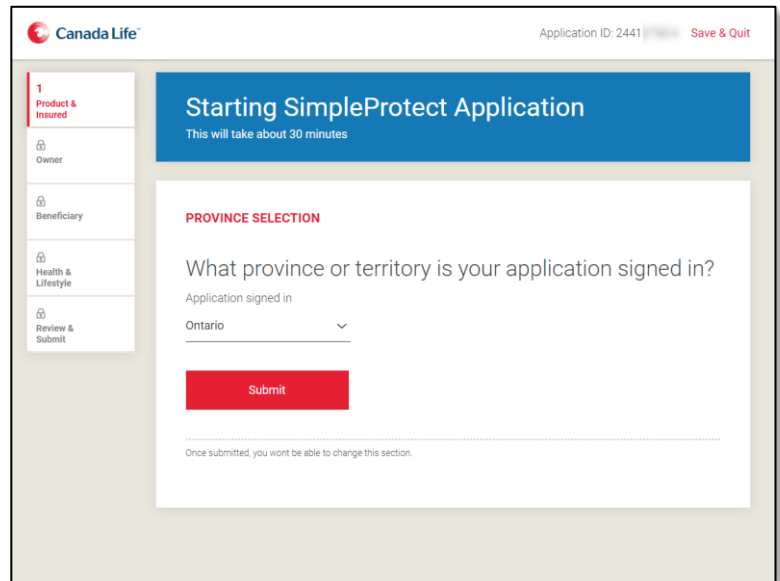
SimpleProtect overview

Product & Insured – Province selection

Select the province or territory the application is being signed in

- Selecting the province or territory that the application is signed in will determine proper disclaimers and if a Life Insurance Replacement Declaration (LIRD) and / or written analysis will be required if the application is replacing an existing policy
 - The LIRD and / or written analysis only displays if it is a requirement for that province or territory

Note: If the policy is being signed in Quebec, the **Notice of Replacement of Insurance of Persons Contract** will not be imbedded within SimpleProtect and will need to be completed and submitted externally



The screenshot shows the Canada Life SimpleProtect application interface. The top navigation bar includes the Canada Life logo, the text "Application ID: 2441", and a "Save & Quit" button. A sidebar on the left contains a progress indicator with four steps: "1 Product & Insured" (highlighted), "Owner", "Beneficiary", and "Health & Lifestyle", followed by "Review & Submit". The main content area is titled "Starting SimpleProtect Application" and includes the subtext "This will take about 30 minutes". Below this, the section "PROVINCE SELECTION" asks "What province or territory is your application signed in?". A dropdown menu is currently set to "Ontario". A red "Submit" button is positioned below the dropdown. At the bottom of the form, a note states: "Once submitted, you won't be able to change this section."

SimpleProtect overview

Product & Insured

The information collected here is used to calculate a premium quote

- 1 An **application ID** will be generated once the client is considered eligible
- 2 Enter the amount of coverage and type of product the client would like
 - Between \$100,000 up to and including \$1 million
 - Term 10 or Term 20 product
- 3 Selecting the ⓘ will display **contextual help**, which provides underwriting information for your reference

Female

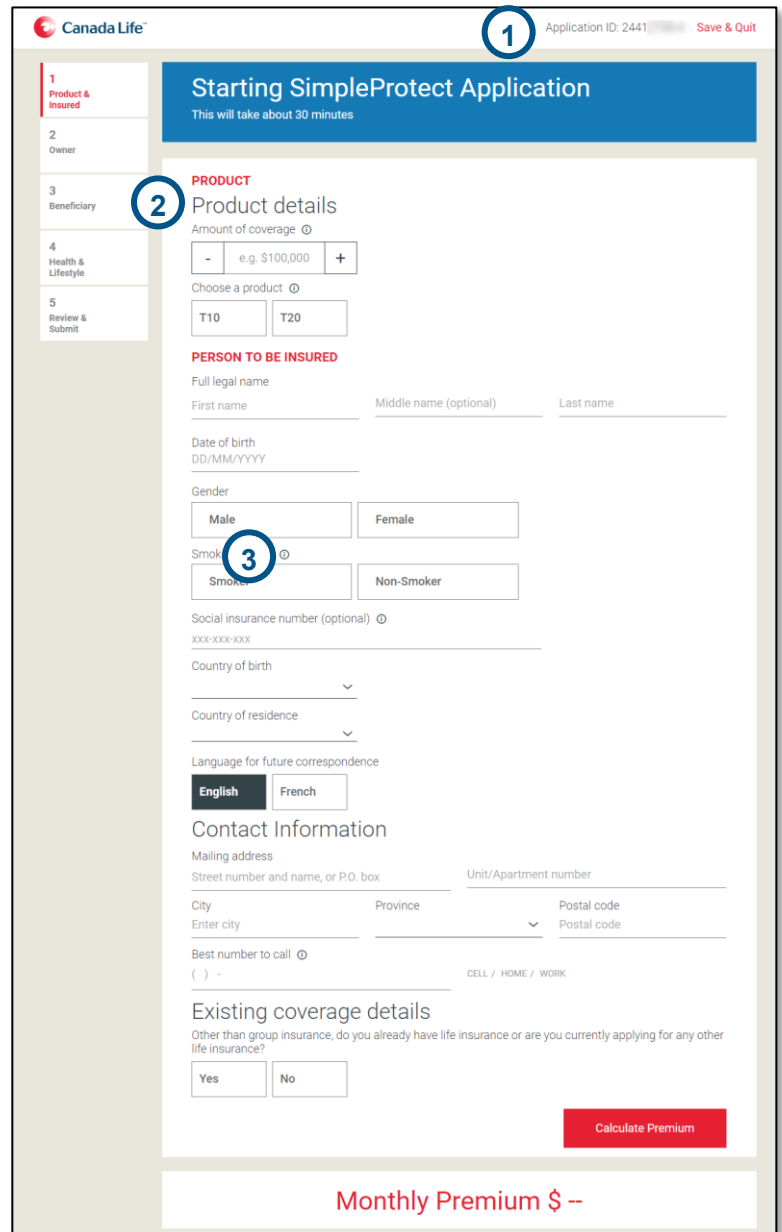
You are considered a non-smoker if in the past 12 months you haven't:

- Used cigarettes, cigarillos, pipes, chewing tobacco, e-cigarettes, hookah, or any form of tobacco
- Smoked more than one cigar per week; or
- Vaped

Non-Smoker

- Once all information is filled in and **Calculate Premium** is selected, the **Monthly Premium** will display for the client

