Your TD 20-Year Term Life insurance policy # 123 456 789 is enclosed in this booklet
WELCOME TO TD INSURANCE
Thank You For Choosing TD 20-Year Term Life insurance

Life insurance is the cornerstone of a sound financial plan. With TD 20-Year Term Life insurance, you’ve taken an important step in protecting the financial security of your loved ones, if you were to die.

*Please read your policy carefully to ensure you fully understand the benefits it provides, and keep it in a safe place with your other important documents.*

Please complete the *Beneficiary Designation Form* on the last page of this booklet and return it in the enclosed postage-paid envelope.
Insurance Policy

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Please read your policy carefully and keep it as your permanent record of coverage.
January 1, 2018

Jane Sample
Address
City, PR A1A 1A1

Your TD 20-Year Term Life insurance could provide a valuable tax-free benefit for your family when they need it most

Dear Jane Sample,

Thank you for applying for TD 20-Year Term Life insurance coverage, underwritten by TD Life Insurance Company (a member of the TD Bank Group). By accepting this important coverage, you’ve joined the thousands of TD customers who feel confident that they’ve made a wise financial decision – for themselves, and for the people who depend on them.

Your Insurance Policy, which starts on page 6 of this booklet, describes the benefits of your coverage as well as the exclusions and limitations. Please read it carefully and keep it in a safe place with your valuable papers.

Please review the following documents for accuracy and retain for your records:

- Your Health Question Confirmation responses
- Privacy Agreement

If any of the answers are incorrect or incomplete, contact us immediately at 1-888-788-0839, as this could affect your insurability. Any applicable Endorsements to this policy will be mailed to you separately and will form part of the policy.

Your insurance took effect on January 1, 2018. As you requested your first monthly premium is scheduled to be deducted from your payment account on January 1, 2018 and thereafter on the first of every month.

The benefits from your policy will be paid to the beneficiary you name in the Beneficiary Designation Form on the last page of this booklet. Please complete the Beneficiary Designation Form and mail it to us in the enclosed postage-paid envelope. If no beneficiary is named, the benefits will be paid to your estate.
As long as your premiums are paid when due, your TD 20-Year Term Life insurance will renew automatically for successive 20-year terms, with no medical examination required, providing continuous coverage until your 80th birthday. Premiums are fixed for each 20-year term and are guaranteed not to increase until each renewal date, regardless of your age or changes in your health.

**Coverage can be converted from term life insurance to permanent life insurance** at any time up to and including the policy anniversary nearest the insured’s 69th birthday – again, with no medical examination required.

This convenient and straightforward coverage is also available to your spouse, partner or other family members. Applying is as simple as visiting www.tdinsurance.com or calling the number below.

You have 30 days from the date of this letter to review your policy. During that time, you will be insured as outlined in the policy. If you’re not completely satisfied and wish to cancel coverage, simply contact us within the 30 day period. Any premium charged to your account will be promptly refunded in full.

In this booklet, we have provided answers to some frequently asked questions about term life insurance. If you still have questions, call toll-free 1-888-788-0839, Monday to Friday, 8 a.m. to 10 p.m. (ET) and Saturday 10 a.m. to 6 p.m., (ET), to speak to a TD Insurance representative.

Again, thank you for choosing TD Insurance. We appreciate your business and look forward to serving you and your family.

Sincerely,

Janice Farrell Jones
Head of TD Life and Health Insurance Products
TD Life Insurance Company

*TD Life Insurance Company is the authorized administrator for this insurance. For more details on insurer and/or administrator information, please refer to the Insurance Policy. All trade-marks are the property of their respective owners. ®The TD logo and other TD trade-marks are the property of The Toronto-Dominion Bank.*
Your TD 20-Year Term Life insurance

Underwritten by TD Life Insurance Company (referred to as “the insurer” and “we”, “us” and “our” in this policy).

This Insurance Policy # 123 456 789 is issued to:

Jane Sample
Address
City, PR A1A 1A1

Policy Schedule

<table>
<thead>
<tr>
<th>Insured Person First Name</th>
<th>Jane</th>
</tr>
</thead>
<tbody>
<tr>
<td>Insured Person Last Name</td>
<td>Sample</td>
</tr>
<tr>
<td>Date of Birth of Insured Person</td>
<td>March 21, 1978</td>
</tr>
<tr>
<td>Risk Class</td>
<td>Female/Non-smoker</td>
</tr>
<tr>
<td>Issue Age</td>
<td>38 years old</td>
</tr>
<tr>
<td>Policy Owner First Name</td>
<td>Jane</td>
</tr>
<tr>
<td>Policy Owner Last Name</td>
<td>Sample</td>
</tr>
<tr>
<td>Policy Payor</td>
<td>Jane Sample</td>
</tr>
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<td>Sum Insured</td>
<td>$181,700.00</td>
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<tr>
<td>Effective Date</td>
<td>September 7, 2016</td>
</tr>
<tr>
<td>First Premium Due Date</td>
<td>October 7, 2016</td>
</tr>
<tr>
<td>Premium Payment Frequency</td>
<td>Monthly</td>
</tr>
<tr>
<td>Premium Payment Account Type</td>
<td>Credit Card ending in 1234</td>
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<tr>
<td>Plan</td>
<td>TD 20-Year Term Life insurance</td>
</tr>
<tr>
<td>Waiver of Premiums</td>
<td>Yes</td>
</tr>
</tbody>
</table>
This policy contract ("policy") along with your application questions and answers as well as any other information submitted as evidence of insurability shall form your contract of insurance.

