

**NAIC BLANKS (E) WORKING GROUP**

**Blanks Agenda Item Submission Form**

<p align="right">DATE: <u>09/09/2016</u></p> <p>CONTACT PERSON: <u>Lois Alexander</u></p> <p>TELEPHONE: <u>816.783.8517</u></p> <p>EMAIL ADDRESS: <u>lalexander@naic.org</u></p> <p>ON BEHALF OF: <u>Commissioner Nick Gerhart</u></p> <p>NAME: _____</p> <p>TITLE: _____</p> <p>AFFILIATION: <u>Life Insurance and Annuities (A) Comm.</u></p> <p>ADDRESS: _____</p>	<p align="center"><b>FOR NAIC USE ONLY</b></p> <p>Agenda Item # <u>2016-29BWG</u></p> <p>Year <u>2017</u></p> <p>Changes to Existing Reporting [ X ]</p> <p>New Reporting Requirement [ ]</p> <hr/> <p align="center"><b>REVIEWED FOR ACCOUNTING PRACTICES AND PROCEDURES IMPACT</b></p> <p>No Impact [ X ]</p> <p>Modifies Required Disclosure [ ]</p> <hr/> <p align="center"><b>DISPOSITION</b></p> <p>[ ] Rejected For Public Comment</p> <p>[ ] Referred To Another NAIC Group</p> <p>[ ] Received For Public Comment</p> <p>[ X ] Adopted Date <u>04/08/2017</u></p> <p>[ ] Rejected Date _____</p> <p>[ ] Deferred Date _____</p> <p>[ ] Other (Specify) _____</p>
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**BLANK(S) TO WHICH PROPOSAL APPLIES**

- |  |   |  |
|--|---|--|
| <input checked="" type="checkbox"/> ANNUAL STATEMENT           | <input checked="" type="checkbox"/> QUARTERLY STATEMENT |  |
| <input checked="" type="checkbox"/> INSTRUCTIONS               | <input type="checkbox"/> CROSSCHECKS                    | <input checked="" type="checkbox"/> BLANK  |
| <input checked="" type="checkbox"/> Life and Accident & Health | <input checked="" type="checkbox"/> Property/Casualty   | <input checked="" type="checkbox"/> Health |
| <input type="checkbox"/> Separate Accounts                     | <input checked="" type="checkbox"/> Fraternal           | <input checked="" type="checkbox"/> Title  |
| <input type="checkbox"/> Other Specify                         |   |  |

Anticipated Effective Date: Annual 2017

**IDENTIFICATION OF ITEM(S) TO CHANGE**

Add instructions for the life insurance policy locator contact to Jurat electronic only section. Property and Title are included because the Jurat page and instructions are uniform or all statement types.

**REASON, JUSTIFICATION FOR AND/OR BENEFIT OF CHANGE\*\***

Some companies' life insurance policy locator (LIPL) contact may be different than the policyowner relations contact. The LIPL contact is intended to be the reporting entity representative able to address issues related to lost or forgotten life insurance and annuity policies.

**NAIC STAFF COMMENTS**

Comment on Effective Reporting Date: \_\_\_\_\_

Other Comments:

\*\* This section must be completed on all forms.

**JURAT PAGE**

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**To be filed in electronic format only:**

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Cybersecurity Contact

Name

The cybersecurity contact represents the person the reporting entity designates to receive information on active, developing and potential cybersecurity threats from regulatory agencies.

Address

May be a P.O. Box and the associated ZIP code.

Telephone Number

Telephone number should include area code and extension.

Email Address

Email address of the cybersecurity contact person as described above.

Life Insurance Policy Locator Contact (Not applicable to Property and Title companies)

Name

List person able to respond to calls regarding locating policies on lost or forgotten life insurance policies.

Address

May be a P.O. Box and the associated ZIP code.

Telephone Number

Telephone number should include area code and extension.

Email Address

Email address of the policy locator contact person as described above.