Note: The **Monthly Premium** displayed on this page assumes a **standard rating**




SimpleProtect overview

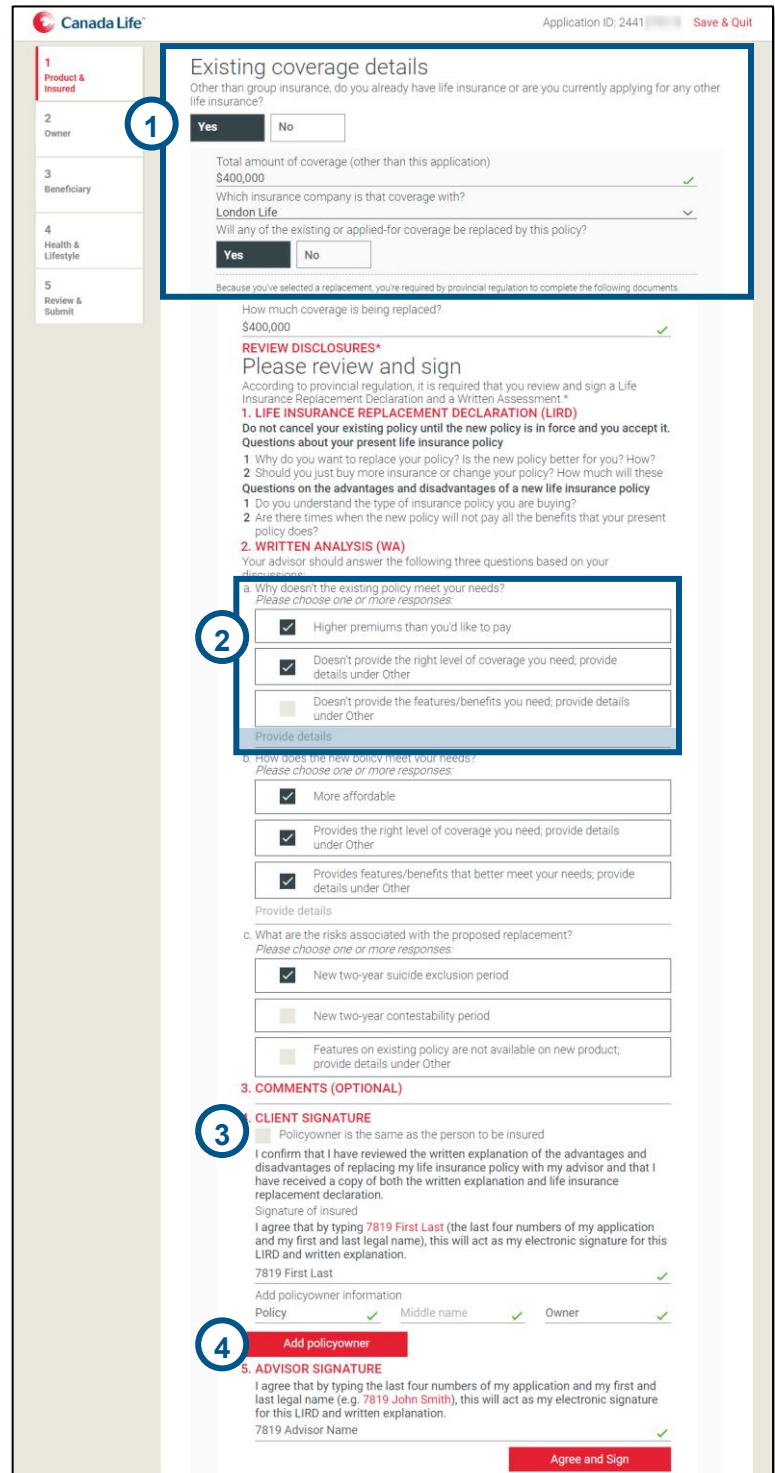
Product & Insured – Replacements

If the client selects 'Yes' to Existing coverage details, complete the remaining fields with replacement information

Note: Remember, a LIRD and / or written analysis will display **only** if it is a **requirement** for the province or territory the application is being signed in

- 1 When completing the written analysis, one or more responses can be selected
 - The options selected may require more details to be provided in a field below the check boxes
- Client and advisor signatures will be required to continue with the application
- 2 If the policyowner is not the same as the person to be insured deselect the checkbox
 - 3 Add the policyowner name into the fields and select **Add policyowner**
 - Both policyowner and insured signatures will be required
 - Selecting **Agree and Sign** will send a copy of the disclosure documents to the email address that has been specified in your **Preferences**
 - Selecting **print documents** will provide a printable version of the disclosure documents. **Popups** must be **enabled** for documents to print

 Disclosure documents signed
 A copy has been sent to _____@_____.com
Print documents (optional, opens in a new window)



Canada Life Application ID: 2441 Save & Quit

1 Existing coverage details
Other than group insurance, do you already have life insurance or are you currently applying for any other life insurance?
 Yes No

Total amount of coverage (other than this application)
\$400,000 ✓

Which insurance company is that coverage with?
London Life ✓

Will any of the existing or applied-for coverage be replaced by this policy?
 Yes No

Because you've selected a replacement, you're required by provincial regulation to complete the following documents.

How much coverage is being replaced?
\$400,000 ✓

REVIEW DISCLOSURES*
Please review and sign
According to provincial regulation, it is required that you review and sign a Life Insurance Replacement Declaration and a Written Assessment *

1. LIFE INSURANCE REPLACEMENT DECLARATION (LIRD)
Do not cancel your existing policy until the new policy is in force and you accept it.
Questions about your present life insurance policy
 1 Why do you want to replace your policy? Is the new policy better for you? How?
 2 Should you just buy more insurance or change your policy? How much will these
Questions on the advantages and disadvantages of a new life insurance policy
 1 Do you understand the type of insurance policy you are buying?
 2 Are there times when the new policy will not pay all the benefits that your present policy does?

