

DISABILITY / CHRONICAL ILLNESS CERTIFICATION

CONTACT INFORMATION:

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CONTACT INFORMATION (for New York only):

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ALL OVERNIGHT DELIVERIES:

Pacific Life Insurance Company 6750 Mercy Rd, RSD Omaha, NE 68106

Pacific Life requires this form before your distribution or death benefit request due to disability or chronical illness can be processed.

1 OWNER INFORMATION Owner's Name (First, Middle, Last)	Annuity Contract Number
Content in China non Owner's Name (1113t, Middle, East)	

2 DEFINITION OF DISABILITY

Internal Revenue Code (IRC) Section 72(m)(7) states "an individual shall be considered to be disabled if he is unable to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or to be of long-continued and indefinite duration."

3 DEFINITION OF CHRONICAL ILLNESS

To be considered as chronically ill an individual must be unable to perform, without substantial assistance from another individual, at least two daily living activities (eating, toileting, transferring, bathing, dressing, and continence) for at least 90 days due to a loss of functional capacity, or require substantial supervision to protect against threats to health and safety due to severe cognitive impairment. It is the individual's responsibility to notify Pacific Life if the condition no longer meets the definition of chronically ill according to IRC section 7702B.

4 CERTIFICATION OF DISABILITY OR CHRONICAL ILLNESS

I,	certify tha	t
	Physician's Printed Name	Owners' Name
	meets the IRC Section 72(m)(7) disability criteria	
	meets the IRC Section 7702B chronically ill criteria.	

Signature of Physician

Date

Pacific Life refers to Pacific Life Insurance Company (Newport Beach, CA) and its affiliates, including Pacific Life & Annuity Company. Pacific Life Insurance Company is the issuer in all states except New York. Pacific Life & Annuity Company is the issuer in New York.

