

### Insurance Package Fax# (866) 355-5576

Account Information	
Account Number:	
Client Name:	
Carrier Name:	
Carrier Sponsor:  ☐ Highland Capital ☐ Covr	
☐ Single Premium/Wealth Transfer (Inc	cludes Life/LTC Hybrid/Combo Plans)
Total Premium = \$	
Single Premium/Wealth Transfer & I	Life/LTC Hybrid/Combo Plans
Funds are in Brokerage Account  1035 Ex/Transfer will fund policy and w will be deposited upon Carrier Underwrite	ill not be deposited into the Brokerage Account Funds
For all other Life Insurance - Highlan Do not Deposit Pre	nd & Covr: mium into the Brokerage Account
Premium Check not collected at the time will not be deposited into the Brokerage	of submission and will be obtained at the time of delivery and Account.
	onal Check from Applicant made payable to Insurance Carrier. lle Office (Please included coversheet with check).
1035 Ex/Transfer will fund policy and w	ill not be deposited into the Brokerage Account
Agent Name:	Phone:
Rep#:	Keycenter:



Account #	Financial Advisor:
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## **Insurance Case Summary**

Describe why this transaction is appropriate for the client (e.g. How does this product fit into the client's overall financial plan? Does the client have existing coverage? What other options were considered?)

Agent Office Code: Agent Rep Code:
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#### **INSURANCE SUITABILITY PROFILE**

Owner:		Date of Birth or Date of Trust: xx/xx/xxxx	Tax ID Number:		
Joint Owner (if any):		Date of Birth: xx/xx/xxxx	Tax ID Number:		
Insured (if not owner):		Date of Birth: xx/xx/xxxx	Tax ID Number:		
Proposed Product Name:		Insurance Carrier Name:			
Purpose of Insurance (check one): ☐ Wealth Transfer ☐ Estate Planning ☐ Income Replacement ☐ Retirement Income ☐ Cother					
Product Type: ☐ Variable/Variable U	niversal Life 🔲 F	Fixed Universal Life/Whole Life	Γerm □ Long Term Care □ Disability		
Source of Funds (check all that apply	r): □ Cash □	Mutual Fund/UIT/CD Liquidation	□ 1035 Exchange		
Current Liabilities Total		Mortgage	Auto Other		
If the amount is zero, please indicate "0" – Do not leave blank.	Approximate bala				
	Monthly obligation	on (\$):			
	Duration (years,	months):			
Adequate reserves to meet planned expenses and cover emergencies	□ Yes	□No			
without needing to access funds invested?	If "No", explain:				
Adequate reserves to meet planned expenses and cover emergencies	□ Yes	□ No			
while making required premium contributions?	If "No", explain:				
Discussed alternative insurance options including payment methods	□ Yes	□ No			
and fixed/variable investment options?	If "No", explain:				
Is the proposed life insurance policy being funded by the	□ Yes	□ No			
surrender/exchange of an existing life/annuity policy?	If "Yes", provide the death benefit amount on the existing policy: \$				
	If "Yes" provid	provide current premium on the existing policy: \$			
Please sign here to affirm the for the best of your knowledge; and (annual income, net worth, liquid exposure, other investments, tir information is correct to the bes	l 2) my Financia d net worth, inve ne horizon, and	al Advisor/Agent has reviewed mestment knowledge and experie liquidity needs) documented on	ny Account Profile information nce, investment objectives, risk		
Owner Printed Name/ Signature Date					
Joint Owner Printed Name/Signature Date					

Agent Office Code:	Agent Rep Code:	Date Completed:
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# LIFE INSURANCE DISCLOSURES AND ACKNOWLEDGMENT KeyCorp Insurance Agency USA, Inc. / Key Investment Services LLC

I understand that the life insurance product I am purchasing is sold through KeyCorp Insurance Agency USA, Inc. ("KIA") as a licensed insurance agency acting solely in the capacity of insurance agent on behalf of the issuing insurance company (and, if variable, through Key Investment Services LLC ("KIS") as a registered securities broker-dealer, member FINRA/SIPC). It is not sold by any KeyCorp depository institution.