2. WRITTEN ANALYSIS (WA)
Your advisor should answer the following three questions based on your **disclosure**.

a. Why doesn't the existing policy meet your needs?
Please choose one or more responses:

Higher premiums than you'd like to pay

Doesn't provide the right level of coverage you need; provide details under Other

Doesn't provide the features/benefits you need; provide details under Other

Provide details

b. How does the new policy meet your needs?
Please choose one or more responses:

More affordable

Provides the right level of coverage you need; provide details under Other

Provides features/benefits that better meet your needs; provide details under Other

Provide details

c. What are the risks associated with the proposed replacement?
Please choose one or more responses:

New two-year suicide exclusion period

New two-year contestability period

Features on existing policy are not available on new product; provide details under Other

3. COMMENTS (OPTIONAL)

CLIENT SIGNATURE
 Policyowner is the same as the person to be insured
 I confirm that I have reviewed the written explanation of the advantages and disadvantages of replacing my life insurance policy with my advisor and that I have received a copy of both the written explanation and life insurance replacement declaration.
 Signature of insured
 I agree that by typing 7819 First Last (the last four numbers of my application and my first and last legal name), this will act as my electronic signature for this LIRD and written explanation.
 7819 First Last ✓

Add policyowner information
 Policy ✓ Middle name ✓ Owner ✓

4 Add policyowner

5. ADVISOR SIGNATURE
I agree that by typing the last four numbers of my application and my first and last legal name (e.g. 7819 John Smith), this will act as my electronic signature for this LIRD and written explanation.
 7819 Advisor Name ✓

Agree and Sign

SimpleProtect overview

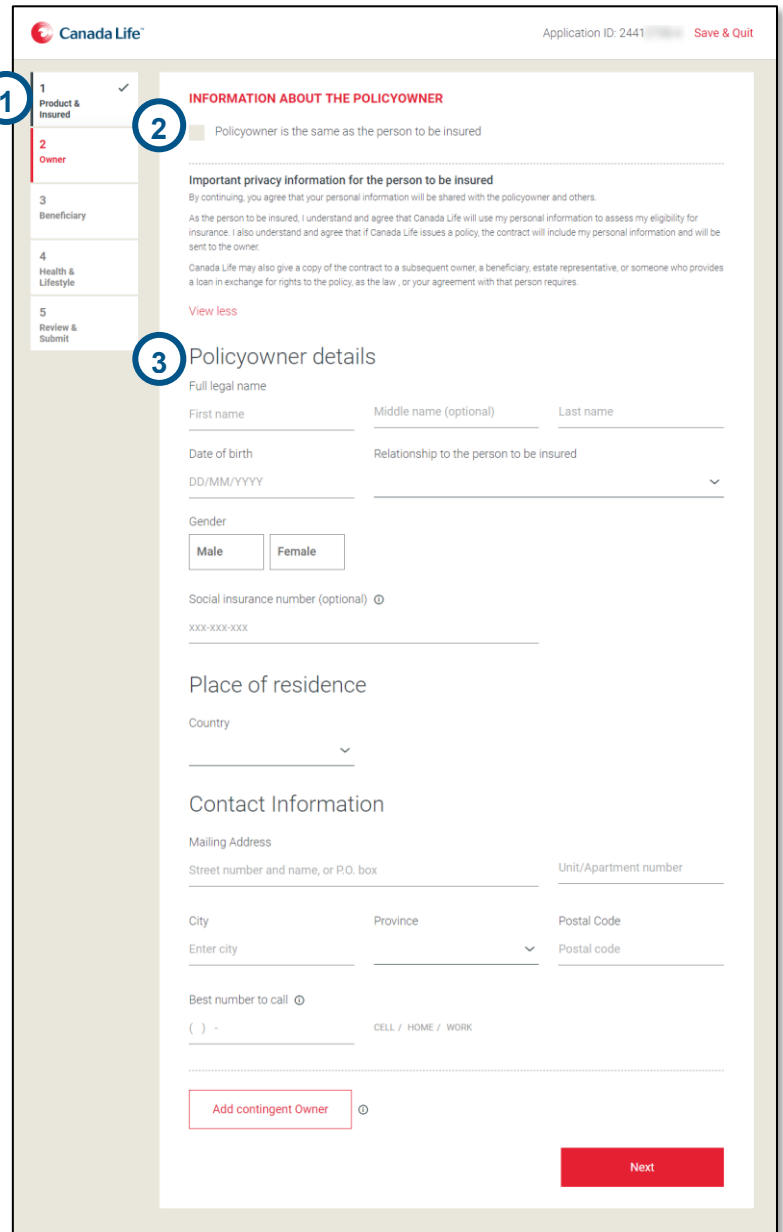
Owner

Identify if the policy owner is the same as the person to be insured

- 1 As each screen is completed a **check mark** will display in the navigation menu indicating the status

Note: The **navigation menu** can be used to easily **'jump'** forward and back in the application (Sections 1-4)

- 2 The default selection is **'Policyowner is the same as the person to be insured'** since this is the case for most of applications
- 3 If the policy owner is different, de-select the check box and complete the required fields



Canada Life Application ID: 2441 Save & Quit

1 Product & Insured ✓

2 Owner

3 Beneficiary

4 Health & Lifestyle

5 Review & Submit

INFORMATION ABOUT THE POLICYOWNER

Policyowner is the same as the person to be insured

Important privacy information for the person to be insured
By continuing, you agree that your personal information will be shared with the policyowner and others.
As the person to be insured, I understand and agree that Canada Life will use my personal information to assess my eligibility for insurance. I also understand and agree that if Canada Life issues a policy, the contract will include my personal information and will be sent to the owner.
Canada Life may also give a copy of the contract to a subsequent owner, a beneficiary, estate representative, or someone who provides a loan in exchange for rights to the policy, as the law, or your agreement with that person requires.
[View less](#)

3 Policyowner details

Full legal name
First name _____ Middle name (optional) _____ Last name _____

Date of birth _____ Relationship to the person to be insured _____
DD/MM/YYYY

Gender
 Male Female

Social insurance number (optional) ⓘ
xxx-xxx-xxxx

Place of residence
Country _____

Contact Information

Mailing Address
Street number and name, or P.O. box _____ Unit/Apartment number _____

City _____ Province _____ Postal Code _____
Enter city _____ Postal code _____

Best number to call ⓘ
() - _____ CELL / HOME / WORK _____

[Add contingent Owner](#) ⓘ

Next

SimpleProtect overview

Beneficiary

Add up to 5 primary and 5 contingent beneficiaries

1 When entering beneficiary age or date of birth, the application will display an option to add a trustee if they are a minor (under the age of 18)

2 A **Special Designation** option is available if the number of primary and / or contingent beneficiaries exceeds five or if you need to enter special instructions

- If selected, manually enter beneficiary requirements in the **Special Designation instructions** field

INFORMATION ABOUT BENEFICIARIES

The policyowner can add up to 5 primary and 5 contingent beneficiaries in the beneficiary instructions that are provided below. To add more beneficiaries or to provide different instructions than what we have provided (ex., if you have a trust), please use [Special Designation](#)

Special designation instructions:

Names, dates, ages, relationship, etc.

