

Life Policy Review Fact Finder



CLIENT INFORMATION

Name: _____ Gender: Male Female _____
Proposed Underwriting Class

Address: _____ State: _____ Date of Birth: _____

Spouse (if 2nd to Die): _____ Gender: Male Female _____
Proposed Underwriting Class

Date of Birth: _____

EXISTING POLICY INFORMATION

Carrier Name: _____ Policy Name: _____

Policy Type (IUL, UL, VUL, Whole Life): _____ Original Issue Date: _____

Does the Existing Policy Have a Secondary (No Lapse) Guarantee Provision or Rider?: Yes No

Current Death Benefit: _____ Current Crediting Rate: _____ Assumed Policy Loan Rate: _____

1035 Exchange Value: _____ Surrender Charge: _____

Remaining Surrender Period: _____ Existing Riders: _____

For Whole Life policies only:
What is the selected dividend option? _____

Are policy values being used to pay premiums? Yes No

Note: Complete Objectives and Additional Information on Reverse Side

OBJECTIVE

Death Benefit:

- Maximize DB with no additional premium payments
- Maximize DB & match "as sold" premium pattern
- Maximize DB with client provided premium pattern
- Minimum premiums to achieve desired Death Benefit

Cash Value:

- Maximize policy Cash Flow with no additional premium payments
- Maximize policy Cash Flow & match "as sold" premium pattern
- Maximize policy Cash Flow with client provided premium pattern
- Minimum premiums to achieve desire Cash Flow

Other: _____

COMPLETE EITHER THE CASH FLOW OR DEATH BENEFIT COMPARISON REQUEST

Cash flow Comparison Request (must match inforce illustration)

Premium Amount: \$ _____ Pay Premiums to Age: _____ Cash Flow Beginning Age: _____ Cash Flow Ending Age: _____

Death Benefit Comparison Request (must match inforce illustration)

Premium Amount: \$ _____ Pay Premiums to Age: _____ Desired Death Benefit: \$ _____ NLG? Yes No

AGENT INFORMATION

Name: _____ Agent Code: _____

Address: _____ City: _____ State: _____

Phone: _____ Email: _____

AGENCY/IMO INFORMATION

Agency/IMO Name: _____ Case Manager: _____

Case Manager Phone: _____

** A recent in-force illustration is required. Also, please provide an "as sold" illustration, if available, for the existing policy. **

For agent use only. Neither Aviva nor its representatives may offer legal or tax advice. Clients should consult with their own personal tax, legal or accounting advisors before implementing a plan.

All questions must be completed in order to initiate a case. Completed fact finders and illustrations should be faxed to 515-557-2692 or e-mailed to advancedmarkets@avivausa.com