If you keep this policy in effect it can provide coverage to March 21, 2058.
If the insured person dies while this policy is in effect, the insurer will pay the Sum Insured to the beneficiary or your estate if no beneficiary is named.

This is a non-participating policy.

Note: All amounts are stated in Canadian Funds, and taxes are included where applicable.
If you change your mind within 30 days

You have 30 calendar days from the effective date of the original policy in which to review the benefits provided and decide whether or not the coverage suits your needs.

If you decide to discontinue this policy during that period, simply contact us, provided no claim has been made, any premium paid will be promptly refunded and your policy will be cancelled as of your effective date.

All of our obligations and liabilities under this policy will end immediately when we receive your request to cancel the policy.

To cancel your policy, please provide your verbal or written request to:

TD Life Insurance Company, P.O. Box 1, TD Centre; Toronto, Ontario, M5K 1A2.
TD Insurance at 1-888-788-0839.

Definitions of the terms we have used

This policy uses the following terms, which have been listed in italics throughout the document.

Beneficiary means the person or persons you name in writing to receive all benefits under this policy.

Effective Date means the date(s) the policy goes into effect, as shown in the Policy Schedule.

Grace Period is the length of time after the premium is due and unpaid during which the policy remains in effect. If the full premium is paid during the grace period, the premium is considered to have been paid on time.

Lapse refers to the termination of this policy because the premium was not paid within the grace period.

Lapse Date refers to the date the policy lapses.

Insured person is the person whose life is insured under this policy.
Policy means this document which provides evidence of your insurance.

Policy Owner is the person or party who owns this individual insurance policy. The policy owner is not necessarily the person whose life is insured.

Reinstatement is the restoration of a lapsed policy as described in the section, ‘Putting your policy back into effect’.

Reinstatement Date is the date this policy is reinstated as described in the section, ‘Putting your policy back into effect’.

Term Insurance is a type of insurance that provides protection for a limited number of years.

### Eligibility

To be eligible to apply for insurance coverage under this policy, a proposed insured person must, at the time of application:

- Be a Canadian citizen; or
- Have applied for or been granted Permanent Resident (Landed Immigrant) status by the Canadian Government; and
- Be at least 18 years old and within 6 months of the 60th birthday.

### How the death benefit is calculated

If a death benefit is payable under this policy, then we will pay the Sum Insured in effect at the time of death minus any outstanding premiums that are owed at the time the insured person dies.

This policy ends on the date the insured person dies.
When we will not pay an insurance benefit

We will not pay any insurance benefit if:

- The claim for insurance benefits is not made within 365 days of the date of death of the insured person; or

- The insured person dies due to suicide (whether the insured person is aware or not aware of the result of their actions, regardless of their state of mind) within 2 years of the effective date of coverage or the most recent reinstatement date. If no insurance benefit is payable as a result of suicide, then we will pay the policy owner 100% of premiums paid since the effective date or since the most recent reinstatement date if the policy has been reinstated.

Paying for your policy

Premiums for this policy

We will provide you with the benefits described in this policy if you pay the premiums shown in the premium schedule. You must pay all premiums to us by the premium due date.

If you are paying on a monthly basis, the first premium will be due on the First Premium Due Date specified in the Policy Schedule. Each subsequent premium due date will follow one calendar month later.

If you are paying on an annual basis, the first premium will be due on the First Premium Due Date specified in the Policy Schedule. Each subsequent premium due date will follow one year later.

You may be eligible for a premium discount, which if applicable will be applied to your premium payments. If you subsequently become ineligible for a premium discount, we will adjust your premiums accordingly.

Any premium that we have collected that relates to insurance coverage after the date of death of the insured person will be refunded in the same manner as the Sum Insured.

You must notify us if you wish to change the method or frequency of payments.
If premiums are not received

We will allow a grace period of thirty (30) calendar days, during which time this policy will remain in effect even if premiums are not paid by the due date. If a claim becomes payable during the grace period, all outstanding premiums will be deducted from any claim payable. If the outstanding premiums are not paid by the end of the grace period, this policy will lapse.

Putting your policy back into effect

If your policy ended because it lapsed, you may apply to have it put back into effect if the insured person is alive. This process is called reinstatement.

You may apply to us within 2 years of the lapse date to have your policy reinstated. In order to reinstate your policy in that time period, you must meet all of the following criteria:

- The insured person must be alive;
- You must pay us all unpaid premiums due from the lapse date up to and including the reinstatement date;
- You must provide us with a completed Reinstatement Application; and
- You must provide us with new evidence of insurability for the insured person that we consider satisfactory.

Your right to convert to a permanent life insurance policy

At any time, up to and including the policy anniversary nearest to the insured person’s 69th birthday, regardless of the health of the insured person, you may convert the insurance in effect under this policy. The converted insurance will be for an amount not to exceed the Sum Insured (provided on the Policy Schedule) and will be on any permanent plan we make available for such conversion.

To exercise the conversion option, you must complete an application form which we will provide and pay us the first premium required for the converted insurance. The amount of this premium will depend on the age of the insured person at the time the conversion option is exercised, the risk classification used for this policy and the plan of the converted insurance.

The converted policy will not include any waiver of premium benefits that you may have had on this policy.
Making a claim

Before we will pay any claim under this policy, the person making the claim (the claimant) must provide:

- Proof, satisfactory to us, that the insured person has died;
- Upon our request, access to any medical records that we require to assess the claim, including an attending physician's statement and a coroner's report.