In using the Special designation option, we will pay the death benefit according to your designation and subject to applicable law

How this works

Use this form to provide different instructions for naming primary and contingent beneficiaries, as well as trustees for minor beneficiaries as needed.

Be sure to provide all details: full names, dates of birth or ages, relationship to the person being insured, and detailed instructions on how to pay any death benefit.

If the owner names an estate or another entity (like a charity or a corporation) as a primary beneficiary, it may not be possible for contingent beneficiaries to ever become entitled to payment.

- The use of **Special Designation** requires underwriting review; in these instances, the application is no longer eligible for instant approval

Application ID: 2441 Save & Quit

1 Product & Insured ✓

2 Owner ✓

3 Beneficiary

4 Health & Lifestyle

5 Review & Submit

INFORMATION ABOUT BENEFICIARIES

The policyowner can add up to 5 primary and 5 contingent beneficiaries in the beneficiary instructions that are provided below. To add more beneficiaries or to provide different instructions than what we have provided (ex., if you have a trust), please use [Special Designation](#)

Primary beneficiaries
Name up to 5 primary beneficiaries

Primary beneficiary 1

Person ⌵

Beneficiary type ⊙

Revocable Irrevocable

Full legal name

First name	Middle name (optional)	Last name

Date of birth (optional) Age Email address (optional) ⊙

09/09/2014 4

Relationship to the person to be insured ⌵

Percentage to be paid

%

+ Add beneficiary

Contingent beneficiaries
Name up to 5 contingent beneficiaries. By using this section, the contingent beneficiaries named would replace the primary beneficiaries only if ALL primary beneficiaries do not survive the person to be insured.

+ Add contingent beneficiary

You have minors as beneficiaries

If a beneficiary is a minor when a death benefit is paid, the owner may name a trustee to receive the payment in trust on behalf of the minor beneficiary. Use the space below to appoint one trustee for all minor beneficiaries named in this section.

1 + Add trustee ⊙

How we pay death benefits

If a primary beneficiary does not survive the person being insured, then the deceased's beneficiary's share will be allocated equally between the surviving primary beneficiaries. This happens whether you made equal or unequal allocations of the death benefit to surviving primary beneficiaries.

If there are no surviving primary beneficiaries, the benefit will be paid to any contingent beneficiaries you name, or, if no contingent beneficiaries were named, to the policyowner or to the policyowner's estate.

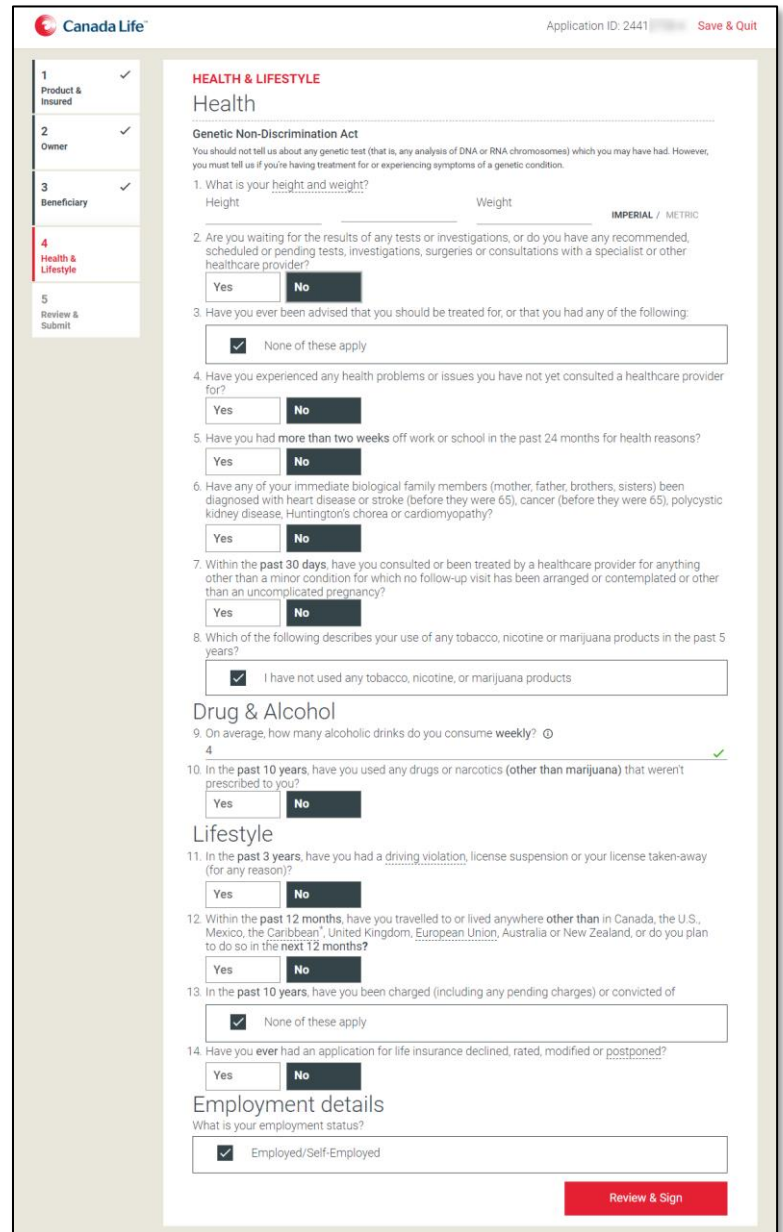
Next

SimpleProtect overview

Health & Lifestyle

This screen consists of 15 insurability questions focused on health and lifestyle

- Additional questions may be asked based on how a question is answered. At most, there will be two additional question levels:
 - Additional information about the initial question being asked (e.g. family history)
 - Contact information for family doctor



The screenshot shows the 'HEALTH & LIFESTYLE' section of the SimpleProtect application. The interface includes a progress bar on the left with five steps: 1. Product & Insured, 2. Owner, 3. Beneficiary, 4. Health & Lifestyle (current step), and 5. Review & Submit. The main content area is titled 'HEALTH & LIFESTYLE' and 'Health'. It contains a 'Genetic Non-Discrimination Act' section with a disclaimer and a question about genetic tests. Below this are several questions with 'Yes' and 'No' radio buttons, including questions about waiting for test results, family history of heart disease, and tobacco use. A 'Drug & Alcohol' section asks about alcohol consumption and drug use. A 'Lifestyle' section asks about driving violations and travel. An 'Employment details' section asks for the user's employment status. A 'Review & Sign' button is located at the bottom right of the form.