Insurance and investment products are:

- NOT FDIC INSURED
- NOT BANK GUARANTEED
- MAY LOSE VALUE
- NOT A DEPOSIT
- NOT INSURED BY ANY FEDERAL OR STATE GOVERNMENT AGENCY

I further understand and hereby acknowledge that:

- I have been informed of the features of the product being purchased and of any risks involved, and where applicable have received relevant product disclosure statements.
- If variable, I have received a prospectus concerning the nature of the product being purchased and a description of the risks involved (e.g., the value of the product may fluctuate, the rate of return is not guaranteed, and a loss of principal is possible), and it is my responsibility to review and understand the information provided in that prospectus regarding the product.
- Any investment objectives portrayed in the marketing literature are goals of the issuing company, and there are no assurances or guarantees that such goals or objectives will be achieved.
- If applicable, the current rate and yield for each life insurance product I have purchased has been explained to me.
- Applicable sales charges, surrender charges, and any other fees regarding the life insurance product have been explained to me. These charges, if applicable, may exceed the gain or loss on the value of the life insurance product purchased and I understand that I may receive more or less than the amount invested. Procedures for redeeming, surrendering or selling life insurance products may vary and have been disclosed to me. KIA/KIS generally considers the purchase of life insurance products to be long-term investments. Typically, KIA/KIS discourages the sale of a life insurance product to purchase another life insurance product which may carry a sales charge. However, from time to time, for various reasons, KIA/KIS may recommend that certain life insurance products be avoided and others be purchased. As a result of such transactions, whether recommended by KIA/KIS or not I may incur additional commission or fees, and may encounter tax implications and/or renewed withdrawal charges.
- If surrendering another annuity, prospectus product, structured/brokered certificate of deposit, or investment advisory account a switch disclosure form is required.
- If surrendering an insurance contract to fund this transaction, a Replacement Disclosure for Life Insurance form is required.
- Upon withdrawal or surrender of a life insurance product with a cash value, any interest or capital gain will be taxed at ordinary income tax rates.
- My application for insurance is subject to underwriting review and will not be effective until approved by the issuing company.
- Purchase orders may require use of the U.S. Postal Service, and purchases will be booked in accordance with the procedures utilized by the issuing company. Once all required paperwork, funds and any additional requirements are received in good order as determined by the issuing carrier, my life insurance product will be purchased in accordance with my submitted product application.
- KIA and KIS are affiliates of KeyBank. In making this purchase, I am doing business with these licensed affiliates, not KeyBank. I am not required to purchase a service or product from KeyBank in order to purchase this life insurance product and my decision to purchase or not purchase this or any product through a KeyBank affiliated agency will not in any way affect KeyBank's current or future credit decisions. I have the right to obtain insurance through any agent or insurance company of my choice. KeyBank cannot require me to obtain insurance through a KeyBank affiliated broker or through any other particular agent or insurance company. My choice of agent or insurer cannot be a condition to any financial transaction or service.
- KIS receives several types of compensation for selling variable insurance products. Some of these amounts are disclosed in the prospectus, but others are not listed because the life insurance company pays them from their own assets. Additionally, KIS may receive other payments from life insurance companies. These payments help defray certain costs, including, but not limited to, administrative, travel, training and continuing education expenses associated with the sale of variable insurance products. KIS retains all of this additional compensation. None of these additional amounts are paid to your Insurance Advisor. A more detailed analysis of compensation is available upon request.
- If applicable, I/we are purchasing a Single Premium Wealth Transfer insurance policy and understand that a hypothetical illustration will not be prepared by the insurance company. I/we understand that policy surrender values and related details, if applicable, will be provided by the insurance company when they issue the policy.
- If applicable, I/we have been provided a copy of a hypothetical illustration prepared by the insurance company, which includes information and details specific to the surrender schedule and charges for the policy being purchased.

By signing below, I acknowledge that I understand the product I am purchasing, and have read and understand the disclosures detailed above. If purchasing a variable life insurance product, I have received a prospectus product I am purchasing, and have read and understand the pre-dispute arbitration agreement on the reverse side of this form and agree to such terms.

