

American General

- 1.) FLORIDA residents Specify the Florida County where their business office is located:
- 2.) Intermediary sales support for VUL:
 - Yes
 - No
- 3.) CORPORATE: Name of additional authorized signers for the corporation:

American National

- 1.) Military Status:
- 2.) Have you ever been expelled or disciplined by a professional organization such as the NALU?
 - Yes
 - No
- 3.) Beneficiary Name:
- 4.) Beneficiary Relationship:

Amerus/Aviva

- 1.) Appoint as:
 - General Agent
 - Associate General Agent
 - Agent
- 2.) Resident County:
- 3.) Beneficiary Name (in case of death):
- 4.) Beneficiary SSN:
- 5.) Beneficiary Address:
- 6.) Is a New Business Application Included in this package?
 - Yes
 - No

Assurity

- 1.) Have you ever had any complaints against your conduct that resulted in a return of premium to any insured?
 - Yes
 - No

AXA

- Is a New Business Applications included in this Package?
 - Yes
 - No
- Residence County
- County for Mailing Address

Banner Life

Minimum Transaction Amount (min \$50)

- 1.) Commission Payment Frequency
 - Daily (EFT required)
 - Weekly (EFT required)
 - Monthly
 - Standard Method (Three times each month)
 - Bi-Weekly (26 times per year)
- 2.) Designated Beneficiary:

ING ReliaStar

- 1.) Is application going to be a General Agent?
 - Yes
 - No
- 2.) Have you ever had a life insurance and/or securities license under another name?
 - Yes
 - NoIf yes, please provide that name:

John Hancock

- 1.) Please indicate whether or not your current employer can be contacted
 - Yes
 - No
- 2.) Are you currently bonded?
 - Yes
 - No
- 3.) Have you ever defaulted on any other debt, including consumer or credit card debt? Within the past 10 years, have you ever had a complaint filed against you that results in cease and desist order?
 - Yes
 - No
- 4.) Within the past 10 years, have you ever had a complaint filed again you that resulted in consent order?
 - Yes
 - No
- 5.) Have you changed resident state more than 3 times in the past 5 years?
 - Yes
 - No
- 6.) Have you change broker/dealers more than 3 times in the past 5 years?
 - Yes
 - No
- 7.) Have you ever conducted business under another name?
 - Yes
 - No

Lincoln Financial Group

- 1.) Resident Address County:
- 2.) Mailing Address County:
- 3.) May we publish your name in Company Publications?
 - Yes
 - NoIf no, is recognition (awards, conference) acceptable?
 - Yes
 - No
- 4.) Broker/Dealer TIN:
- 5.) MDRT Status:
- 6.) Projected Life Premium \$:
- 7.) Projected Annuity Premium \$:

Lincoln Benefit Life

- 1.) GA Commissions Beneficiary:
- 2.) GA Beneficiary Relationship:

MetLife

- 1.) Annualization:
 - Yes
 - No
- 2.) Do you appoint for General Agent?
 - Yes
 - No
- 3.) Are you an owner of a corporate general agency? (Including self-employed):
 - Yes
 - No
- 4.) If yes, do you own less than 5% of agency?
 - Yes
 - No
- 5.) Are you a principal of a corporate general agency?
 - Yes
 - No
- 6.) Do you perform any management duties?
 - Yes
 - No
- 7.) Do you have any other business activities?
 - Yes
 - No

If yes, Company:

If yes, Nature or type of Business Activity

If yes, your position and specific duties
- 8.) Are you legally authorization to work in the United States?
 - Yes
 - No
- 9.) Will you no or in the future require sponsorship for employment visa status? (e.g., H-1B visa status)
 - Yes
 - No
- 10.) IF YOU HAVE EVER EXERCISED CONTROL OVER AN ORGANIZATION: While you exercised control over the organization has the organization ever been charged with or convicted of or pled guilty or nolo contendere ("no contest") in a domestic or foreign court to any felony?
 - Yes
 - No
- 11.) IF YOU HAVE EVER EXERCISED CONTROL OVER AN ORGANIZATION: While you exercised control over the organization has the organization ever been charged with or convicted of or pled guilty or nolo contendere ("no contest") in a domestic or foreign court to a misdemeanor involving: investment or an investment-related business or any fraud, false statements or omissions, wrongful taking of property, bribery, perjury, forgery, counterfeiting, extortion, or a conspiracy to commit any of these offenses?
- 12.) If you have Errors and Omissions (E&O) coverage policy is this your company's E&O?
 - Yes
 - No
- 13.) Are you under any legal order/judgment to make monetary payments to another person or business entity or HAVE YOU EVER had your wages garnished?
 - Yes
 - No

Minnesota Life

- 1.) Is there new business included in this package?
 - Yes
 - NoIf submitting new business, what is the state of sale?
If submitting new business, what is the owner's resident state?
- 2.) CFA:
- 3.) Broker – Dealer address:
- 4.) IF B/D associated, does your broker dealer service INDEXED LIFE Products?
- 5.) Broker/dealer tax ID number:
- 6.) Broker/dealer selling agreement contract name:
- 7.) Broker/dealer phone number:

Nationwide

- 1.) Business County Name:
- 2.) Residence County Name:
- 3.) If AML training conducted in-house, training contained explanations of regulations and rules related to AML, identification and/or examples of "suspicious activity?"