SimpleProtect overview

Review & Submit – Surrender Form Eligibility

If the client is replacing a Canada Life policy, determine if they are eligible to complete the surrender form in the SimpleProtect application

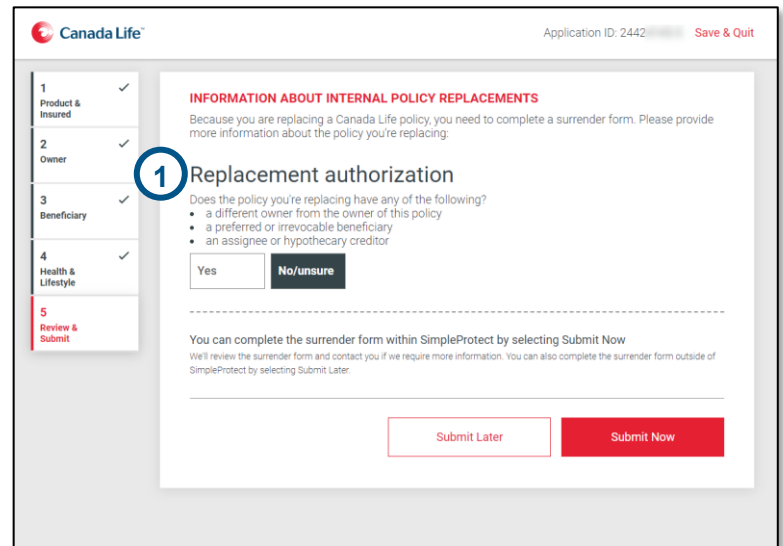
- 1 Review the replacement authorization information to determine if a surrender form can be completed in SimpleProtect

Note: The surrender form will have to be completed and submitted externally if the policy being replaced has any of the following:

- A different owner from the owner of the policy
- A preferred or Irrevocable beneficiary
- An assignee or hypothecary creditor

- If the client is eligible to complete the surrender form in SimpleProtect, select **Submit Now**

Note: If the client is eligible to complete the surrender form in SimpleProtect, but would like to complete and submit it externally, select **Submit Later**. This may increase the time to process the



Canada Life™ Application ID: 2442 Save & Quit

1 Product & Insured ✓
2 Owner ✓
3 Beneficiary ✓
4 Health & Lifestyle ✓
5 Review & Submit

1 Replacement authorization

INFORMATION ABOUT INTERNAL POLICY REPLACEMENTS
Because you are replacing a Canada Life policy, you need to complete a surrender form. Please provide more information about the policy you're replacing.

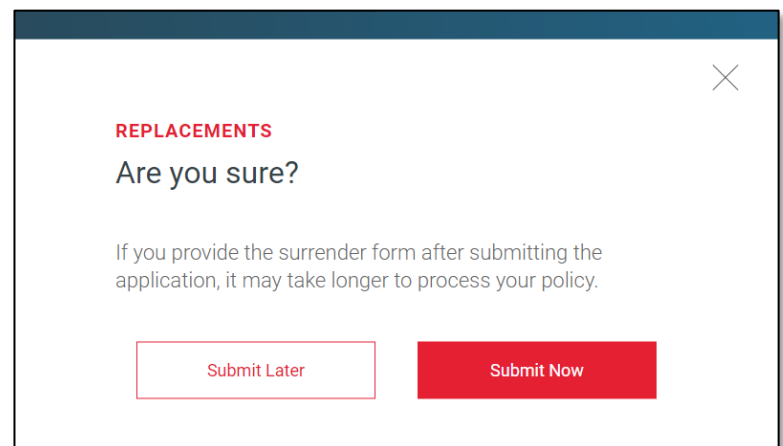
Does the policy you're replacing have any of the following?

- a different owner from the owner of this policy
- a preferred or irrevocable beneficiary
- an assignee or hypothecary creditor

Yes No/unsure

You can complete the surrender form within SimpleProtect by selecting **Submit Now**. We'll review the surrender form and contact you if we require more information. You can also complete the surrender form outside of SimpleProtect by selecting **Submit Later**.

Submit Later Submit Now



REPLACEMENTS

Are you sure?

If you provide the surrender form after submitting the application, it may take longer to process your policy.

Submit Later Submit Now

SimpleProtect overview

Review & Submit – Surrender Form

Complete and sign the Authorization to transfer funds/replace existing insurance

① Enter the policy numbers that are being transferred/replaced

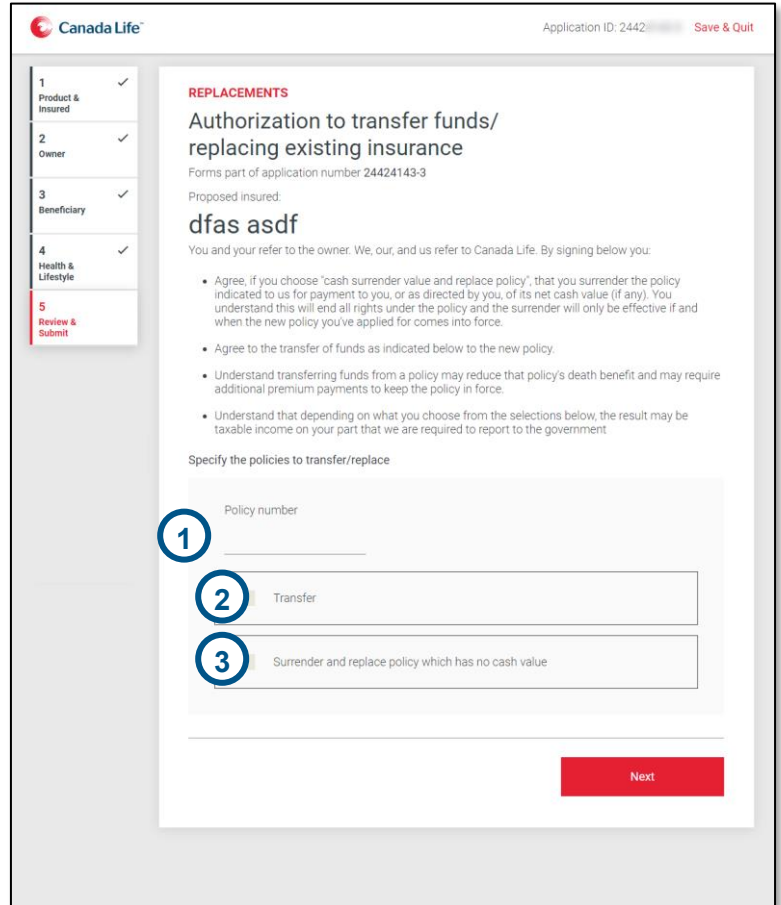
- Select if the client would like to **transfer** the existing policy or **surrender and replace a policy which has no cash value**