In addition, the claimant must provide further proof of claim, if applicable.

In all cases, the proof must be provided within one (1) year of the date of death of the insured person and any cost incurred in providing proof of claim is at the claimant's expense.

When insurance coverage ends

All coverage under this policy will end on the earliest of the date when any of the following occurs:

- The insured person dies; or
- We receive request from you to cancel your coverage; or
- The end of the grace period if premiums are not paid; or
- Upon a fraudulent claim made by you or the beneficiary; or
- The insured person's 80th birthday.

Renewal

We will renew this policy and insurance in effect at the end of the initial 20 year period for successive 20 year renewal periods each of the same length as the initial period, except the renewal anniversary nearest to the insured person's 80th birthday. The final renewal period will only run until the insured person's 80th birthday, at which point the policy will end and there will be no further renewal.
If a benefit is payable, we will pay the benefit to:

- Your beneficiary(ies); or
- If there is no beneficiary when the insured person dies, to you or your estate.

The right to name or change the beneficiary designation is reserved to you only. You do not need the consent of any beneficiary or beneficiaries to change any beneficiary under this policy, unless any rule of law requires his or her consent. All beneficiary designations are revocable unless otherwise stated or unless any contrary law applies.

If you wish to name or change your beneficiary, you must submit a written request to us, but such change shall not be binding on us until received at our Head Office. Once the beneficiary change request has been received, it will be our responsibility to fulfill the request as of the date the request was signed, but we will not be responsible for any benefits paid to the previous beneficiary before the receipt of the beneficiary request.

Assignments and other documents

We are not bound by any documents that affect rights under this contract unless the document itself or written notice of it is received at our Head Office. We are not responsible for ensuring that any such document is valid or has the desired effect.
General provisions

Premium Adjustments
If incorrect information was provided during the application process that qualified the insured person for preferred rates we reserve the right to re-issue the policy with an adjusted premium based on the correct information.

Any information you provide after the policy’s effective date and which impacts the premium can only be honored at time of notification.

Misstatement of Age and Sex at Birth
If a policy is issued to an insured person based on an incorrect age, the following may apply:

- If the insured person is still eligible for insurance, the premium amount will be adjusted to the correct amount based on the correct date of birth at the insured person’s effective date and;
  - If overpaid, we will refund the excess premiums calculated at the time a claim is made against this policy; or
  - If underpaid, we will decrease the benefit amount by the amount underpaid at the time a claim is made against this policy.

- If the insured person is not eligible for insurance, all coverages under this policy will be considered never to have been in force and we will refund all premiums paid.

If a policy is issued to an insured person based on an incorrect sex assigned at birth, the following may apply:

- The premium amount will be adjusted to the correct amount based on the correct sex assigned at birth at the insured person’s effective date and:
  - If overpaid, we will refund the excess premiums calculated at the time a claim is made against this policy; or
  - If underpaid, we will decrease the benefit amount by the amount underpaid at the time a claim is made against this policy.

Contestability
We rely on the truth and completeness of the statements and answers you give us as evidence of insurability.

You understand that we may void your insurance coverage under this policy if you have concealed or misrepresented any information.
After insurance has been in effect for two (2) years from the effective date or reinstatement date we will treat all of the answers you gave as evidence of insurability as true, except for cases of fraudulent misrepresentation. This does not apply to information about the date of birth of the insured person in which case section Misstatement of Age and Sex at Birth above will apply.

Waiver
We shall not be deemed to have waived or changed any condition of this policy, either in whole or in part, unless such waiver or change is clearly expressed in writing and signed by an officer of TD Life Insurance Company.

Legal Action
No action at law or in equity shall be brought to recover on the policy prior to the expiration of 120 days after proof of claim has been furnished in accordance with the requirements of the policy. Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (for actions or proceedings governed by the laws of Alberta and British Columbia), the Insurance Act (for actions or proceedings governed by the laws of Manitoba), the Limitations Act, 2002 (for actions or proceedings governed by the laws of Ontario), or other applicable legislation. For those actions or proceedings governed by the laws of Quebec, the prescriptive period is set out in the Civil Code of Quebec.

Applicable Laws
Your insurance will be governed by the laws of the province where you were resident when you initially applied for insurance under this policy, without reference to that province’s rules about conflicts of laws.

English Language
It is the express wish of the parties that this Insurance Policy and all related documents, including notices and other communications, be drawn up in the English language only.
Waiver of Premiums Benefit

This section is applicable if you selected the Waiver of Premiums Benefit when you applied for TD 20-Year Term Life Insurance.

Waiver of Premiums on total disability

If while this policy is in effect, and before the insured person’s 65th birthday, the insured person becomes totally disabled, as defined below, and remains totally disabled for a continuous period of six months, we will:

- Automatically change the policy premium payment frequency to monthly, if the payment frequency is other than monthly, beginning with the date we agree to waive premiums. If after the end of the period of total disability, you wish to pay premiums other than monthly then you must notify us.

- Waive the payment of monthly premiums from the date the insured person becomes totally disabled and for as long as the total disability continues, up to the insured person’s 80th birthday.

Definition

“Total disability” or “totally disabled” shall mean that the insured person, as a result of bodily injury or disease, is wholly prevented during the first two years after the injury or the onset of the disease from performing the substantial duties of their own occupation; after the first two years the insured person must be prevented by the injury or disease, from engaging in any gainful occupation for which they are or may reasonably become qualified by training, education or experience.

Conversion option exercised during total disability

If you exercise the conversion option in this policy while the insured person is totally disabled, we will not waive premiums for the converted insurance policy.
Exceptions

We will not waive premiums if total disability results, either directly or indirectly, from one or more of the following causes:

- Attempted suicide or self-inflicted injury (whether the insured person is aware or not aware of the result of their actions, regardless of the insured person’s state of mind);

- War, whether declared or undeclared, any act of war or activities directly related to service in the armed forces of any country;

- The commission or attempted commission by the insured person of a criminal act;

- An accident that occurs while the insured person is operating any kind of conveyance while their blood alcohol level exceeds the legal limit where the accident occurs;

- Taking a drug in a manner other than prescribed by a licensed physician.

Notice and proof of total disability

We must receive notice of total disability while the insured person is alive and continues to be totally disabled. We must also receive proof of the total disability of the insured person within 3 months of the date notice was provided to us. We will not waive any premiums falling due more than 12 months before the insured person gives us notice of total disability.

At any time, we may ask for proof that the insured person continues to be totally disabled and, if such proof is not provided, the insured person will be deemed to no longer be totally disabled on the day prior to the date on which we asked for the proof and monthly premiums will begin again.
Recurrent *total disability*

If after *we* have waived at least one premium under this provision, the *insured person* recovers, but within 6 months again becomes *totally disabled* from the same or a related cause, *we* will consider the subsequent period of *total disability* to be a continuation of the former period.

**Premiums**

The premiums for this waiver of premiums benefit are payable until the *insured person’s* 65th birthday, and are shown in the Policy Schedule.

This is the end of the *policy*. 
We are providing you with this disclosure confirmation made by our agents in their telephone conversation with you. Should you require additional information about our agents’ qualifications or the nature of their business relationships, we would be pleased to provide it.

Our agents hold life and health insurance licenses in most jurisdictions* in Canada.

1. Companies Represented

Our agents promote life and health insurance products of TD Life Insurance Company ("TD Life"). They are sponsored by TD Life and employed by TD Assurance Agency Inc.†, which holds contracts with TD Life.

2. Compensation for Insurance Sales

Our agents are salaried employees of TD Bank Financial Group. They do not receive commission with respect to the sale of insurance; however, they may be eligible for an annual bonus based on their overall performance.

3. Conflict of Interest

Our agents are prohibited from having personal conflicts of interest in regards to the sales transaction that you are considering. The agent is required to make a recommendation based solely on a review of the Needs Assessment Tool that identified a gap in your insurance coverage.

†TD Assurance Agency is a member of TD Bank Financial Group
*TDAA agents are not licensed in Quebec.
Please read carefully

You are applying to TD Life Insurance Company (referred to as “TD Life” which is a member of the TD Bank Group) for TD 20-Year Term Life insurance and you declare and agree that:

- You will inspect the policy if issued, to verify that its terms are satisfactory.

- All your statements and answers are your true and complete statements and answers to the questions. The concealment, misrepresentation or false declaration in this application could void the insurance policy if issued.

- Payment of any benefits is subject to the limitations and exclusions as described in the policy if issued.

- You have thirty (30) days from the date the policy is mailed to review and cancel it. Any premiums collected to that point will be refunded. If you cancel any time thereafter, all unearned premiums will be refunded.

- No insurance coverage under the policy will take effect until the earliest of TD Life’s written approval or the effective date of the policy if issued.

- The answers that you have provided form a part of the application along with any supplementary applications or forms that TD Life may require be submitted to TD Life.

- You have been provided with the opportunity to review all of your responses in this application.

- The purchase of this insurance is voluntary and is not required to obtain any other product or services from TD Life or its affiliates.
Authorization

For the purposes of this authorization, the terms, “TD Life” and “reinsurers” each include those acting on their behalf. A reproduction of this authorization will be as valid as the original. This authorization shall be valid as long as you remain a client of TD Life.

By applying for TD 20-Year Term Life insurance, you agree that the companies that insure and reinsure your coverage may collect, use and disclose your information as described in the Privacy Agreement that will be included with your Policy Package. This means, for example, they can use this information to help identify you, to provide ongoing service, and meet legal requirements.

You authorize any licensed physician, medical practitioner, hospital, clinic, other medical or medically related facility, insurance company, MIB, Inc., (“MIB”), or other organization, institution or person that has any records or knowledge of you and your health, to release to TD Life or its reinsurers, any such information.

TD Life, or its authorized administrators or reinsurers, may make a brief report of your personal health information to the MIB, a non-profit membership organization of life insurance companies, which operates an information exchange on behalf of its members.

In the event of a claim, your heirs and the executor or administrator of your estate are authorized to provide TD Life, on its own behalf and as administrator for any other insurer who insures your coverage, with all the information and authorizations needed for claims purposes.

Do you understand and agree to the terms and conditions?  
Your response: Yes

Use of Information

We may share your non-health personal information with our affiliates to offer products and services to you by telephone, at the numbers you have provided us, or by internet and mail or other methods. You may choose not to be contacted regarding direct marketing offers by informing TD Life.

Is that okay with you?  
Your response: Yes
Privacy Agreement

In this Agreement, the words “you” and “your” mean any person, or that person’s authorized representative, who has requested from us, or offered to provide a guarantee for, any product, service or account offered by us in Canada. The words “we”, “us” and “our” mean TD Bank Group (“TD”). TD includes The Toronto-Dominion Bank and its world-wide affiliates, which provide deposit, investment, loan, securities, trust, insurance and other products or services. The word “Information” means personal, financial and other details about you that you provide to us and we obtain from others outside TD, including through the products and services you use.

