

**PENN TREATY NETWORK AMERICA  
INSURANCE COMPANY**

(PTNA Life Insurance Company in CA)  
3440 Lehigh Street, P.O. Box 7066  
Allentown, PA 18105-7066  
(800) 362-0700

---

**SUITABILITY WAIVER**

---

Applicant's Name: \_\_\_\_\_

I realize that I have not disclosed any financial information on the Personal Worksheet provided by Penn Treaty Network America Insurance Company and that this action prevents Penn Treaty Network America from determining the suitability of this purchase. I do wish to purchase the coverage applied for and ask that Penn Treaty Network America review my application without delay.

\_\_\_\_\_  
(Applicant's Signature)

\_\_\_\_/\_\_\_\_/\_\_\_\_\_  
(Date)