② If the client is **transferring a policy**, specify the type of transfer:

- Cash surrender and replace policy
- Accumulated dividends
- Paid-up additions

③ If the client is **surrendering and replacing a policy which has no cash value**, specify if they will be **replacing the entire policy** or a **term rider only**

- The policy owner will be required to provide their signature to complete the surrender form once all selections have been made



The screenshot shows the 'REPLACEMENTS' section of a Canada Life form. The title is 'Authorization to transfer funds/replacing existing insurance'. It includes a sidebar with a progress indicator showing steps 1 through 5, with step 5 'Review & Submit' highlighted. The main content area contains the following text and form elements:

- Application ID: 2442 (with a 'Save & Quit' link)
- Section title: **REPLACEMENTS**
- Section title: **Authorization to transfer funds/replacing existing insurance**
- Text: Forms part of application number 24424143-3
- Text: Proposed insured: **dfas asdf**
- Text: You and your refer to the owner. We, our, and us refer to Canada Life. By signing below you:
 - Agree, if you choose "cash surrender value and replace policy", that you surrender the policy indicated to us for payment to you, or as directed by you, of its net cash value (if any). You understand this will end all rights under the policy and the surrender will only be effective if and when the new policy you've applied for comes into force.
 - Agree to the transfer of funds as indicated below to the new policy.
 - Understand transferring funds from a policy may reduce that policy's death benefit and may require additional premium payments to keep the policy in force.
 - Understand that depending on what you choose from the selections below, the result may be taxable income on your part that we are required to report to the government.
- Text: Specify the policies to transfer/replace
- Form field: Policy number (with a circled 1 next to it)
- Form field: Transfer (with a circled 2 next to it)
- Form field: Surrender and replace policy which has no cash value (with a circled 3 next to it)
- Red 'Next' button

SimpleProtect overview

Review & Submit

Provides the client an opportunity to review the application prior to submitting

- If any errors are spotted, you can ‘**jump**’ back to the appropriate section using the **navigation menu** and make corrections

1 **Note:** While you can ‘**jump**’ to sections to add information or make changes, you always need to go back to the **Health & Lifestyle** screen and select **Review & Sign** to proceed with the application

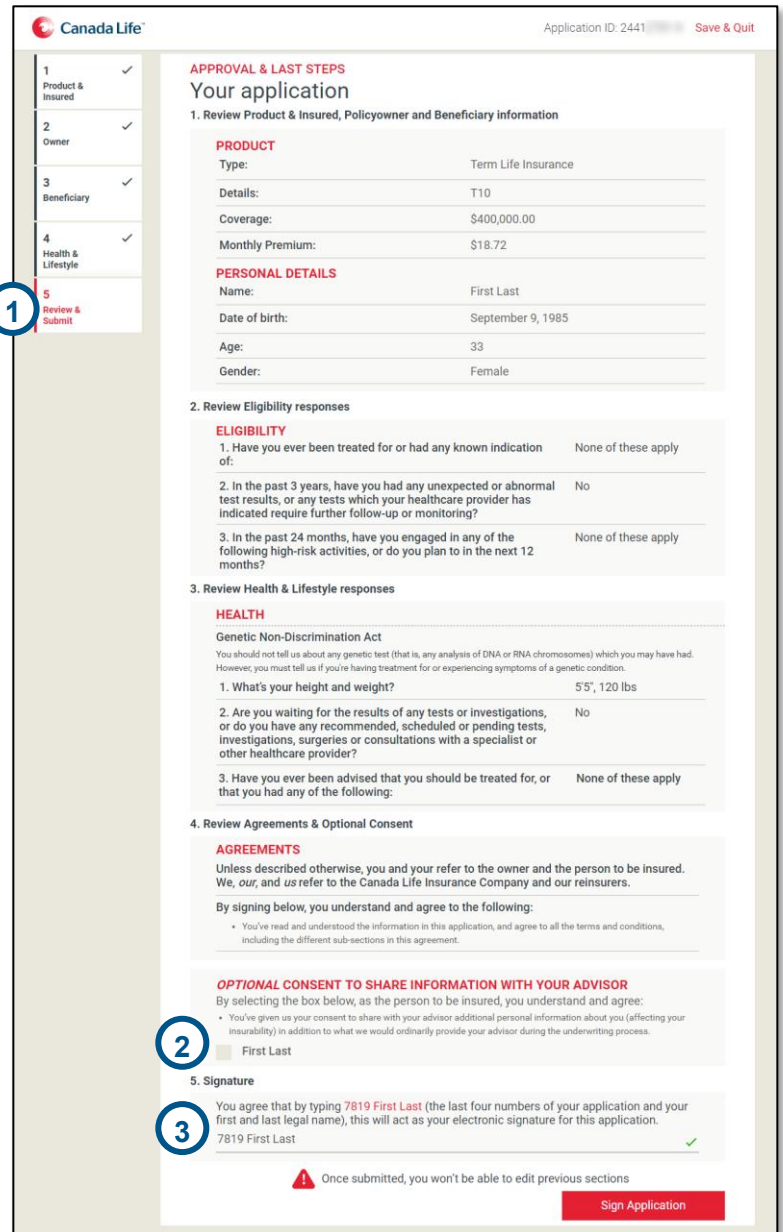
- If a client makes changes, you need to confirm the changes do not impact the insurability of the application

2 The client can select **Optional Consent**, to allow additional personal information to be shared with the advisor

3 The owner of the application will provide their **e-signature** by typing in the unique code provided, followed by first and last name

- If the owner of the application is not the same as the insured (as specified in Section 2), The insured’s signature will also be required

- Once an e-signature is confirmed, the application is formally submitted and **no further changes can be made**



Canada Life Application ID: 2441 Save & Quit

APPROVAL & LAST STEPS
Your application

1. Review Product & Insured, Policyowner and Beneficiary information

PRODUCT

Type: Term Life Insurance

Details: T10

Coverage: \$400,000.00

Monthly Premium: \$18.72

PERSONAL DETAILS

Name: First Last

Date of birth: September 9, 1985

Age: 33

Gender: Female

2. Review Eligibility responses

ELIGIBILITY

1. Have you ever been treated for or had any known indication of: None of these apply

2. In the past 3 years, have you had any unexpected or abnormal test results, or any tests which your healthcare provider has indicated require further follow-up or monitoring? No

3. In the past 24 months, have you engaged in any of the following high-risk activities, or do you plan to in the next 12 months? None of these apply

3. Review Health & Lifestyle responses

HEALTH

Genetic Non-Discrimination Act

You should not tell us about any genetic test (that is, any analysis of DNA or RNA chromosomes) which you may have had. However, you must tell us if you're having treatment for or experiencing symptoms of a genetic condition.

