



VARIABLE ANNUITY NEW ACCOUNT FORM

Agent Information

Name _____ Company _____

Client Information

Name: _____ SSN/TIN: _____ DOB/TRUST: _____

Address: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email: _____ Citizenship: USA Other: _____

REQUIRED

Confidential Information

US. Government "Patriot Act" Customer Identification Program ("CIP") (Social Security cards not allowed)

Type of Identification:

Driver's License # _____
 Passport # _____
 Military ID # _____
 Other _____

Checking or Savings Account Bank Name:

(also required by U.S. Gov't CIP)

<p style="text-align: center;">Account Type</p> <p><input type="checkbox"/> Individual <input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Joint (JT) <input type="checkbox"/> Custodian <input type="checkbox"/> Fiduciary <input type="checkbox"/> IRA <input type="checkbox"/> Roth IRA <input type="checkbox"/> Other:</p>	<p style="text-align: center;">Marital Status</p> <p><input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Married <input type="checkbox"/> Widowed</p>	<p>Retired: <input type="checkbox"/></p> <p>Employer Name: _____ Employer Address: _____ City, State, Zip: _____ Position/Occupation: _____</p>
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Is either party or immediate family member affiliated with or employed by any securities firm, bank, trust or insurance company? Yes No

If Yes, what firm and position?

Is either party or immediate family member a director, a 10% or greater shareholder or policy-maker executive officer of a publicly traded company? Yes No

If Yes, what company and position?

The purchase of the Variable Annuity offers the following benefits as a new investment or advantages over my existing security/contract:

Required Information	Before Purchase of Variable Annuity		After Purchase of Variable Annuity:	
Client's investable assets by percentages are:	_____ % Stock	_____ % Bond	_____ % Stock	_____ % Bond
	_____ % Mutual Funds	_____ % Fixed/Other	_____ % Mutual Fund	_____ % Fixed/Other
	_____ % REIT	_____ % Variable Annuities	_____ % REIT	_____ % Variable Annuities

Financial Profile *For joint accounts, provide combined information

<p>Annual Income <i>From all sources</i></p> <p> <input type="radio"/> Under \$25,000 <input type="radio"/> \$25,000-\$50,000 <input type="radio"/> \$50,001-\$100,000 <input type="radio"/> Over \$100,000 <input type="radio"/> \$ _____ </p>	<p>Source of Income</p> <p> <input type="radio"/> Employment <input type="radio"/> Investment/Savings <input type="radio"/> Social Security <input type="radio"/> Retirement Plans <input type="radio"/> Other _____ </p>	<p>Time Horizon <i>When will money be accessed?</i></p> <p> <input type="radio"/> Less than 1 year <input type="radio"/> 1-5 years <input type="radio"/> 6-9 years <input type="radio"/> More than 10 years </p>
<p>Estimated Net Worth <i>Exclude primary residence</i></p> <p> <input type="radio"/> Under \$50,000 <input type="radio"/> \$50,000-\$100,000 <input type="radio"/> \$100,001-\$500,000 <input type="radio"/> Over \$500,000 <input type="radio"/> \$ _____ </p>	<p>Investable/Liquid Assets <i>Including cash and securities</i></p> <p> <input type="radio"/> Under \$50,000 <input type="radio"/> \$50,000-\$100,000 <input type="radio"/> \$100,001-\$500,000 <input type="radio"/> Over \$500,000 <input type="radio"/> \$ _____ </p>	<p>Federal Tax Bracket</p> <p> <input type="radio"/> 15% or below <input type="radio"/> 16%-28% <input type="radio"/> Over 28% </p>
<p>Experience with Proposed Product Type</p> <p> <input type="radio"/> Limited (less than 1 year) <input type="radio"/> Good (1-5 years) <input type="radio"/> Extensive (greater than 6 years) </p>	<p>Risk Tolerance</p> <p> <input type="radio"/> Conservative <input type="radio"/> Moderately Conservative <input type="radio"/> Moderate <input type="radio"/> Moderately Aggressive <input type="radio"/> Aggressive </p>	<p>Risk Tolerance Based On</p> <p> <input type="radio"/> Expected Retirement Date <input type="radio"/> Timing For Paying Off Debt <input type="radio"/> Other _____ </p>
<p>Source of Funding <i>Check all that apply</i></p> <p> <input type="radio"/> Savings/Checking/CDs <input type="radio"/> Asset Appreciation <input type="radio"/> Business Revenue <input type="radio"/> Inheritance <input type="radio"/> Legal/Insurance Settlement <input type="radio"/> Sale of Assets <input type="radio"/> Qualified Annuity Proceeds <input type="radio"/> Life Insurance Proceeds <input type="radio"/> Reverse Mortgage/Home Equity Loan <input type="radio"/> Rollover/IRA/401(k) <input type="radio"/> Pension Rollover <input type="radio"/> Other _____ </p>	<p>Investment Objectives <i>Check all that apply</i></p> <p> <input type="radio"/> Preservation of Capital <input type="radio"/> Lifetime Income <input type="radio"/> Accumulation and Growth <input type="radio"/> Speculation <input type="radio"/> Trading Profits <input type="radio"/> Enhanced Death Benefit <input type="radio"/> Other _____ </p>	<p>Existing Assets <i>Check all that apply and note approximate quantities</i></p> <p> <input type="radio"/> Stocks \$ _____ <input type="radio"/> Bonds \$ _____ <input type="radio"/> Mutual Funds \$ _____ <input type="radio"/> Options \$ _____ <input type="radio"/> Partnerships \$ _____ <input type="radio"/> Annuities \$ _____ <i>total amount of all annuities held and pending</i> <input type="radio"/> Life Insurance \$ _____ <input type="radio"/> Cash and Cash Equivalents \$ _____ <input type="radio"/> Other \$ _____ </p>
<p>General Investment Knowledge</p> <p> <input type="radio"/> Limited <input type="radio"/> Good <input type="radio"/> Extensive </p> <p>Years of Investment Experience _____</p>	<p>Investment Product Knowledge <i>Please enter the account holder's level of knowledge in each of the following:</i></p> <p>Stocks</p> <p> <input type="radio"/> None <input type="radio"/> Limited <input type="radio"/> Good <input type="radio"/> Extensive </p> <p>Bonds</p> <p> <input type="radio"/> None <input type="radio"/> Limited <input type="radio"/> Good <input type="radio"/> Extensive </p>	<p>Mutual Funds</p> <p> <input type="radio"/> None <input type="radio"/> Limited <input type="radio"/> Good <input type="radio"/> Extensive </p> <p>Options</p> <p> <input type="radio"/> None <input type="radio"/> Limited <input type="radio"/> Good <input type="radio"/> Extensive </p> <p>Variable Contracts</p> <p> <input type="radio"/> None <input type="radio"/> Limited <input type="radio"/> Good <input type="radio"/> Extensive </p>

<p>What concerns you about your financial instruments?</p>	<p> <input type="radio"/> Outliving my assets <input type="radio"/> Not meeting financial goals <input type="radio"/> Loss of principal <input type="radio"/> Tax consequences <input type="radio"/> Other _____ </p>
<p>What purposes do you have for this annuity purchase? (<i>Choose all that apply</i>)</p>	<p> <input type="radio"/> Income now <input type="radio"/> Increasing income <input type="radio"/> Guarantees provided <input type="radio"/> Tax-deferred growth <input type="radio"/> Growth, followed by income <input type="radio"/> Growth potential <input type="radio"/> Safety of principal <input type="radio"/> Pass on to beneficiaries <input type="radio"/> Enhanced benefits for long term care <input type="radio"/> Other _____ </p>
<p>Do you currently live in an assisted living or nursing home?</p>	<p> <input type="radio"/> Yes <input type="radio"/> No </p>
<p>Do you anticipate any significant changes to your financial status?</p>	<p> <input type="radio"/> Yes (<i>Select all that apply</i>) <ul style="list-style-type: none"> <input type="checkbox"/> Increases in living expenses (medical, nursing home, or assisted living) <input type="checkbox"/> Decreases in income (retirement or lower pension) <input type="checkbox"/> Decreases in liquid assets (reduction or decrease in balance of checking, savings, stocks or mutual funds) <p><i>Event details and timing:</i> _____</p> <p>_____</p> <p>_____</p> <input type="radio"/> None anticipated </p>
<p>What is your risk tolerance with respect to this annuity?</p>	<p> <input type="radio"/> I would rather have a predictable return over time <input type="radio"/> I would rather have opportunity for higher return over time but can withstand low/no returns through the years <input type="radio"/> My main goal is to achieve high returns over time, and I can tolerate substantial loss in order to do so </p>
<p>Which asset types do you have experience with? (<i>Choose all that apply</i>)</p>	<p> <input type="radio"/> Mutual Funds <input type="radio"/> Annuities <input type="radio"/> Equities <input type="radio"/> Life Insurance </p>
<p>Are guarantees important to you?</p>	<p> <input type="radio"/> Yes <input type="radio"/> No </p>
<p>Has your insurance professional/producer explained any non-guaranteed elements of the annuity, and are you willing to accept these elements, including variability in premium, cash value, death benefit, cap rates, renewals, or fees?</p>	<p> <input type="radio"/> Yes <input type="radio"/> No </p>

Client Signature

Date

Existing Account Information

Is this a replacement of an existing life insurance policy or annuity? <i>If no, the below questions are not applicable, and you may skip to the next page.</i>	<input type="radio"/> Yes <input type="radio"/> No
Is the current agent also the writing agent on the existing coverage being replaced?	<input type="radio"/> Yes <input type="radio"/> No
What are the total policy charges on the existing coverage?	\$ _____ or _____%
What are the total rider charges on the existing coverage?	\$ _____ or _____%
Does the existing coverage include any vested, guaranteed living benefits, death benefits or other contractual benefits that the owner may lose by exchanging or replacing his/her existing coverage?	<input type="radio"/> Yes <input type="radio"/> No
If yes, provide the benefit types and values under the existing coverage.	Death Benefit \$ _____ Accumulation Benefit \$ _____ Withdrawal Benefit \$ _____ Income Benefit \$ _____ Annuitization Benefit \$ _____ Other \$ _____
What is the surrender charge that will be incurred?	\$ _____ or _____%

What are the reasons for replacement of the client's existing coverage?

What other investments (including other annuity investments) were considered?

Rep Signature

Date

Supervisory Comments

Supervisor Signature

Date