

CRITICAL PERIOD MORTGAGE PLAN APPLICATION INSTRUCTIONS

How to Complete the Application Starting at the Top:

Creditor – The financial institution to which you make your monthly mortgage payment

Loan Number – Your mortgage loan or account number

Applicant – Fill in your name, birthdate and complete address

Loan Maturity Date –What is your loan term? (examples: 15 years or 30 years)

Joint Applicant – Fill in the name and birthdate, if 2 people are applying for the insurance
(Both people must be named on the mortgage loan)

First Beneficiary – Each applicant should name a first beneficiary. If no beneficiary is named, the benefit proceeds will automatically go to your estate

Second Beneficiary – Each applicant can also name a second beneficiary if desired

Choose single or joint coverage

Insured Monthly Payment – Enter your total monthly mortgage payment

You must answer the 2 health questions and the employment question. If the answer to either health question is “yes” or if the answer to the employment question is “no” you are not eligible for the insurance.

Automated Premium Payment Authorization – your monthly premiums will be deducted from your checking account. Therefore, please send a “voided” check with your application.

Financial Institution – The name of the financial where you have your checking account

Routing Number – First set of 9 numbers at the bottom of your check

Checking Account Number – Second set of numbers at the bottom of your check

Signature(s) and date are required at the bottom of the application

When you have completed and signed the application, please mail to:

**First Service Group, Inc.
Attn: Plan Administrator
303 McKnight Park Drive
Pittsburgh, PA 15237**