

Broker Contracting Request

Please indicate the type of contracting you are requesting, complete **ALL** of the information requested below and return the form to Dawn Borrelli at dborrelli@fifthavenuefinancial.com.

Individual Broker Contracting

Name: _____ **SS#:** _____
E-mail address: _____ **Previously Contracted with MassMutual: Yes No**
Currently FINRA Registered: Yes No **Broker Dealer Name & CRD Number:** _____

Initial Corporate Broker Contracting

New Sub-Producer to Corporate Broker

Please indicate if you are requesting initial corporate contracting, or the addition of a new sub-producer to a corporation that is actively contracted.

Entity name: _____ **Tax ID #:** _____
Sub-Producer name: _____ **SS#:** _____
E-mail address: _____
Previously Contracted with MassMutual: _____ **Corp: Yes No** **Sub-Producer: Yes No**
Is the sub-producer FINRA Registered: Yes No **Broker Dealer Name & CRD Number:** _____

Address Information:

*Please note – MassMutual does not accept PO Boxes. Please indicate if business and residence are the same and include telephone numbers and an email address.

Resident address: _____

Business address: _____

Resident Tel #: _____ **Business Tel#:** _____

Preferred mailing address/telephone: Business Residence Business & Residence Are the Same

Please contact Dawn Borrelli at 212.642.4864 or dborrelli@fifthavenuefinancial.com if you have any questions or require assistance.