

DV On-line Instructions

If agent, click on the link for DV On-line in the agent portal. If applicant, enter the DV URL.

Click on the drop down box for the resident state of the applicant. Click on the state.

Click the drop down box for Gender. Choose the appropriate gender.

Click the drop down box for Age. Choose the appropriate age.

Click the appropriate radio button for the next 3 questions.

Click the "Apply Now" box.

NEXT

Choose the deductible, plan, and enter the premium for the benefits that the applicant would like.

Click the "Apply Now" box.

NEXT

Read the authorization and click the appropriate radio button. Then click the "Submit" box.

NEXT

Depending on if the applicant is applying as one individual or as a household (each applicant must complete their own applicant information), complete each field and click the "Next" box until the application process is completed.

Notes to be aware of:

In the payment option section, please name the bank customer if different from the insured. For example, a child under the age of 18 will more than likely have the parent as the bank customer so you will want to insert the actual bank customer's name in that field.

- If you do not have the bank address and city and zip, you may leave those fields blank.

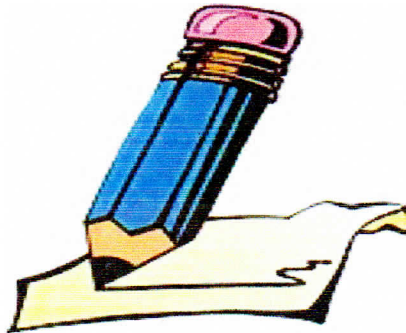
When requesting effective dates, you may not request the days of the 29th, 30th, and 31st. Also you may not request an effective date prior to the date you are submitting the application. For example, if you are applying for a policy on May 8th, you can request an

effective date of May 9th through the June 1st (except for the 29th, 30th and 31st). Or you may click the calendar box and just click the date you would prefer.

In the Agent Information section, it is important to know the agent's number (should be entered in the "Agent Code" field). Name, address, phone number and email address.

In the Thank You section, do not click on the "Close" box until you have clicked the "View Application" box to view the application and the "UCT Fullfillment Brochure" box to view the brochure. Either/or or both may be printed for record keeping.

Once the "Close" box has been clicked, the application will automatically be submitted to UCT's home office.



Reminder regarding Electronic Signatures

Effective May 4th we implemented the use of electronic signatures for our E Application submission process. Please remember to obtain you client's email address at the time the application is completed and inform them that they will be receiving an email(s) when you submit the E Application. They will receive an email for their application signature and they will also receive a second email signature request if they chose Electronic Funds Transfer.

Emails:

- ✦ E Application Electronic Signature request
- ✦ E Bank Customer Electronic Signature transfer request (if EFT is chosen as the mode of payment)

If we are unable to obtain their signatures, we will do so at the time of policy delivery.

For specific product details please visit the **UCT AGENT PORTAL** or contact **UCT AGENT SERVICES AT: 1-800-848-0123 EXT. 1304**, or **CLIENT SERVICES AT: 1-800-848-0123 EXT. 1300**.

All Products Are Issued (and Underwritten) By The Order Of United Commercial Travelers Of America



HAVE YOU BEEN LOOKING FOR A CRITICAL ILLNESS POLICY THAT COVERS CANCER TOO?

IF YOU ARE AN APPOINTED AGENT WITH UCT, YOU HAVE ACCESS TO A CRITICAL ILLNESS POLICY TO OFFER YOUR CLIENTS THAT NOT ONLY COVERS CANCER, BUT ALSO THE FOLLOWING:

- ✦ STROKE
- ✦ HEART ATTACK
- ✦ KIDNEY FAILURE
- ✦ MAJOR ORGAN TRANSPLANT
- ✦ CANCER

THE CRITICAL ILLNESS PLAN FROM UCT PAYS A LUMP SUM THAT PROVIDES FINANCIAL SUPPORT AFTER A SERIOUS MEDICAL DIAGNOSIS OR EVENT. THIS PLAN PROVIDES YOUR CLIENTS WITH A CASH BENEFIT OF \$5,000 TO \$100,000 (BASED ON THE AMOUNT OF THE POLICY).

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