

Protecting Your Privacy!



SONS OF NORWAY

NOTICE OF INFORMATION PRACTICES, CONSUMER REPORTS, AND MEDICAL INFORMATION BUREAU, INC.

THANK YOU FOR YOUR CONFIDENCE IN SONS OF NORWAY AS EVIDENCED BY YOUR APPLICATION FOR INSURANCE. WE ARE PROUD TO PROVIDE OUR MEMBERS WITH INSURANCE PROTECTION AT A REASONABLE COST. TO ENABLE US TO OFFER REASONABLE PREMIUMS AND TO DETERMINE ELIGIBILITY FOR COVERAGE, OUR UNDERWRITING DEPARTMENT EVALUATES EACH INSURANCE APPLICATION. THE FOLLOWING INFORMATION DESCRIBES SOME IMPORTANT FEATURES OF OUR UNDERWRITING PRACTICES.

SOURCES OF INFORMATION

THE APPLICATION FOR INSURANCE IS OUR MAJOR SOURCE OF INFORMATION. SOMETIMES IT IS NECESSARY THAT WE VERIFY OR SECURE MORE INFORMATION IN ADDITION TO WHAT YOU PROVIDED US. AT OUR EXPENSE, WE MAY OBTAIN THIS INFORMATION BY CORRESPONDENCE, TELEPHONE OR PERSONAL CONTACT. WE MAY ASK YOU TO TAKE A PHYSICAL EXAM OR HAVE A SPECIAL MEDICAL TEST DONE SUCH AS AN ELECTROCARDIOGRAM. ALSO, WE MIGHT WRITE TO YOUR DOCTOR OR TO ANY MEDICAL SOURCE FROM WHICH YOU MAY HAVE RECEIVED CARE. WE MAY OBTAIN INFORMATION FROM THE MEDICAL INFORMATION BUREAU AND/OR A CONSUMER REPORTING AGENCY. (WE WILL EXPLAIN MORE ABOUT THESE ORGANIZATIONS LATER.) WE MIGHT CONTACT OTHER INSURANCE OR REINSURANCE COMPANIES TO HELP US PROPERLY EVALUATE YOUR APPLICATION. FURTHERMORE, YOUR SONS OF NORWAY REPRESENTATIVE MAY ASK YOU QUESTIONS TO HELP EVALUATE YOUR INSURANCE PROGRAM.

PROTECTING YOUR PRIVACY

WE CONSIDER THE INFORMATION WE GATHER ABOUT YOU TO BE CONFIDENTIAL AND WE OBTAIN IT ONLY IN ORDER TO ESTABLISH YOUR INSURABILITY. HOWEVER, THERE WILL BE SOME RARE OCCASIONS WHERE WE WOULD FURNISH INFORMATION WITHOUT YOUR CONSENT. FOR EXAMPLE, A STATE INSURANCE DEPARTMENT OR LAW ENFORCEMENT AGENCY MIGHT REQUEST INFORMATION AS PART OF THEIR REGULATORY OR ENFORCEMENT DUTIES. OR, IF WE WERE TO DISCOVER A MEDICAL CONDITION OF WHICH YOU WERE UNAWARE, WE MAY INFORM YOUR PHYSICIAN.

INFORMATION ON YOU MAY BE USED FOR STATISTICAL PURPOSES OR MARKETING RESEARCH, BUT YOU WOULD NOT BE IDENTIFIED INDIVIDUALLY. ALSO, IT MAY BE NECESSARY TO PROVIDE INFORMATION TO CERTAIN INDUSTRY-SUPPORT ORGANIZATIONS TO ALLOW THEM TO PERFORM THEIR FUNCTIONS. AN EXAMPLE WOULD BE A CONSUMER REPORTING AGENCY THAT MAY NEED SOME BASIC IDENTIFYING DATA IN ORDER TO COLLECT INFORMATION THAT IS NEEDED TO EVALUATE YOUR APPLICATION OR PROCESS YOUR CLAIM.



SONS OF NORWAY

YOUR RIGHT TO MAKE CORRECTIONS OF FILE INFORMATION

IF YOU FEEL OUR INFORMATION MAY BE INCORRECT OR INCOMPLETE, YOU MAY ASK US TO REVIEW IT. IF WE AGREE TO MAKE A CHANGE, WE WILL CHANGE THE FILE TO SHOW THE CORRECTION OR ADDITION. ALSO, WE WILL INFORM ANYONE ELSE TO WHOM WE HAVE DISCLOSED THE ORIGINAL INFORMATION OF THIS CORRECTION. EVEN IF WE DO NOT AGREE TO MAKE ANY CHANGES, YOU STILL MAY FILE A STATEMENT WITH US STATING WHAT YOU BELIEVE IS THE CORRECT INFORMATION. WE WILL THEN SEND YOUR STATEMENT TO ANYONE TO WHOM WE SENT THE INFORMATION IN THE PAST AND INCLUDE IT IN ANY FUTURE DISCLOSURES.

THE MEDICAL INFORMATION BUREAU, INC. (MIB)

INFORMATION REGARDING YOUR INSURABILITY WILL BE TREATED AS CONFIDENTIAL. SONS OF NORWAY, OR ITS REINSURERS MAY, HOWEVER, MAKE A BRIEF REPORT THEREON TO THE MIB, INC., FORMERLY KNOWN AS MEDICAL INFORMATION BUREAU, A NOT-FOR-PROFIT MEMBERSHIP ORGANIZATION OF INSURANCE COMPANIES, WHICH OPERATES AN INFORMATION EXCHANGE ON BEHALF OF ITS MEMBERS. IF YOU APPLY TO ANOTHER MIB MEMBER COMPANY FOR LIFE OR HEALTH INSURANCE COVERAGE, OR A CLAIM FOR BENEFITS IS SUBMITTED TO SUCH A COMPANY, MIB, UPON YOUR REQUEST, WILL SUPPLY SUCH COMPANY WITH THE INFORMATION ABOUT YOU IN ITS FILE.

UPON RECEIPT OF A REQUEST FROM YOU, MIB WILL ARRANGE DISCLOSURE OF ANY INFORMATION IN YOUR FILE. PLEASE CONTACT MIB AT 866-692-6901 (TTY 866-346-3642). IF YOU QUESTION THE ACCURACY OF THE INFORMATION IN MIB'S FILE, YOU MAY CONTACT MIB AND SEEK A CORRECTION IN ACCORDANCE WITH THE PROCEDURES SET FORTH IN THE FEDERAL FAIR CREDIT REPORTING ACT. THE ADDRESS OF MIB'S INFORMATION OFFICE IS 50 BRAINTREE HILL PARK, SUITE 400, BRAINTREE, MASSACHUSETTS 02184-8734.

SONS OF NORWAY, OR ITS REINSURERS, MAY ALSO RELEASE INFORMATION FROM ITS FILE TO OTHER INSURANCE COMPANIES TO WHOM YOU MAY APPLY FOR LIFE OR HEALTH INSURANCE, OR TO WHOM A CLAIM FOR BENEFITS MAY BE SUBMITTED. INFORMATION FOR CONSUMERS ABOUT MIB MAY BE OBTAINED ON ITS WEBSITE AT [WWW.MIB.COM](http://www.mib.com).

CONSUMER REPORTS

AN INVESTIGATIVE CONSUMER REPORT MAY BE REQUESTED TO HELP US DETERMINE YOUR INSURABILITY. THIS REPORT WOULD INCLUDE INFORMATION ON YOUR LIFESTYLE, CHARACTER, GENERAL REPUTATION AND PERSONAL CHARACTERISTICS SUCH AS HEALTH, OCCUPATION AND FINANCES. THE CONSUMER REPORTING AGENCY WOULD GATHER THIS INFORMATION THROUGH INTERVIEWS WITH YOU, YOUR FAMILY, BUSINESS ASSOCIATES, FRIENDS AND FINANCIAL INSTITUTIONS. YOU HAVE THE RIGHT, UPON WRITTEN REQUEST, TO BE INFORMED IF AN INVESTIGATIVE CONSUMER REPORT WAS MADE. IF A REPORT WAS MADE, WE WILL GIVE YOU THE NAME AND ADDRESS OF THE CONSUMER REPORTING AGENCY, WHICH YOU CAN THEN CONTACT. THE AGENCY WILL LET YOU REVIEW AND RECEIVE A COPY OF THE REPORT AND ALSO EXPLAIN THEIR RETENTION AND RELEASE PRACTICES.

FURTHER INFORMATION

YOUR SONS OF NORWAY REPRESENTATIVE WILL BE HAPPY TO ANSWER ANY QUESTIONS YOU MIGHT HAVE. YOU MAY WRITE TO SONS OF NORWAY AT 1455 WEST LAKE STREET, MINNEAPOLIS, MN 55408.