1. What's your height and weight? 5'5", 120 lbs

2. Are you waiting for the results of any tests or investigations, or do you have any recommended, scheduled or pending tests, investigations, surgeries or consultations with a specialist or other healthcare provider? No

3. Have you ever been advised that you should be treated for, or that you had any of the following: None of these apply

4. Review Agreements & Optional Consent

AGREEMENTS

Unless described otherwise, you and your refer to the owner and the person to be insured. We, our, and us refer to the Canada Life Insurance Company and our reinsurers.

By signing below, you understand and agree to the following:

- You've read and understood the information in this application, and agree to all the terms and conditions, including the different sub-sections in this agreement.

OPTIONAL CONSENT TO SHARE INFORMATION WITH YOUR ADVISOR

By selecting the box below, as the person to be insured, you understand and agree:

- You've given us your consent to share with your advisor additional personal information about you (affecting your insurability) in addition to what we would ordinarily provide your advisor during the underwriting process.

2 First Last

5. Signature

3 You agree that by typing 7819 First Last (the last four numbers of your application and your first and last legal name), this will act as your electronic signature for this application.

7819 First Last

⚠ Once submitted, you won't be able to edit previous sections

Sign Application

SimpleProtect overview

Advisor Information

Complete the Advisor Information screen

- This report is required to determine eligibility for instant approval

Note: To let Head Office know you have concerns and would like to talk confidentially about an application, leave the following option blank when you submit the application:

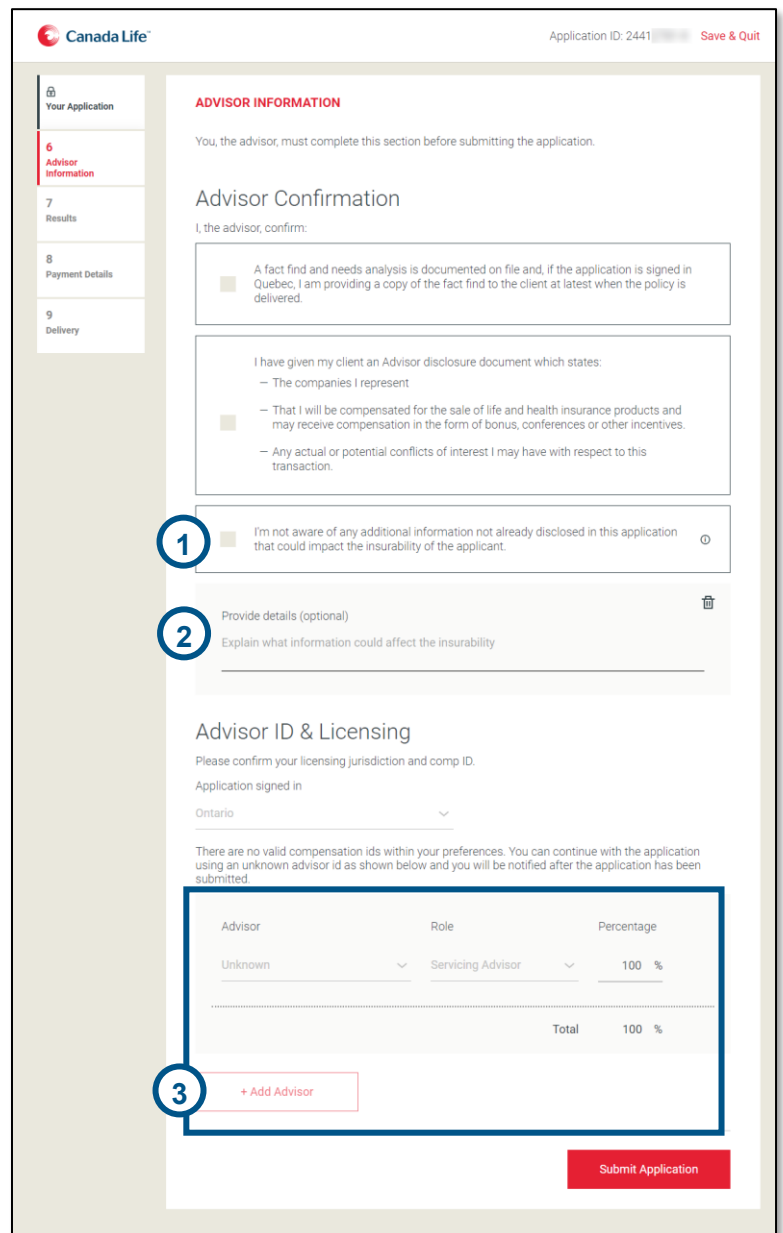
1 I'm not aware of any additional information not already disclosed in this application that could impact the insurability of the applicant

2 You may also provide details in the **Add Comments** section

In this case, the app will no longer be eligible for instant approval and Head Office will follow up with you

3 Compensation can be split between advisors using the **Add Advisor** option

Note: To split commission with another advisor, their compensation ID must first be set up in **your** Advisor preferences so it will be visible in the drop-down list



ADVISOR INFORMATION

You, the advisor, must complete this section before submitting the application.

Advisor Confirmation

I, the advisor, confirm:

A fact find and needs analysis is documented on file and, if the application is signed in Quebec, I am providing a copy of the fact find to the client at latest when the policy is delivered.

I have given my client an Advisor disclosure document which states:

- The companies I represent
- That I will be compensated for the sale of life and health insurance products and may receive compensation in the form of bonus, conferences or other incentives.
- Any actual or potential conflicts of interest I may have with respect to this transaction.

1 I'm not aware of any additional information not already disclosed in this application that could impact the insurability of the applicant.

2 Provide details (optional)
Explain what information could affect the insurability

Advisor ID & Licensing

Please confirm your licensing jurisdiction and comp ID.

Application signed in
Ontario

There are no valid compensation ids within your preferences. You can continue with the application using an unknown advisor id as shown below and you will be notified after the application has been submitted.