North American

- 1.) Resident County:
- 2.) County for mailing address:

Presidential Life

- 1.) Current drivers license issue date:
- 2.) Current drivers license expiration date:
- 3.) Have you ever been refused an insurance license by any state?
 - Yes
 - NoIf yes, please explain:

Principal

- 1.) Broker/dealer city:
- 2.) Broker/dealer state:
- 3.) Broker/dealer zip:
- 4.) DBA name (if applicable):
- 5.) Place of birth (city, state, country):
- 6.) Country of citizenship:
- 7.) E&O products/Services covered:
- 8.) Have you encouraged, solicited, or knowingly participated in the issue of a life insurance policy when it was known at the time of issue, or beneficial interest in the policy, would be sold or assigned to a group of investors? This includes situations where premiums were financed and the primary exit strategy for the loan was a sale of the policy to a third party.

Prudential

- 1.) Is there new business applications included in this package?
 - Yes
 - No
- 2.) IF FIRM CONTRACT - Is the firm a named insured on an errors & omissions policy?

SBLI

- 1.) Mother's maiden name:
- 2.) Total term life insurance premium written by you (or agency if corporate application) during the last 12 months:

William Penn Life Ins Co of New York

Commission payment frequency:

- Daily (EFT required)
- Weekly (EFT required)
- Monthly
- Standard Method (Three times each month)
- Bi-Weekly (26 times per year)

Transamerica

- 1.) Has the applicant been advised of replacement rules?
- 2.) Do you plan to market using a DBA?
 - Yes
 - NoIf yes, DBA name:
DBA TIN:
State where entity organized:
Date entity organized:
- 3.) Have you or the legal entity ever been known corporately by another name, conducted business under any assumed name or carried bank account in another name that shown on this application?
 - Yes
 - No
- 4.) Have you or any corporate officer or director or member of participating ever plead guilty or no contest to, or been convicted of any felony or misdemeanor (exclude minor traffic offenses) or are any criminal charges currently pending against any such person?
 - Yes
 - No
- 5.) Have you or any corporate officer or director or member of partnership ever been associated with a firm, over which such person exercised management or policy control, which was charged during the tenure or such person with such firm, with felony or misdemeanor?
 - Yes
 - No
- 6.) Have you or any corporate officer or director of partnership ever been subject of disciplinary sanctions, reprimand fine assessment, consent order, license suspension, or revocation for any insurance securities activities?
 - Yes
 - No
- 7.) Have you or any corporate officer or director or member of partnership ever been involved in a complaint to or investigation by an insurance or securities department?
 - Yes
 - No

Transamerica (cont)

- 8.) Have you or any corporate officer or director or member of partnership ever plead guilty or no contest to, or been convicted of any felony or misdemeanor (exclude minor traffic offenses) or are any criminal charges currently pending against any such person?
- Yes
 - No
- 9.) Have you or any corporate officer or director or member of partnership ever been associated with a firm over which such person exercised management or policy control, which was charged during the tenure of such person with such firm, with felony or misdemeanor?
- Yes
 - No
- 10.) Have you or any corporate officer or director or member of partnership ever been the subject of disciplinary sanctions, reprimand, fine assessment, consent order, license suspension, or revocation for any insurance securities activities?
- Yes
 - No
- 11.) Have you or any corporate officer or director or member of partnership ever been involved in a complaint to or investigation by an insurance or securities department?
- Yes
 - No
- 12.) Have you or any corporate officer or director or member of partnership ever had a fidelity or fiduciary bond denied or revoked, or had a bonding company pay out on a bond for such person?
- Yes
 - No
- 13.) Have you or any corporate officer or director or member of partnership ever been involved in any litigation (including bankruptcy) or are there unsatisfied judgments or liens outstanding against such person?
- Yes
 - No
- 14.) Have you or any corporate officer or director or member of partnership ever been suspended or barred from the practice of any profession?
- Yes
 - No
- 15.) Are you in violation of the 1994 Crime Act
- Yes
 - No