

**S.USA LIFE INSURANCE COMPANY, INC.
SBLI USA LIFE INSURANCE COMPANY, INC.**

Fax Application Transmittal Cover Sheet

Important:

- Use this form for **NEW** application submissions.
- Only applications paying the initial premium by bank draft should be faxed.
- DO NOT collect premium with an application that is being faxed.
- All applications submitted with this form must be written by the same agent.
- Please use one transmittal per application.
- Do not mail in applications/forms once you have faxed them, original copies should be maintained in case of fax transmission problems.
- Complete all Agent information in the box below.
- DO NOT fax documents or corrections requested by Underwriting to the number below (2nd applications, replacement forms or other additional documents).

Fax **New applications** and corresponding documents **ONLY** to: 1-855-227-7849

Agent Name: _____	Agent Writing # _____
Phone Number: _____	Fax Number: _____
Total number of pages being faxed (including cover sheet): _____	

Forms sequence:

- ☐ Application
- ☐ Replacement form (if applicable)
- ☐ Other state specific required forms (if applicable)
- ☐ Guaranteed Issue documentation (if applicable)
- ☐ Creditable Coverage documentation (if applicable)
- ☐ Signed bank draft authorization
- ☐ Copy of a voided check or deposit slip on a separate sheet of paper

Applicant First & Last Name	Plan Applied For:	Initial Premium Amount to be drafted

All application questions should be directed to the Underwriting Department at 1-855-228-3771