You acknowledge, authorize and agree as follows:

Collecting and using your information

At the time you request to begin a relationship with us and during the course of our relationship, we may collect Information including:

- Details about you and your background, including your name, address, contact information, date of birth, occupation and other identification

- Records that reflect your dealings with and through us

- Your preferences and activities.

This Information may be collected from you and from sources within or outside TD, including from:

- Government agencies and registries, law enforcement authorities and public records

- Credit reporting agencies

- Other financial or lending institutions

- Organizations with whom you make arrangements, other service providers or agents, including payment card networks

- References or other information you have provided

- Persons authorized to act on your behalf under a power of attorney or other legal authority

- Your interactions with us, including in person, over the phone, at the ATM, on your mobile device or through email or the Internet

- Records that reflect your dealings with and through us.
You authorize the collection of Information from these sources and, if applicable, you authorize these sources to give us the Information.

We will limit the collection and use of Information to what we require in order to serve you as our customer and to administer our business, including to:

- Verify your identity
- Evaluate and process your application, accounts, transactions and reports
- Provide you with ongoing service and information related to the products, accounts and services you hold with us
- Analyze your needs and activities to help us serve you better and develop new products and services
- Help protect you and us against fraud and error
- Help manage and assess our risks, operations and relationship with you
- Help us collect a debt or enforce an obligation owed to us by you
- Comply with applicable laws and requirements of regulators, including self-regulatory organizations.

Disclosing your information

We may disclose Information, including as follows:

- With your consent
- In response to a court order, search warrant or other demand or request, which we believe to be valid
- To meet requests for information from regulators, including self-regulatory organizations of which we are a member or participant, or to satisfy legal and regulatory requirements applicable to us
- To suppliers, agents and other organizations that perform services for you or for us, or on our behalf
• To payment card networks in order to operate or administer the payment card system that supports the products, services or accounts you have with us (including for any products or services provided or made available by the payment card network as part of your product, services or accounts with us), or for any contests or other promotions they may make available to you

• On the death of a joint account holder with right of survivorship, we may release any information regarding the joint account up to the date of death to the estate representative of the deceased, except in Quebec where the liquidator is entitled to all account information up to and after the date of death

• When we buy a business or sell all or part of our business or when considering those transactions

• To help us collect a debt or enforce an obligation owed to us by you

• Where permitted by law.

Sharing information within TD

Within TD we may share information world-wide, other than health-related Information, for the following purposes:

• To manage your total relationship within TD, including servicing your accounts and maintaining consistent Information about you

• To manage and assess our risks and operations, including to collect a debt owed to us by you

• To comply with legal or regulatory requirements

You may not withdraw your consent for these purposes.

Within TD we may also share information world-wide, other than health-related Information, to allow other businesses within TD to tell you about products and services. In order to understand how we use your Information for marketing purposes and how you can withdraw your consent, refer to the Marketing Purposes section below.
Additional collections, uses and disclosures

Social Insurance Number (SIN) — If requesting products, accounts or services that may generate interest or other investment income, we will ask for your SIN for revenue reporting purposes. This is required by the Income Tax Act (Canada). If we ask for your SIN for other products or services, it is your option to provide it. When you provide us with your SIN, we may also use it as an aid to identify you and to keep your Information separate from that of other customers with a similar name, including through the credit granting process. You may choose not to have us use your SIN as an aid to identify you with credit reporting agencies.

Credit Reporting Agencies and Other Lenders — For a credit card, line of credit, loan, mortgage or other credit facility, merchant services, or a deposit account with overdraft protection, hold and/or withdrawal or transaction limits, we will exchange Information and reports about you with credit reporting agencies and other lenders at the time of and during the application process, and on an ongoing basis to review and verify your creditworthiness, establish credit and hold limits, help us collect a debt or enforce an obligation owed to us by you, and/or manage and assess our risks. You may choose not to have us conduct a credit check in order to assess an application for credit. Once you have such a facility or product with us and for a reasonable period of time afterwards, we may from time to time disclose your Information to other lenders and credit reporting agencies requesting such Information, which helps establish your credit history and supports the credit granting and processing functions in general. We may obtain Information and reports about you from Equifax Canada Inc., Trans Union of Canada, Inc. or any other credit reporting agency. You may access and rectify any of your personal information contained in their files by contacting them directly through their respective websites www.consumer.equifax.ca and www.transunion.ca. Once you have applied for any credit product with us, you may not withdraw your consent to this exchange of Information.

Fraud — In order to prevent, detect or suppress financial abuse, fraud, criminal activity, protect our assets and interests, assist us with any internal or external investigation into potentially illegal or suspicious activity or manage, defend or settle any actual or potential loss in connection with the foregoing, we may collect from, use and disclose your Information to any person or organization, fraud prevention agency, regulatory or government body, the operator of any database or registry used to check information provided against existing information, or other insurance companies or financial or lending institutions. For these purposes, your Information may be pooled with data belonging to other individuals and subject to data analytics.
**Insurance** — This section applies if you are applying for, requesting prescreening for, modifying or making a claim under, or have included with your product, service or account, an insurance product that we insure, reinsure, administer or sell. We may collect, use, disclose and retain your Information, including health–related Information. We may collect this Information from you or any health care professional, medically–related facility, insurance company, government agency, organizations who manage public information data banks, or insurance information bureaus, including MIB Group, Inc. and the Insurance Bureau of Canada, with knowledge of your Information.

