

DISCLOSURE

NOTICE OF INSURANCE INFORMATION PRACTICES

Thank you for applying to Unum Life Insurance Company of America. As part of our normal underwriting procedure, we need to obtain information to determine an Applicant's eligibility for insurance. Much of that information will come from you; however, we often obtain additional information or verify information through other sources.

Collection

Your application, including the medical questionnaire and any exams, is our main source of information. However, Unum Life Insurance Company of America may need to obtain additional information from other sources about your age, physical condition, occupation, other insurance coverage, and health history.

Unum Life Insurance Company of America may obtain this information from physicians, hospitals, clinics or other medical professionals or medical care facilities. We may collect information in person, by telephone, or by exchanges of correspondence.

Disclosures

Unum Life Insurance Company of America will not disclose to others the information, which we obtain about you without your prior authorization except as necessary to conduct our business (and then only if disclosure is permitted by law).

For example, if necessary, Unum Life Insurance Company of America may disclose information to:

- persons and organizations that perform insurance, or business or professional services for us;
- other insurance companies to which you have applied for coverage or benefits;
- insurance companies, agents, or insurance support organizations to help detect or prevent insurance fraud or misrepresentation;
- a medical professional or facility so it can properly notify you of a medical condition of which you may not be aware;
- our reinsurers;
- insurance departments or commissions in connection with audits or examinations of our company;
- law enforcement agencies to help prevent or prosecute fraud or to alert them that unlawful activity may have occurred; or
- a research or actuarial organization.

These are disclosures that Unum Life Insurance Company of America is permitted to make- not disclosures that we make often. In fact most disclosures made by us are to identify you for collection of information, for reinsurance or other services, or to help detect or prevent fraud and misrepresentation.

Applicant should retain a copy of this page for their records.

Unum is a registered trademark and marketing brand of the Unum Group and its insuring subsidiaries.

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Access to Information

You have a right to recorded personal information about you, which is in Unum Life Insurance Company of America's files and is reasonably locatable. To ensure security of information in our files, we will require positive identification before we allow access to that information. To obtain access to recorded personal information about you, send a signed, written request to the address on the front page of this Application. Give your full name, address, telephone number, and policy number if a policy has been issued.

Within 30 business days after we receive your request, we will inform you of the nature and substance of the information in our files, which is reasonably locatable and retrievable. We will also tell you to whom we have disclosed this information within the last two years. If you wish we can show you the information at our Home Office or we will mail copies to you. However, we reserve the right to disclose medical information only through a medical professional chosen by you. You may have to pay a reasonable charge to cover the cost of the copies.

Correction of Information

If you believe any of Unum Life Insurance Company of America's information is not correct, please notify us and explain why you believe it is inaccurate or incomplete. We will review it. If we agree with you, we will correct the information and notify any person designated by you to whom we have disclosed the information within the preceding two years.

If we disagree with you, we will tell you that we will not make the requested change. Then you may submit to us information and your reasons for disagreeing with our decision not to change the information. We will then furnish your statement to any person designated by you to whom we disclosed the information in the prior two years and to anyone else who may receive the information from us in the future.