

**ENTITY INFORMATION FORM CERTIFICATION
AND INDEMNIFICATION AGREEMENT**

EquiTrust Life Insurance Company®

7100 Westown Parkway, Suite 200
West Des Moines, Iowa 50266-2521
(866) 598-3692 Fax: (515) 226-5103
www.EquiTrust.com
Mailing Address: PO Box 14500
Des Moines, Iowa 50306-3500

Policy/Contract Number	
Owner	Joint Owner

1. ENTITY INFORMATION – Please provide the following information regarding the entity:

Legal Name of the Entity		
Entity Type		
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Limited Liability Company	
<input type="checkbox"/> General Partnership	<input type="checkbox"/> Corporation	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> S Corporation	
<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Other _____	
Date of Formation	Entity Taxpayer Identification Number	State of Domicile
Is the entity registered with any governmental body such as Secretary of State, County Recorder, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If so, where registered? _____		

2. LIST INDIVIDUALS AUTHORIZED TO ACT ON BEHALF OF THE ENTITY - Attach additional pages if needed

Name	Title
Full Address	
Name	Title
Full Address	
Name	Title
Full Address	
Are there any limitations on the authority of the above-listed individuals to act with regard to products and services offered through EquiTrust Life Insurance Company and its affiliated companies (“EquiTrust Life Companies”)? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If “Yes,” describe the limitations: _____	
If “No” is marked or if the boxes are left blank, EquiTrust Life Companies are authorized to act upon instructions from any of the individuals listed above.	



3. REQUIRED – Attach the following documentation for the appropriate entity type

Corporation (either C or S):	Copy of filed Articles of Incorporation and any amendments
Limited Liability Company:	Copy of filed Articles of Organization and any amendments
Limited Liability Partnership:	Copy of filed Partnership Registration and any amendments
Limited Partnership:	Copy of filed Certificate of Limited partnership and any amendments
Partnership:	Copy of Partnership Document and any amendments
Other entities:	Copy of Governing Documents and any amendments

4. CERTIFICATION AND INDEMNIFICATION AGREEMENT

The undersigned hereby certifies that the information provided in the "Entity Information" section above is true and correct, and that the entity has not been dissolved, modified, or amended in any manner which would cause above representations to be incorrect.

EquiTrust Life Insurance Company and its affiliated companies¹ and each of their officers, directors, employees and agents, or the successors and assigns of any of them (collectively, the "EquiTrust Life Companies") are authorized to rely on the information set forth in this document until the EquiTrust Life Companies are notified of any change to said information in writing. Any changes are to be delivered to the EquiTrust Life Companies' main office and will become effective as soon as the EquiTrust Life Companies have had a reasonable amount of time to act upon the changes. No change will affect any transactions initiated by the EquiTrust Life Companies before the change has become effective.

The undersigned hereby agrees to personally indemnify and hold harmless the EquiTrust Life Companies from any and all liability, including attorneys' fees, the EquiTrust Life Companies incur by acting upon instructions reasonably believed by any of them to be valid instructions originating from authorized individuals with respect to any policy/contract, account, fund or similar instrument in which the entity listed above has an interest.

Signature	Printed Name
Title	Date
Signature	Printed Name
Title	Date
Signature	Printed Name
Title	Date

¹ "Affiliated companies" shall include any company now in existence or that comes into existence that controls, is controlled by or is under common control with EquiTrust Life Insurance Company. "Controls" means the power to direct or cause to be directed the management or affairs of the applicable company. "Affiliated companies" shall also include any investment company which is managed by or advised by another affiliated company.