

## AMENDMENT TO APPLICATION

Name of  
Proposed Insured \_\_\_\_\_ Application Dated \_\_\_\_\_  
First Middle Initial Last

Policy Number \_\_\_\_\_

## TO AXA EQUITABLE LIFE INSURANCE COMPANY

The application is hereby amended by the undersigned in the following particulars:

The application signed date has been amended to read June 18, 2018, in order to take advantage of the company's most cost-effective policy rate. The information contained in the application has not changed and is still accurate as of June 18, 2018.

**SAMPLE**

This amendment is to be taken as a part of said application, subject to the agreement therein contained; said application and this amendment thus taken as a whole are to be considered as the basis for and as a part of the policy. To the best of my (our) knowledge and belief, in all other respects the statements and answers in the application continue to be, without material change, true and complete as of the date of this amendment.

Dated at \_\_\_\_\_ on \_\_\_\_\_  
(City) (State)

Signature of Owner if other than Proposed Insured \_\_\_\_\_

Signature of Proposed Insured (Parent, Guardian or Applicant must sign if Proposed Insured is a Child, Issue ages 0-14) \_\_\_\_\_

Agent: \_\_\_\_\_

Agency: \_\_\_\_\_

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IU-137125 (5/18)

AXA Distributors, LLC, New York, NY 10104. AXA Equitable Life Insurance Company is the parent company of AXA Distributors, LLC.