



Lumbermens Life Agency
Phone: 1-800-752-0074

Email to:
homeoff@llainc.com
Fax: 1-866-248-0201

Fast-Quote Request

PRICES VARY BY HEALTH

Proposed Life Client Information:

1. Name _____ Application _____ State _____

Male/Female _____ Date of Birth/Age _____

Annual Income _____ Occupation _____

2. Height _____ Weight _____

3. ANY tobacco usage including marijuana (Please explain)?
Never _____ Current User _____
Type and amount? _____
None in 12 mos ___ 24 mos ___ 36mos ___ 60 mos ___

4. Any family history of cancer or cardiovascular disease prior to age 60 of parents or siblings? (please list relationship, diagnosis age at onset, & age at death)

5. Any medications and what for? _____

6. Any pending medical procedures, if so, what? _____

7. Any medical condition in the last "10 years" such as heart condition, diabetes, cancer, anxiety/depression, sleep apnea, alcohol/drug treatment, high cholesterol or blood pressure? Explain:

8. Any DUI or reckless driving conviction(s)? _____
If so, when? _____ Restitution _____

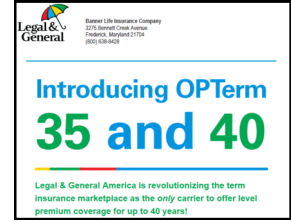
9. Any intended travel outside the US in the next 24 months? If so, where, when and for how long?

10. Is the Proposed Insured a US Citizen: Yes ___ No ___

11. If not, is the Proposed Insured a permanent resident of the US? Yes ___ No ___ Type of VISA _____

Select Desired Companies

- Assurity
- American General
- LGA/Banner Life
- Lincoln Financial
- Pacific Life
- Protective Life
- Prudential Financial
- United of Omaha
- Transamerica



ALL APPLICATIONS CONSIDERED FOR NO EXAM

Illustration Specifications:

Face Amount: \$ _____

Face Amount: \$ _____

Premium Mode _____ Rate Class _____



Term Insurance

Duration: 10 15 20 25 30 35 40

(Please circle all desired durations)

⇒ Waiver of Premium ___ Yes ___ No

⇒ Child Rider (max age 18) ___ Yes ___ No

Guaranteed Universal Life Insurance

Guaranteed to age: 95 100 105 110 121

(Please circle all desired durations)

⇒ Extended Care (Chronic Illness) Rider ___ Yes ___ No

⇒ Return of Premium UL: ___ Yes ___ No

Whole Life Insurance

Guaranteed to age: 121

(Please circle for a Whole Life quote)

Dividend option:

- ___ Paid up additions
- ___ Accumulate at interest
- ___ Paid in cash

Final Expense Whole Life Insurance (no exam)

Guaranteed to age: 120

(Please circle for a final expense quote)

\$2,000 to \$40,000 face amount whole life

Agent Name _____

Return by E-mail to _____

EMAIL or FAX the facts to us today!

This information is requested only to assist us in providing you an accurate quote. Filling out this form does not constitute an application for insurance.