

Insured Information

Name _____ Street Address _____

Email _____ Phone _____

Agent Information

Name _____ Phone _____

Email _____

- **Pre-Qualification:** Review health and medical pre-qualification questions on the Application with your client. Any “yes” response or pending surgeries result in an automatic decline of coverage. For alternative product ideas, call EquiTrust Sales Support at **800-811-9733**.
- **Illustrations:** Return signed copy and Illustration Acknowledgement form with the application.
- **Telephone Underwriting Interview:** Elite Sales Processing (ESP) will facilitate the interview on behalf of EquiTrust.
 - The interview should be initiated at the point of sale, when meeting with your client.
 - Call ESP at **855-699-3045** during regular business hours (CST): Mon – Thurs 8 AM – 9:30 PM or Friday 8 AM – 5 PM.
 - If your call goes to voicemail, leave a message for a quicker response.
 - You will be asked to provide insured, owner and beneficiary information.
 - The interviewer will ask to speak to your client and will review the health and medical pre-qualification questions found in the application.
- **Interview Preparation:** Give your client a copy of the MIB and FCRA notice (pages 7 and 8 of the application). Your client should have available the names and addresses for all physicians; dates of physician and facility visits; current medications and dosages; details of injuries, conditions and illnesses; and Social Security number.
- **Underwriting Decision:** For cases under \$250,000 the interviewer will communicate to you the conditional underwriting approval or decline decision. Declines based only on MIB or prescription history may be referred for additional underwriting consideration. Underwriting for cases \$250,000 or more (including new and existing life premium combined) require APSs ordered upon EquiTrust receipt of applications.
- **Application:** Within 5 business days, mail or fax the completed application (or submit E-Application), premium check and this form to EquiTrust. Declined applications must be submitted as well.
 - Fax: **515-226-5103**
 - Standard Mail: **EquiTrust Life Insurance Company, PO Box 14500, Des Moines, IA 50306-3500**
 - Overnight: **EquiTrust Life Insurance Company, 7100 Westown Pkwy Suite 200, West Des Moines, IA 50266-2521**

Important: Submit the Application to EquiTrust Only If the Telephone Underwriting Interview is Complete

Check box if interview is complete, and provide completion date: _____