With regard to life and health insurance, we may also obtain a personal investigation report prepared in connection with verifying and/or authenticating the information you provide in your application or as part of the claims process.

With regard to home and auto insurance, we may also obtain Information about you from credit reporting agencies at the time of, and during the application process and on an ongoing basis to verify your creditworthiness, perform a risk analysis and determine your premium.

**We may use your Information to:**

- Determine your eligibility for insurance coverage;
- Administer your insurance and our relationship with you;
- Determine your insurance premium;
- Investigate and adjudicate your claims;
- Help manage and assess our risks and operations.

We may share your Information with any health–care professional, medically–related facility, insurance company, organizations who manage public information data banks, or insurance information bureaus, including the MIB Group, Inc. and the Insurance Bureau of Canada, to allow them to properly answer questions when providing us with Information about you. We may share lab results about infectious diseases with appropriate public health authorities.

If we collect your health–related Information for the purposes described above, it will not be shared within TD, except to the extent that a TD company insures, reinsures, administers or sells relevant coverage and the disclosure is required for the purposes described above. Your Information, including health–related Information, may be shared with administrators, service providers, reinsurers and prospective insurers and reinsurers of our insurance operations, as well as their administrators and service providers for these purposes.
**Marketing Purposes** — We may also use your Information for marketing purposes, including to:

- Tell you about other products and services that may be of interest to you, including those offered by other businesses within TD and third parties we select;
- Determine your eligibility to participate in contests, surveys or promotions;
- Conduct research, analysis, modeling, and surveys to assess your satisfaction with us as a customer, and to develop products and services;
- Contact you by telephone, fax, text messaging, or other electronic means and automatic dialing–announcing device, at the numbers you have provided us, or by ATM, internet, mail, email and other methods.

With respect to these marketing purposes, you may choose not to have us:

- Contact you occasionally either by telephone, fax, text message, ATM, internet, mail, email, or all of these methods, with offers that may be of interest to you;
- Contact you to participate in customer research and surveys.

**Telephone and Internet discussions** — When speaking with one of our telephone service representatives, internet live chat agents, or messaging with us through social media, we may monitor and/or record our discussions for our mutual protection, to enhance customer service and to confirm our discussions with you.

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**More information**

This Agreement must be read together with our Privacy Code which includes our Online Privacy Code and our Mobile Apps Privacy Code. You acknowledge that the Privacy Code forms part of the Privacy Agreement. For further details about this Agreement and our privacy practices, visit www.td.com/privacy or contact us for a copy.

You acknowledge that we may amend this Agreement and our Privacy Code from time to time. We will post the revised Agreement and Privacy Code on our website listed above. We may also make them available at our branches or other premises or send them to you by mail. You acknowledge, authorize and agree to be bound by such amendments.

If you wish to opt-out or withdraw your consent at any time for any of the opt-out choices described in this Agreement, you may do so by contacting us at 1-888-788-0839. Please read our Privacy Code for further details about your opt-out choices.
Here are answers to questions you may have about your TD 20-Year Term Life insurance protection

If my health changes during the term of my coverage, will my premiums increase?

Your premium is set and guaranteed for each 20-year term of your insurance coverage. It will not change during each 20-year term, regardless of changes in your age or health (provided premium payments are made when due and the policy does not lapse).

Do I need to re-apply for coverage at the end of each 20-year term?

No. As long as you continue to pay your premiums, your coverage will automatically renew at the end of each 20-year term for another 20-year term, with no medical questions. Coverage cannot be renewed beyond your 80th birthday.

Who will receive the benefits from my TD 20-Year Term Life insurance if I die?

The benefit amount from your insurance will be payable to the beneficiary(ies) you designated. That could be your spouse, child, friend or any other person you selected. If you have not designated a beneficiary(ies) the benefit amount from your insurance will be payable to the policy owner or policy owner's estate as applicable.

Can I convert my coverage to permanent life insurance?

Yes, you can convert to a permanent life insurance policy, with no medical questions, at any time up to and including the policy anniversary nearest the insured's 69th birthday. Of course, the premiums will depend on the type and amount of coverage chosen but, regardless of health, you cannot be turned down for coverage under this conversion option.
Will my **beneficiary(ies)** have to pay taxes on the benefit provided by my TD 20-Year Term Life insurance?

No, under current tax law, benefits paid on your insurance are tax-free to the designated beneficiary.

**What happens if I become totally disabled?**

If you are the *policy owner*, for an additional cost, you may choose to add a Waiver of Premium Benefit to the *policy*. This benefit must be added at the same time that you purchase TD 20-Year Term Life insurance. It can ensure that your coverage remains in place should you become disabled and cannot return to work, and may have problems paying for the *policy*. When you think about it, it ensures your coverage can stay in force when you need it most.

**Is life insurance the only protection I need?**

Life insurance is the cornerstone of a sound financial plan. It can help to provide financial security for your family in the event of your death. But what if you should survive a critical illness or critical accident? With today’s medical breakthroughs, more and more Canadians are surviving critical illnesses (cancer, heart attack or stroke) and injuries from critical accidents. You would need financial help to protect your lifestyle while you’re recovering or retrofit your home, if necessary. That’s why TD Insurance offers the Critical Illness Recovery Plan, Critical Accident Recovery Plan and an array of insurance solutions to meet your needs. For details, visit tdinsurance.com or call to speak with a TD Insurance representative at 1-888-788-0839, Monday to Friday, 8 a.m. to 10 p.m., and Saturday 10 a.m. to 6 p.m., Eastern Time.
We: insure our homes and cars without a second thought. But what about the family’s most precious assets – ourselves, our spouses or partners, and our children? If you were to die, how would your loved ones cope financially?

