

Use this form to document the reason you are recommending the replacement of an inforce policy.

A Policy Information ::

- 1. Policy owner full legal name (First, MI, Last, Suffix): _____
- 2. Date (mm/dd/yyyy): _____
- 3. Agent name: _____
- 4. Firm number: _____

B Explanation ::

Document your client's review and understanding of the advantages and disadvantages of the replacement.

All replacements have a cost. These may include surrender charges, lost premiums, increased premiums due to older age or change in health and new contestability periods. The advantages of the replacement, in totality, should clearly outweigh the costs or disadvantages. Replacing a policy is ultimately the client's decision. Your client should understand these costs and disadvantages in order to make an informed decision.

Explanation: