



U.S.P.S.-First Class Hartford Life - IPS
or Express-Mail to: P.O. Box 5085
 Hartford, CT 06102-5085

Private Express Mail: Hartford Life - IPS
 200 Hopmeadow Street
 Simsbury, CT 06089

Portfolio Planner Enrollment Form

Financial Advisor may call 800-862-7155
 Clients may call 800-862-6668 or log on to www.hartfordinvestor.com

1. OWNER INFORMATION

Contract Owner Name _____ Contract Owner SSN/TIN _____ Contract Owner Phone Number _____

Joint Owner Name _____ Existing/Pending Contract (if any) _____

2. PRODUCT DESIGNATION

Hartford Select Leaders Hartford Select Leaders Outlook

3. PORTFOLIO PLANNER ASSET ALLOCATION PROGRAM

This program prohibits allocations to any investment options other than the model portfolio you choose below. Any allocations or transfers directly to any investment option will automatically terminate your enrollment in the program. The Fixed Account or any of the Dollar Cost Averaging programs are available and may be used to dollar cost average into your model portfolio.

Investment Allocation: Total must = 100%

Model Portfolio _____ % Fixed Account _____ % Dollar Cost Averaging Programs _____ %
 (elect program below)

Choose only one Model Portfolio below.

<input type="checkbox"/> Income 2006	<input type="checkbox"/> Enhanced Income 2006	<input type="checkbox"/> Growth and Income 2006	<input type="checkbox"/> Growth 2006	<input type="checkbox"/> Aggressive Growth 2006
13% American Funds International Fund 4% MFS Total Return Series 10% Morgan Stanley Growth Portfolio 19% Morgan Stanley Money Market Port. 8% UIF Core Plus Fixed Income Portfolio 5% UIF High Yield Portfolio 3% UIF Small Company Growth Portfolio 23% Van Kampen LIT Government Portfolio 15% Van Kampen LIT Comstock Portfolio	16% American Funds International Fund 6% MFS Total Return Series 13% Morgan Stanley Growth Portfolio 4% Morgan Stanley Money Market Port. 7% UIF Core Plus Fixed Income Portfolio 5% UIF High Yield Portfolio 5% UIF Small Company Growth Portfolio 15% Van Kampen LIT Comstock Portfolio 6% Van Kampen LIT Growth and Income Port. 23% Van Kampen LIT Government Portfolio	4% American Funds Growth Fund 21% American Funds International Fund 6% MFS Investors Trust Series 6% MFS Total Return Series 13% Morgan Stanley Growth Portfolio 7% UIF Small Company Growth Portfolio 14% Van Kampen LIT Comstock Portfolio 6% Van Kampen LIT Growth and Income Port. 23% Van Kampen LIT Government Portfolio	9% American Funds Growth Fund 25% American Funds International Fund 10% MFS Investors Trust Series 13% Morgan Stanley Growth Portfolio 10% UIF Small Company Growth Portfolio 14% Van Kampen LIT Comstock Portfolio 10% Van Kampen LIT Growth and Income Port. 9% Van Kampen LIT Government Portfolio	12% American Funds Growth Fund 28% American Funds International Fund 10% MFS Investors Trust Series 13% Morgan Stanley Growth Portfolio 11% UIF Small Company Growth Portfolio 5% Templeton Growth Securities Fund 11% Van Kampen LIT Comstock Portfolio 10% Van Kampen LIT Growth and Income Port.

Dollar Cost Averaging Into Portfolio Planner – Program Selection DCA Transfers will be invested in the model portfolio selected above.

DCA Plus Transfer Programs

6-Month DCA Plus Transfer Program _____ months (between 3-6)
 12-Month DCA Plus Transfer Program _____ months (between 7-12)

Hartford Life will calculate the monthly transfer amount. At the end of the program term, there will be a final monthly transfer of the entire amount remaining in the program.

Standard DCA Programs

DCA Type (Select One):
 Fixed Dollar DCA Transfer Amount \$ _____
 Earnings/Interest Only DCA _____ % (use whole percentages between 50-100%)

Source
 Fixed Accumulation Feature
 Hartford Money Market HLS Fund
 Other _____

Frequency (minimum 3 occurrences):
 Monthly _____ months or indefinitely
 Quarterly _____ quarters or indefinitely

4. PROGRAM ACKNOWLEDGEMENT

The signature on this Form indicates that I understand the terms and limitations of the Portfolio Planner Asset Allocation Program (the "Program"). I may terminate my enrollment in the Program at any time by providing written notice to Hartford Life. Hartford Life may modify, amend or terminate this Program at any time. All errors or corrections must be reported to Hartford Life immediately.

- There are no guarantees that the model portfolios of the Program will produce investment gains or protect against investment losses.
- My model portfolio will be rebalanced once each quarter.
- Hartford Life will send me a confirmation of all financial transactions of the Program including the quarterly rebalancing.

The Program is not intended to encompass all of your investment needs. You should consult with your investment professional to structure a complete investment plan.

x _____ **x** _____
 Contract Owner Signature Joint Contract Owner Signature Date

Investment Professional _____ Financial Advisor Phone Number _____