

## SUPPLEMENT TO APPLICATION FOREIGN TRAVEL AND RESIDENCE QUESTIONNAIRE

- ☐ ReliaStar Life Insurance Company, Minneapolis, MN  
☐ Security Life of Denver Insurance Company, Denver, CO  
**For Policyowner Service Use Only:**  
☐ ING USA Annuity and Life Insurance Company, Des Moines, IA  
☐ Midwestern United Life Insurance Company, Fort Wayne, IN

Administrative Office  
for all Companies:  
ING Service Center  
2000 21st Ave. NW  
Minot, ND 58703

Name of Proposed Insured \_\_\_\_\_ Date of Birth \_\_\_\_\_

1. Country of Origin \_\_\_\_\_ Current Citizenship \_\_\_\_\_

2. Date of entry into the United States \_\_\_\_\_

3. Visa type, symbol, number, and expiration date \_\_\_\_\_

4. Do you intend to remain permanently in the USA? ..... ☐ Yes ☐ No

5. List immediate family members by relationship, age, and citizenship \_\_\_\_\_

Within the USA \_\_\_\_\_

Outside the USA \_\_\_\_\_

6. List your assets/property both within and outside the USA \_\_\_\_\_

7. Have you ever traveled or resided outside the USA? ..... ☐ Yes ☐ No

If "Yes", provide details for each country to include specific locations, departure dates, duration and purpose of each stay \_\_\_\_\_

I have read the above questions and answers. I affirm that they are complete and true to the best of my knowledge and belief. I agree that this questionnaire is a part of my application for life insurance.

**NOTICE: Any person who knowingly and with intent to injure, defraud or deceive any insurance company, files an application, statement or claim containing false, incomplete or misleading information may be guilty of a felony of the third degree.**

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Proposed Primary Insured (if other than applicant) \_\_\_\_\_ Date \_\_\_\_\_

Agent's Signature \_\_\_\_\_ Date \_\_\_\_\_