



Suitability Acknowledgement for Annuity Sales

Service: 800-579-2878 • Service E-mail: lswservice@nationallife.com • Web Address: www.lsw.net

This form must be completed for any Owner/Applicant who is purchasing a fixed annuity.

A. Owner/Applicant Information

Owner/Applicant Name: *(Print)* _____ Social Security Number: _____

Joint Owner/Applicant Name: *(Print)* _____ Social Security Number: _____

Complete B. **or** C. (**Only one**). If the Owner/Applicant agrees to provide information for the Agent's recommendation, then the Agent must complete Part B. If the Owner/Applicant elects not to provide information for the Agent's recommendation, then the Owner/Applicant(s) must complete Part C. Provide the appropriate information and return the completed form, along with the completed Annuity Application.

B. Agent Acknowledgement

Acknowledgement of Responsibility for Suitability Recommendation to All Consumers.

I have reasonable grounds for believing that the recommendation for this consumer to purchase/exchange an annuity is suitable on the basis of the facts disclosed by the consumer as to their investments and other insurance products and their financial situation and needs.

Furthermore, I agree to maintain and make available upon request to the insurer or the insurance commissioner, records of the information collected and other information used as the basis for this insurance recommendation for at least 5 years after the insurer completed the recommended transaction. Any process that accurately reproduces the actual document may be used to maintain these records.

Agent Name: *(Print)* _____ Telephone Number: _____

Agent Signature: _____ Date: _____

C. Applicant Acknowledgement

Consumer's Acknowledgement of Responsibility

- I elect not to provide the information necessary for my agent to make a recommendation to make this purchase or exchange.
- I have decided to enter into the fixed annuity purchase without a recommendation from my agent.

Owner/Applicant Signature: _____ Date: _____

Joint Owner/Applicant Signature: _____ Date: _____