By choosing TD 20-year Term Life insurance, you’ve taken an important step in helping to secure the financial future of those you love if you were to die. Your coverage could provide a tax-free, lump sum benefit that can:

- Help cover tuition costs to benefit your children’s future
- Help pay down a mortgage so your family can remain in the family home
- Help ensure your funeral expenses won’t become a burden for them at an already difficult time
- Provide cash for day-to-day living expenses
- Provide extra money to pay medical bills or outstanding debts

A simple way to protect your family

TD 20-Year Term Life insurance is one of the simplest ways to protect your family:

- Your premiums are fixed for each 20-year term and are guaranteed not to increase during that 20-year term. Premiums will increase at each renewal of a 20-year term
- Coverage renews automatically every 20 years until the insured person turns 80 years old, as long as your premiums are paid (unless you choose not to continue coverage).
- There is no medical examination required for automatic renewals
- You can convert to permanent life insurance at any time up to and including the policy anniversary nearest the insured’s 69th birthday – without the need for a medical examination. Premiums on the converted policy will be based on your age at the time of conversion
Coverage is also available for your spouse and other family members

Whether or not you live in a two-income household, the death of a spouse or partner could cause financial hardship – childcare expenses, medical bills, funeral expenses. Your spouse, partner or other family members may want to consider purchasing TD 20-year Term Life insurance coverage. It could help ensure you will have the money you need to maintain your lifestyle and raise your family.

More protection for you and your family

Accident and Health Insurance
Life and health insurance plays an essential role in planning for the future. By combining various insurance products, you can help provide for your family if the unexpected happens (illness, injury, or death). For more information on TD Insurance Life and Health products, call 1-888-788-0839, Monday to Friday, 8 a.m. to 10 p.m., and Saturday 10 a.m. to 6 p.m., Eastern Time to speak to an insurance representative.

Home and Auto Insurance
Home and auto insurance help provide the resources you’ll need should a fire, accident or break-in happen in your home or car. For more information on TD Insurance Home and Auto insurance, call 1-877-808-0868, Monday to Friday, 8 a.m. to 8 p.m., and Saturday 9 a.m. to 4 p.m., Eastern Time to speak to a licensed insurance representative.

Travel Medical Insurance
Protect yourself and your family from costly medical bills when you are traveling out-of-province and out-of-country. Per trip, annual multi trip coverages, trip cancellation and interruption insurance options are available to meet your travel insurance needs. For details on Travel Insurance call 1-866-368-6509, Monday to Saturday, 8 a.m. to 9 p.m., Eastern Time to speak to a licensed insurance representative.
Instructions for completion of change of beneficiary form

As the owner of this insurance coverage, you are the only person entitled to change the beneficiary, whether the coverage is for yourself or for your entire family. You must, however, obtain consent of any previously designated irrevocable beneficiaries.

Form Do's and Don’ts

- Type or print all information on the forms enclosed, using a ball point pen;
- Do not use correction fluid (liquid paper);
- Initial any corrections/changes;
- Use of all lines is not required, if necessary you can use a separate piece of paper to list all of your beneficiary designations.

Step 1

Section 1

- Under Primary Beneficiary (see definition below), indicate the First, Middle and Last Name, Date of Birth or Age, Percent of Benefit to be paid in the event of your death, and if the proceeds will be Revocable or Irrevocable for each individual(s) that you wish to name as beneficiary(ies);
- Should you wish to designate a ‘secondary’ Contingent Beneficiary (see definition below), after the statement “if living, otherwise to” indicate the First, Middle and Last Name, Date of Birth or Age, Percent of Benefit to be paid in the event of your death and if the proceeds will be Revocable or Irrevocable for each individual(s) that you wish to name as beneficiary(ies);
- Should you wish to designate a child/children as your Primary or Contingent Beneficiary, we recommend that you also name a Trustee (see definition below). Should you choose to designate a trustee for minor children refer to page 2 of the form and indicate the First, Middle and Last Name, Date of Birth or Age, Percent of Benefit to be paid in the event of your passing, and if the proceeds will be Revocable or Irrevocable for each individual(s) that you wish to name as beneficiary(ies);
Section 2

- Sign and date the form (signature line 1);
- If in the past you designated an irrevocable beneficiary(ies), please also have them sign this form (signature line 2);
- Should the Owner of this coverage be a corporation we will require a corporate seal to accompany the signature of the signing officer. If a corporate seal is not available we will accept the signatures of 2 signing officers with their titles. (signature lines 3&4);
- Please have this form witnessed by someone who is not related to you and who is also not named as a beneficiary. (signature line 5).

Step 2

- Mail the “Request for Change of Beneficiary” to TD Life in the enclosed self-addressed return envelope. TD Life will validate and record your Change of Beneficiary and return a confirmation letter to you for your records.

Note: TD Life cannot warrant the legal effectiveness of any change of beneficiary.

