

THE UNIVERSITY OF WISCONSIN SYSTEM
ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE (AD&D)
CONTINUATION APPLICATION

RETIRED UW SYSTEM EMPLOYEE
[Policy GTU 8364005]

Campus Benefit Coordinator Complete This Section					
Employee Name (Last, First, MI)					
Address					
City				State	
Zip Code					
Employee Telephone Number		Social Security Number xxx-xx-		Retirement Date (mm/dd/yy)	
1. Amount of Coverage in Force: \$		2. Coverage in Effect: <input type="checkbox"/> Single <input type="checkbox"/> Family		3. Premiums Paid Through Date (mm/dd/yyyy):	
4. Number of months premiums due through October 31:		5. Monthly Premium: \$		6. Total Due (Box 4 X Box 5): \$	
7. Premium must be paid no later than 30 days after coverage termination date:					
Date (mm/dd/yyyy):		Completed By:		Telephone Number:	

Employee: Please Review and Complete This Section									
<p>The Hausmann-Johnson Insurance Company will send a policy renewal notice for coverage effective November 1 and thereafter. Premiums for policy renewal will be due for 12 months (plus an administration fee of \$4.00) and be remitted directly to Hausmann-Johnson. Any change in mailing address should be sent to Hausmann-Johnson at the address listed below. Your signature below indicates you understand that coverage will be reduced according to the schedule below as detailed in the current AD&D policy.</p> <p>The reduction schedule of the Principal Sum after age 70 is:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 30%;">Age 70 through 74:</td> <td>65% of the principal sum provided prior to age 70</td> </tr> <tr> <td>Age 75 through 79:</td> <td>45% of the principal sum provided prior to age 70</td> </tr> <tr> <td>Age 80 through 84:</td> <td>30% of the principal sum provided prior to age 70</td> </tr> <tr> <td>Age 85 and over:</td> <td>15% of the principal sum provided prior to age 70</td> </tr> </table> <p>NOTE: Effective 11/1/03, the only exclusion that applies to retirees is the Total Disability Benefit.</p>		Age 70 through 74:	65% of the principal sum provided prior to age 70	Age 75 through 79:	45% of the principal sum provided prior to age 70	Age 80 through 84:	30% of the principal sum provided prior to age 70	Age 85 and over:	15% of the principal sum provided prior to age 70
Age 70 through 74:	65% of the principal sum provided prior to age 70								
Age 75 through 79:	45% of the principal sum provided prior to age 70								
Age 80 through 84:	30% of the principal sum provided prior to age 70								
Age 85 and over:	15% of the principal sum provided prior to age 70								
Date (mm/dd/yyyy)	Employee Signature								

Submit this continuation form and a personal check or money order in the amount indicated in item #6 above, payable to Hausmann-Johnson Insurance Company. Payment must be remitted by the date indicated in item #7 above.

SEND CHECK/MONEY ORDER AND THIS FORM TO:
HAUSMANN-JOHNSON INSURANCE
 Office of the Comptroller
 PO Box 259408
 Madison, WI 53725-9408
 (608) 257-3795