Owner Printed Name/Signature	Date
Joint Owner Printed Name/Signature	 Date
Insurance Advisor Printed Name/Signature	Date
☐ Client Copy ☐ Agent Copy ☐ Back Office Copy	February 20

#### PRE-DISUPTE ARBITRATION AGREEMENT AND DISCLOSURE

Disputes relating to any variable life insurance product being purchased are subject to the arbitration rules of the Financial Industry Regulatory Authority ("FINRA"). Arbitration is a forum used to resolve a dispute between two parties. Because controversies involving brokerage firms often involve complicated issues, arbitration forums were conceived by the U.S. Securities and Exchange Commission ("SEC") and the FINRA to provide an alternative dispute resolution mechanism for investors which is usually more efficient and less costly than court litigation.

The following information concerns arbitration of controversies between Key Investment Services LLC ("KIS") and the person signing this Disclosures and Acknowledgment form (the "Signor").

- ARBITRATION IS BINDING ON KIS AND THE SIGNOR.
- KIS AND THE SIGNOR ARE WAIVING THEIR RIGHT TO SEEK REMEDIES IN COURT, INCLUDING THE RIGHT TO JURY TRIAL.
- PRE-ARBITRATION DISCOVERY IS GENERALLY MORE LIMITED THAN AND DIFFERENT FROM COURT PROCEEDINGS.
- THE ARBITRATOR'S AWARD IS NOT REQUIRED TO INCLUDE FACTUAL FINDINGS OR LEGAL REASONING AND ANY PARTY'S RIGHT TO APPEAR OR TO SEEK MODIFICATION OF RULINGS BY THE ARBITRATOR IS STRICTLY LIMITED.
- THE PANEL OF ARBITRATORS WILL TYPICALLY INCLUDE A MINORITY OF ARBITRATORS WHO WERE OR ARE AFFILIATED WITH THE SECURITIES INDUSTRY.
- NO PERSON SHALL BRING A PUTATIVE OR CERTIFIED CLASS ACTION TO ARBITRATION, NOR SEEK TO ENFORCE ANY PRE-DISPUTE ARBITRATION AGREEMENT AGAINST ANY PERSON WHO HAS INITIATED IN COURT A PUTATIVE CLASS ACTION WHO IS A MEMBER OF A PUTATIVE CLASS WHO HAS NOT OPTED OUT OF THE CLASS WITH RESPECT TO ANY CLAIMS ENCOMOPASSED BY THE PUTATIVE CLASS ACTION UNTIL:
  - i. THE CLASS CERTIFICATION IS DENIED:
  - ii. THE CLASS IS DECERTIFIED; OR
  - iii. THE CUSTOMER IS EXCLUDED FROM THE CLASS BY THE COURT.

SUCH FORBEARANCE TO ENFORCE AN AGREEMENT TO ARBITRATE SHALL NOT CONSTITUTE A WAIVER OF ANY RIGHTS UNDER THIS PRE-DISPUTE ARBITRATION AGREEMENT EXCEPT TO THE EXTENT STATED HEREIN.

ARBITRATION AGREEMENT: THE SIGNOR AND KIS HEREBY AGREE THAT ALL CONTROVERSIES WHICH MAY ARISE BETWEEN THEM CONCERNING ANY VARIABLE LIFE INSURANCE PRODUCT(S) BEING PURCHASED BY THE SIGNOR, AND ANY OTHER TRANSACTIONS BETWEEN THE SIGNOR AND KIS, WHETHER ENTERED INTO PRIOR TO, ON, OR SUBSEQUENT TO THE DATE HEREOF, SHALL BE CONDUCTED BY, AND ACCORDING TO THE SECURITIES ARBITRATION RULES AND REGULATIONS THEN IN EFFECT OF THE FINRA. EITHER THE SIGNOR OR KIS MAY INITIATE ARBITRATION BY FILING A WRITTEN CLAIM WITH THE FINRA. ANY ARBITRATION SHALL BE CONDUCTED PURSUANT TO THE FEDERAL ARBITRATION ACT AND THE LAWS OF THE STATE OF OHIO.

Client Copy	Agent Copy	Back Office Copy	May 2011
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