Points for Consideration

- Beneficiaries can be designated as Revocable or Irrevocable. If you name someone as an irrevocable beneficiary, they must consent to certain changes you may want to make to the policy in the future. For example, an irrevocable beneficiary must consent to any request to change the beneficiary or surrender the policy. In Quebec the spouse is automatically deemed to be an irrevocable beneficiary unless specifically designated as revocable;
- To change an irrevocable minor beneficiary designation in the future, the minor child must have reached the age of majority (18 or older, based on your jurisdiction). Until this age, the law does not permit the legal guardian or child to sign release of this designation. Furthermore, if you name a Trustee, this law also does not permit this individual to sign a release of irrevocable minor beneficiary, as the trustee does not have the entitlement prior to the death of the insured person;
- To revoke a minor child irrevocable beneficiary designation, a court order will be required;
• Proceeds payable to a named beneficiary (someone other than “estate”) are paid directly to the beneficiary and do not flow through the estate. This means that no probate or executor fees will be deducted from, and no estate creditors can make claims against, these proceeds;

• Proceeds are available to the beneficiary as soon as the claim is approved since they do not become part of the estate. Settlement of the estate usually takes a few months but can take years depending on the circumstances;

• You decide who will receive the insurance proceeds. Proceeds payable to “Estate” are distributed, in the absence of a will, according to the intestacy laws of your province.

Definitions

Primary Beneficiary Designation: A list of beneficiary(ies), who will receive the proceeds of the insurance in the event of your death.

Contingent Beneficiary Designation: A ‘secondary’ list of beneficiary(ies), who will receive the proceeds of the insurance in the event that none of the primary beneficiaries that you have designated are living at the time of your death.

Revocable Beneficiary Designation: A beneficiary who has no right to the policy proceeds during the insured’s lifetime, because the owner has the unrestricted right to change the beneficiary designation at any time.

Irrevocable Beneficiary Designation: If you name someone as an irrevocable beneficiary, you give up the right to change the beneficiary designation, unless the irrevocable beneficiary consents. This will also affect any other desired changes you may want to make to the policy in the future. In Quebec the spouse is automatically deemed to be an irrevocable beneficiary unless specifically designated as revocable.

Example — An irrevocable beneficiary must consent to any request to change the beneficiary or surrender the policy.

Trustee: A Trust is a relationship in which one or more persons, known as the trustee, holds legal title to property known as the trust fund – for the benefit of another person. Care should be taken when naming minor beneficiaries, as the law does not allow an insurer to pay benefits directly to minors.

Minor: A person who has not attained the age of majority and, thus, has limited contractual capacity.

Relationship Examples:
Request for Change of Beneficiary
Re: Jane Sample (Policy # 123 456 789)

Request for change of beneficiary

I hereby request that all prior beneficiary designation(s) provided under the above numbered policy be revoked and that the following beneficiary designation(s) shall apply:

Any amount due under the policy for loss of life:

Section 1:
1a) at the death of the insured JANE SAMPLE, benefits will be paid to:

<table>
<thead>
<tr>
<th>Primary Beneficiary Name</th>
<th>Relationship to You</th>
<th>Date of Birth</th>
<th>Percentage (must total 100%)</th>
<th>Revocable or Irrevocable (Enter “R” for revocable or “I” for irrevocable)</th>
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(a+b+c+d+e+f+g) must = 100%
## Re: Jane Sample (Policy # 123 456 789)

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<tr>
<th>Contingent Beneficiary Name</th>
<th>Relationship to You</th>
<th>Date of Birth</th>
<th>Percentage (must total 100%)</th>
<th>Revocable or Irrevocable (Enter “R” for revocable or “I” for irrevocable)</th>
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**Sample**

### Trustee Name
(for Minor Children)

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<tr>
<th>Trustee Name (for Minor Children)</th>
<th>Relationship to You</th>
<th>Date of Birth</th>
<th>Percentage (must total 100%)</th>
<th>Revocable or Irrevocable (Enter “R” for revocable or “I” for irrevocable)</th>
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**Return to TD Life Insurance Company**

At any time should **you** have any questions on how to complete this form please contact TD Insurance at 1-888-788-0839.
Re: Jane Sample (Policy # 123 456 789)

1b) Otherwise, if beneficiary(ies) named in section 1a) are not living, benefits will be paid to:

Section 2:

At the death of any other Insured Person will be paid (unless otherwise stated) to the Insured named above, if living, otherwise as though it were a sum payable under 1 above.

(Note: Where the beneficiary is a Trust, TD Life is relieved of all responsibility upon making payment to such Trust and need not inquire into the Trustee’s use of such funds nor the scope of the Trustee’s authority.)

I understand that this Beneficiary Change, after it has been recorded by TD Life, relates back to and takes effect as of the date this request is signed, or the date of receipt by TD Life, whichever is later. I further understand and agree that any payment made by TD Life prior to the receipt of this change shall be without prejudice to TD Life.

________________________________________________________________________
1. Signature of Owner Date Signed (MM/DD/YR)

________________________________________________________________________
2. Signature of Irrevocable Beneficiary (if applicable) Date Signed (MM/DD/YR)

________________________________________________________________________
3. Signature & Title of Owner (if a Corporation) Date Signed (MM/DD/YR)

________________________________________________________________________
4. Signature & Title of Owner (if a Corporation) Date Signed (MM/DD/YR)

________________________________________________________________________
5. Signature of Witness Date Signed (MM/DD/YR)
Re: Jane Sample (Policy # 123 456 789)
Place Corporate Seal here (if the owner of this coverage is a Corporation):

FOR OFFICE USE ONLY

Validation

Return to TD Life Insurance Company

At any time should you have any questions on how to complete this form please contact TD Insurance at 1-888-788-0839.