Advisor	Role	Percentage
Unknown	Servicing Advisor	100 %
Total		100 %

3 + Add Advisor

Submit Application

SimpleProtect overview

Results

After submitting the application, review the results with the client

- One of three paths will be assigned:

1. Approved

1 **Note:** If the applicant is approved with preferred pricing, it will be displayed on the Results page

2. Additional medical evidence for age & amount

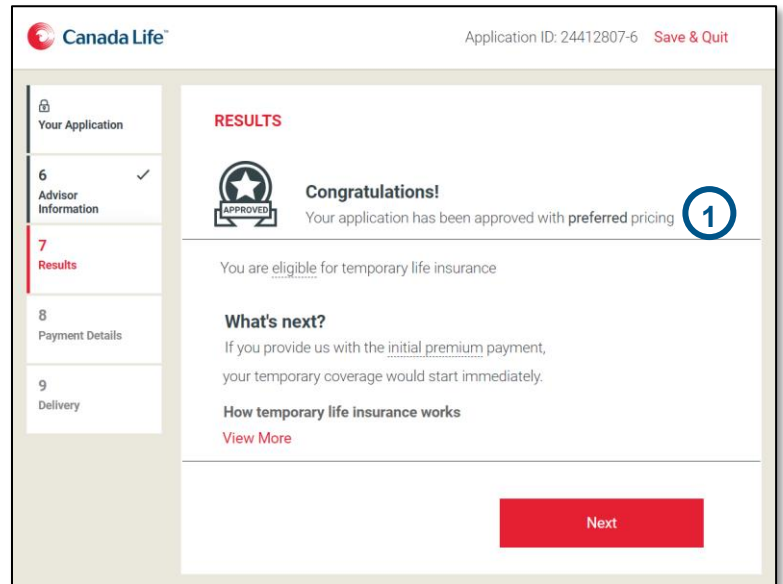
- Two options are available:
 - Head office to arrange tests
 - Use existing evidence on file from an existing policy
- Head office will communicate results to advisor
- Follow up with the client once a decision has been made

3. Need underwriter review

- Head office will communicate results to advisor
- Follow up with the client once a decision has been made

- If a client is **TIA eligible**, a description is provided before asking for payment
- If the client is not TIA eligible, SimpleProtect will display

Note: TIA is only available if the client makes the **full annual payment** or the **monthly payment**



Note: There may be situations where the application will require both underwriter review and medical evidence for age and amount

SimpleProtect overview

Payment Details

Obtain payment information from the client

1 **Note:** If the application is approved with **preferred pricing**, the standard premium that was initially calculated will be crossed out and the preferred pricing will be displayed in bold

- For **initial payment**, the client can choose one of three methods:
 1. **Banking information** – Use the [Bank account format listing](#) document on advisor site to properly enter bank information
 2. **Credit card**
 3. **Pay on contract delivery**

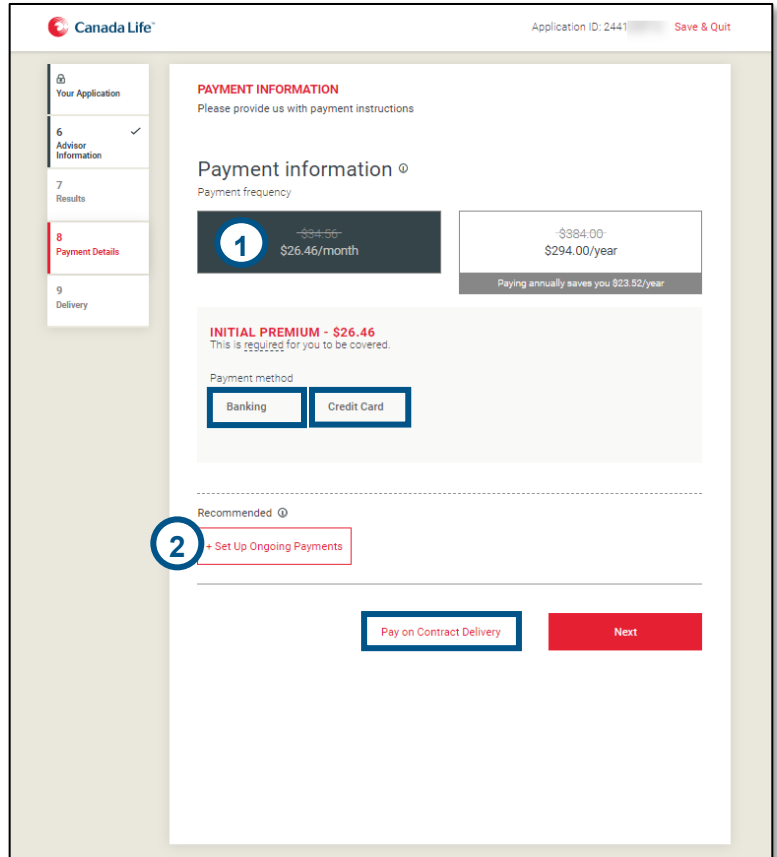
- For ongoing payments:

2 If the client is **paying monthly**, ongoing monthly payments can be set up using **banking information**

Note: A credit card **cannot** be used for ongoing payments

- If the client is paying **annually** they will be sent a notice with billing details in the mail prior to renewal for future payments

Note: The policy must be paid by either the **policy owner** or the **insured**



The screenshot shows the 'PAYMENT INFORMATION' form in the Canada Life system. The sidebar on the left indicates the current step is '8 Payment Details'. The main content area is titled 'PAYMENT INFORMATION' and asks the user to provide payment instructions. Under 'Payment frequency', there are two options: a monthly payment of \$26.46/month (highlighted with a blue circle and '1') and an annual payment of \$294.00/year (crossed out). A note states 'Paying annually saves you \$23.52/year'. Below this, the 'INITIAL PREMIUM - \$26.46' is shown as required for coverage. The 'Payment method' section has two buttons: 'Banking' and 'Credit Card'. A 'Recommended' section contains a button for 'Set Up Ongoing Payments' (highlighted with a blue circle and '2'). At the bottom, there are buttons for 'Pay on Contract Delivery' and 'Next'.

Note: Remember to setup advisor preferences to ensure communications are sent to the correct email address

SimpleProtect overview

Delivery

Based on the results and payment option, review next steps with the client

- SimpleProtect will provide guidance based on the **results** of the application:
- **Payment** can be made with electronic funds transfer (EFT) or credit card or the client can pay when the contract is delivered (COD)
 - If applicable, payment processing will be confirmed
 - If applicable, TIA eligibility will be confirmed and may need to be explained to the client
- **Coverage** start date is based on TIA eligibility if initial payment is provided
 - If applicable, TIA eligibility will be confirmed and may need to be explained to the client
- **Next steps** are based on the results:
 - If medical evidence is required, Head Office will be in touch with the client
 - If underwriting is required, the application will be reviewed as quickly as possible

