

Allstate Benefits - Critical Illness

(NEW JERSEY)

Special Language

REPRESENTATION. I have read or had read to me this completed form and understand that any misstatement or misrepresentation in this form may result in loss of coverage. I represent that statements and answers given on this form are true, complete, and correctly recorded to the best of my knowledge and belief.

Comprehensive Health (answer for Employee, Spouse and Dependents)

COMPREHENSIVE MEDICAL BENEFITS. I certify that every person to be insured currently has other coverage providing benefits for hospital and medical services and supplies. Any person who does not may not apply for Critical Illness coverage.

Fraud Warning

FRAUD NOTICE: Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

Special Language: ABJ45A2NJ

GVCIP4, GVCIP1, GVCIP2

Comprehensive Health (answer for Employee, Spouse and Dependents): ABJ45A2NJ

GVCIP1, GVCIP2, GVCIP4

Fraud Warning: ABJ45A2NJ

GVCIP4, GVCIP2, GVCIP1