This form is an essential part of the FCSLA application process.

LIFE INSURANCE SUITABILITY AND BEST INTEREST QUESTIONNAIRE

We are required to ask for information that will help determine whether an insurance certificate is suitable for your investment goals, needs and financial situation. This information will not be used for any other purpose and will remain confidential. If you sign the waiver below, it means you may not have given your producer (agent) or FCSLA some or all information needed to effectively decide if the proposed certificate meets your needs and objectives. If we are unable to determine suitability, the application will be rejected.

Proposed Owner	Financial Objectives
Name:	Intended Use of Certificate: (check all applicable)
Address:	☐ Income Replacement/Protection
SSN:	☐ Final Expenses
Age:	☐ Wealth Transfer/Inheritance/Gifting
Marital Status: Married Single	☐ Cash Value Accumulation
Divorced Widowed	☐ Pay Off Debts/Liabilities
Occupation:	☐ Other
Financial Information	Time Frame & Existing Accounts
Annual Household Income: \$	How long do you plan to keep the certificate?
Source(s) of Income: (check all applicable)	1-10 yrs 11-20 yrs 21+ years lifetime
Employment Retirement Plan	What is your financial risk tolerance?
Investments Social Security	Conservative Moderate Aggressive
SSI Other	Financial Experience: (I owned/have owned)
Is income stable or fluctuating	Fixed Annuity Variable Annuity Stocks Bonds Life Insurance
Annual Household Living Expenses:	
(housing, food, transportation, medical, taxes, etc.)	Other:
\$	REPLACEMENTS
Approximate percentage of monthly	
income used to pay installment debt:	Are you using funds from existing life
Liquid Net Worth: \$	insurance/annuities/CD's to purchase the
(assets easily converted to cash w/out penalty)	certificate? YES NO
Total Assets: \$	(If yes, a Replacement Form MUST be submitted)
(ex: residence, bank accts, investments, retirement) Total Debt: \$	If no, source of funding: If yes, how long has policy been in force?
(ex: mortgage, rent, loans, credit card, medical bills)	If yes, list any penalties/charges or benefits
Do you have an emergency fund? YES/NO	being forfeited:
(funds in case of unexpected expenses)	being fortetteu.
Do you anticipate any material changes to	
your finances in the next 5 years?	
If Yes:	
Any other relevant information:	Reason for replacement:
	Have you replaced any other life insurance
	policies in the past three years? YES/NO

APPLICANT (PROPOSED OWNER'S) STATEMENT

I confirm that I provided the information above and that it is true and complete to the best of my knowledge. I confirm I have provided all information requested by my producer in order to assess my financial situation. I discussed my current financial information, needs and risk tolerance with my producer. My producer informed me of the advantages/disadvantages of the certificate, its features, the potential consequences of the proposed transaction and provided a product summary. My producer also discussed with me how he/she will be compensated for the sale (and any subsequent servicing) of the proposed certificate.

Applicant: ______ Date: _____

PRODUCER'S STATEMENT	
I have made a reasonable effort to obtain necessary information needs, experience and objectives; intended use of the certificate tolerance; time horizon and other applicable factors. I have applicant(s) has/have the financial resources to meet any fina proposed certificate. To the best of my knowledge and belief, the is true complete and was obtained prior to the purchase of the printerest of the applicant(s) when making the recommendation to recommendation was not influenced by the amount of compensa would receive. I completed product training and believe I am kr recommended to the applicant(s). I did not use the title or designat or any similar title without being appropriately licensed or certification I have discussed with the applicant(s) how I am compensated; the product; potential consequences of the transaction and provided the Based on the information provided by the applicant(s), I believe and in the best interest of the applicant(s).	reasonable basis to believe that the ancial commitments associated with the information provided by the applicant(s) roposed certificate. I considered only the purchase the proposed certificate and the ation that I (or anyone affiliated with me) nowledgeable about the certificate I have ation of financial planner financial advisor tied (and actually provided such services), the advantages and disadvantages of this tiem with the basis of my recommendation.
Producer:	Date:
REFUSAL TO PROVIDE SUITABILITY AND BES	T INTEREST INFORMATION
You have the legal right to decline to provide financial and suitable affects the producer and FCSLA's ability to determine whether to in your best interest. New York law requires that both your product that the proposed certificate and transaction is suitable and in your producer or FCSLA is unable to determine suitability, the appropriate provide financial and suitability information, you and your producer or FCSLA is unable to determine suitability, the appropriate provide financial and suitability information, you and your producer or FCSLA to issue the certificate applied for is not recommended by my ability of FCSLA to issue the certificate applied for.	the proposed certificate and transaction is ucer and FCSLA have a reasonable belief best interests. Accordingly, if either your plication will be rejected. If you refuse ducer must sign the following statements:
Applicant:	Data
Applicant.	Date.
The applicant refused to provide financial and suitability information contrary recommendation (or an absence of a recommendation) from	
Producer:	Date: