Please check one: ❑ **Individual** ❑ **Partnership** ❑ **Corporation** ❑ **Sole Proprietor**

BACKGROUND QUESTIONNAIRE

Name _____ Corporate Name _____

❑ Writing Agent ❑ Company Officer ❑ Both (If applicable) _____

Social Security Number _____ Company Tax I.D. Number _____

Residence Address _____ Mailing Address _____

City _____ City _____

State _____ Zip _____ State _____ Zip _____

Residence Telephone ( ) _____ Business Telephone ( ) _____

Birthdate: _____ Spouse Name _____ Fax Number ( ) _____

Email Address _____

LICENSES/DESIGNATIONS

STATES WHICH YOU PLAN TO SOLICIT: (Submit a copy of a current license for each state indicated below)

Resident License #: _____ State: _____

List all states in which you plan to solicit: _____

Circle appropriate designations/industry awards: CLU, ChFC, CFC, MDRT, NQA, Other: _____

BUSINESS/PERSONAL EXPERIENCE

Yes	No	
____	____	Have you ever, or do you currently represent West Coast Life Insurance Company?
____	____	Has any insurance company or securities broker-dealer ever terminated your contract other than for lack of production?
____	____	Do you have E & O coverage?
____	____	Have you ever had a claim filed against your E & O insurance coverage?
____	____	Have you ever been bankrupt or insolvent, either personally or in business?
____	____	Have you ever had any liens or judgments, either personally or in business?
____	____	Have you ever been investigated by any state insurance department or government agency?
____	____	Have you ever had an insurance license denied or revoked by a state or province?
____	____	Has a bonding company denied, paid out on, or revoked a bond for you?
____	____	Have you ever been convicted or plead guilty or no contest to a crime other than a misdemeanor?
____	____	Have you ever been on probation?
____	____	Are you now the subject of any complaint, investigation or proceeding that could result in a "Yes"answer to any of the above questions?

If any answer is "yes" to above questions, please provide complete explanation on separate paper and attach.

I certify that all statements are correct to the best of my knowledge. I understand that in compliance with the Federal Fair Credit Reporting Act (15 USC Section 1681, et sequellae), an investigative consumer report may be requested from a reporting agency to secure and provide information concerning my character, general characteristics, mode of living, and the accuracy of the statements made in this application. Subsequent investigative reports may be requested to update your file as needed. Upon written request, additional information as to the nature and scope of the report, if one is requested, will be provided.

Signature _____ Date _____