

# Advanced Annuity Quote Proposal Request Form

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Agent Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Fax: \_\_\_\_\_

Client Name: \_\_\_\_\_ Gender:  M  F DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Joint Annuitant: \_\_\_\_\_ Gender:  M  F DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

State of Issue: \_\_\_\_\_ Tax Qualified:  Yes  No

## GOAL OF THE ANNUITY

*May also be a combination of any two of the below.*

Accumulation Stage  
- Pre-retirees who are still saving for retirement

Income Stage  
 Income Now: Immediate Annuity  
 Income Later: Deferred Annuity

Wealth Transfer  
- Passing on wealth to an heir

*For financial professional use only.*

**Equity Brokerage, Inc.**

1230 W. Morehead Street, Suite 207 | Charlotte, NC 28208

www.equitybrokerage.com | 888-763-9701

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Deposit Type:  Single Premium  Flexible Premium

INITIAL DEPOSIT: \$ \_\_\_\_\_ *If flexible, deposit mode:*

ADDITIONAL DEPOSITS, IF ANY: \$ \_\_\_\_\_  ANNUAL AMOUNT: \$ \_\_\_\_\_

MONTHLY AMOUNT: \$ \_\_\_\_\_

Source of Funds:  DIRECT ROLLOVER/1035 AMOUNT \$ \_\_\_\_\_  SAVINGS AMOUNT \$ \_\_\_\_\_

OTHER (PLEASE SPECIFY): \_\_\_\_\_ AMOUNT \$ \_\_\_\_\_

### MULTI-YEAR / FIXED / INDEXED ANNUITIES

Insurance Company Preference, if any: \_\_\_\_\_

Preferred Surrender Period: \_\_\_\_\_ years

Income Rider Option:  YES  NO AGE/YEAR TO START INCOME: \_\_\_\_\_

Income Frequency:  ANNUAL  SEMI-ANNUAL  QUARTERLY  MONTHLY

### SINGLE PREMIUM IMMEDIATE ANNUITY (SPIA)

Payout Option:  LIFE ONLY  LIFE W/CERTAIN \_\_\_\_\_ YEARS

JOINT \_\_\_\_ %  JOINT \_\_\_\_ % W/CERTAIN \_\_\_\_\_ YEARS  
(100% OR 50%)

INSTALLMENT REFUND

Income Frequency:  ANNUAL  SEMI-ANNUAL  QUARTERLY  MONTHLY

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