



# CLC

## Life Insurance

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### Annuity Suitability Questionnaire

Thank you for your interest in \_\_\_\_\_. This form must be completed and submitted with the application before we can offer you a policy. \_\_\_\_\_ would like to ensure that the product you are purchasing is suitable for you considering your financial status and investment objectives.

Owner Name(s): \_\_\_\_\_ Owner Age(s): \_\_\_\_\_

Product Name: \_\_\_\_\_ Premium Amount: \_\_\_\_\_

#### Financial Status

##### Annual Income

- \$0-\$24,999
- \$25,000-\$49,999
- \$50,000-\$99,999
- \$100,000+

##### Net Worth

- \$0-\$49,999
- \$50,000-\$99,999
- \$100,000-\$249,999
- \$250,000-\$499,999
- \$500,000-\$749,999
- \$750,000-\$999,999
- \$1,000,000+

##### Federal Tax Status

- 10%       35%
- 15%       38.6%
- 27%       Other
- 30%

#### Investment Objectives:

Your investment objectives in purchasing this product (check all that apply):

- Income flow       Flexibility       Tax deferral       Growth followed by income
- Growth, possible income       Pass on to beneficiaries       Other

With exception of any withdrawals (i.e. required minimum distributions, free withdrawals, interest withdrawals, and partial surrenders)

How do you expect to take money out of this product?

- Regular income stream       Lump sum       N/A

When do you expect to take money out of this product?

- Under 1 year       Between 1 and 5 years       Between 6 and 9 years
- 10 or more years       N/A

Do you now own, or have you previously owned, the following financial products? (Check all that apply.)

- CDs       Fixed Annuities       Variable Annuities       Stocks/Bonds/Mutual Funds

What is your source for this annuity's premium? (Check all that apply.)

- Annuity       Life Insurance       CDs       Other Investments       Other \_\_\_\_\_

\_\_\_\_\_ Client refused to provide some or all of the information on this questionnaire.

Owner Signature(s): \_\_\_\_\_

Agent Signature: \_\_\_\_\_

Date: \_\_\_\_\_