

Important Notification: Please Complete and Return

Loan Amount:

County:

Record Date:

SAMPLE

As a “Mortgage Holder” you may qualify to participate in a low cost **No Physical Exam** Mortgage Life & Disability Insurance Plan. A Mortgage Life Plan can protect your loan in case of an unexpected tragedy. **Without a plan, your Family would still have to make the monthly Mortgage Payments.**

Complete and return this form so you can lock in **special low rates** with no physical exam. Depending on your eligibility, your plan benefits may include.

- * **Pays off your mortgage in the event of Death.**
- * **Pays monthly income, directly to you, in the event of Disability.**
- * **Pays funds, directly to you, in the event of Terminal illness.**
- * **Pays a Refund of ALL Premiums at the end of the mortgage.**
- * **Pays your insurance premiums in the event of involuntary unemployment.**

For complete details without cost or obligation, complete this form and **mail** in the **postage paid** envelope. For faster quotes **FAX** this form to **770-792-0326**

Borrower	Co-Borrower/Spouse
Date of Birth: ____/____/____	Date of Birth: ____/____/____
Gender: Male:____ Female:____	Gender: Male:____ Female:____
Tobacco User: Yes:____ No:____	Tabacco User: Yes:____ No:____
Occupation:	Occupation:
Home Phone: ____/____ Work Phone: ____/____ Cell Phone: ____/____	
Best Time to Call:	Person Completing this form:

Thank-you for Taking the Time to read over this notice

Mortgage Protection Services agent’s representing multiple A and A+ carriers provide all coverage information. All products and benefit riders are not available in all states. Information concerning you mortgage is obtained through public records. Not affiliated with or endorsed by any bank or lending institution.