

CITY OF NEW BEDFORD VOLUNTARY TERM LIFE RATES

Must have Basic Life to sign up for Optional Life

MONTHLY PREMIUM										
<u>Age</u>	<u>Monthly Premium Rate per 1,000</u>	10,000	30,000	50,000	80,000	100,000	120,000	150,000	180,000	**200,000**
		GUARANTEED ISSUE AMOUNTS								
		<u>AGE</u>		<u>Under 60</u>		<u>60 - 69</u>		<u>70 & Over</u>		
		Employee		\$ 200,000		\$ 100,000		\$ 20,000		\$20,000
		Spouse		\$ 30,000		\$ 20,000		Not Eligible		
		Dependent		2,000 - 10,000						
<29	\$0.08	\$0.80	\$2.40	\$4.00	\$6.40	\$8.00	\$9.60	\$12.00	\$14.40	\$16.00
30-34	\$0.09	\$0.90	\$2.70	\$4.50	\$7.20	\$9.00	\$10.80	\$13.50	\$16.20	\$18.00
35-39	\$0.12	\$1.20	\$3.60	\$6.00	\$9.60	\$12.00	\$14.40	\$18.00	\$21.60	\$24.00
40-44	\$0.14	\$1.40	\$4.20	\$7.00	\$11.20	\$14.00	\$16.80	\$21.00	\$25.20	\$28.00
45-49	\$0.20	\$2.00	\$6.00	\$10.00	\$16.00	\$20.00	\$24.00	\$30.00	\$36.00	\$40.00
50-54	\$0.30	\$3.00	\$9.00	\$15.00	\$24.00	\$30.00	\$36.00	\$45.00	\$54.00	\$60.00
55-59	\$0.56	\$5.60	\$16.80	\$28.00	\$44.80	\$56.00	\$67.20	\$84.00	\$100.80	\$112.00
60-64	\$0.75	\$7.50	\$22.50	\$37.50	\$60.00	\$75.00	\$90.00	\$112.50	\$135.00	\$150.00
65-69	\$1.26	\$12.60	\$37.80	\$63.00	\$100.80	\$126.00	\$151.20	\$189.00	\$226.80	\$252.00
70-74	\$2.24	\$22.40	\$67.20	\$112.00	\$179.20	\$224.00	\$268.80	\$336.00	\$403.20	\$448.00
>75	\$2.70	\$27.00	\$81.00	\$135.00	\$216.00	\$270.00	\$324.00	\$405.00	\$486.00	\$540.00

*****EMPLOYEE MUST HAVE COVERAGE IN ORDER TO INSURE SPOUSE AND/OR CHILDREN*****

- EMPLOYEE LIFE = \$10,000 TO A MAXIMUM OF \$300,000 (NOT TO EXCEED 5 TIMES SALARY)
- SPOUSE LIFE = \$10,000 TO A MAXIMUM OF \$100,000 (NOT TO EXCEED 50% OF EMPLOYEE BENEFIT)
- DEPENDENT (LIFE ONLY) = \$2,000 to \$10,000 TO AGE 19 OR 25 IF FULL TIME STUDENT
(\$1 for \$2,000, \$2 for \$4,000, \$3 for \$6,000, \$4 for \$8,000, \$5 for \$10,000)
- DEPENDENT CHILD(REN) - (LIFE ONLY) COVERAGE ALL GUARANTEE ISSUE

Applicants requesting insurance amounts over the guaranteed issue amount will require an Evidence of Insurability Form and Authorization to Release Medical Information. These forms will need to accompany the application .