

SBLI Digital App Questions

Insured Information

Name _____ DOB: _____
Full Address _____
Best Contact Number _____ Best time to call _____
Email Address _____ Preferred Contact Method: _____

Product Information

Type of Coverage _____ Quoted Rate Class _____ Face Amount: _____
Riders _____ Desired Mode: _____

Producer Questions

Do you have any reason to believe the insured a) was offered financial incentive for taking the policy, b) intends to change ownership in the future or c) would have premiums financed by an unrelated third party? If yes, please indicate the corresponding letter _____

Existing Policies _____

Insurer Name _____ Replacing or Financing? _____ Face Amount _____
Insurer Name _____ Replacing or Financing? _____ Face Amount _____
Insurer Name _____ Replacing or Financing? _____ Face Amount _____

Additional Questions

Has the client been declined for life insurance in the last 2 years? _____

Does the client have a history of criminal convictions? _____

Is the client currently disabled? _____ Does the client have a complex medical history? _____

Has the client filed for bankruptcy within the last 2 years or have unresolved judgements/liens in excess of \$50,000? _____

What to Expect

from your

Life Insurance Interview



**Give or Email to
Your Client!**

Good for you! You've made the important decision to apply for life insurance. Now that your application has been started, here's what's next.

You'll need to complete a life insurance interview. Most insurance companies do this over the phone with you, and some offer an online option for you to complete on your own.

Below is information that will help you prepare - regardless of which process you go through.

General Information

- Information to verify your identity; such as your social security number, driver's license number (and history of violations) and other demographic information
- Citizenship documentation (*if applicable*)

Other Life Insurance

- Information about any other life insurance policies you have; including insurance company names, policy numbers and coverage amounts

Health and Medical Information

- Height, weight and any fluctuations
- Names, addresses and phone numbers for all current doctors and clinics
- Names and dosages of current prescriptions or over-the-counter medications
- Medical history; including details for medical conditions, date of diagnoses, treatments, results of treatments, and any procedures/surgeries performed
- Family health history for parents and siblings, including major diagnoses such as heart disease or cancer and ages/causes of death (*if applicable*)

Financial Information

- Earned and unearned income
- Total net worth, including property
- Assets and Liabilities
- Employment information
- Banking information (*optional if you wish to pay premiums with automatic deductions*)

Lifestyle Information

- Information about exercise habits, travel, and any high-risk activities such as sky diving, hang gliding, scuba diving, rock climbing, aviation, racing, etc.
- Information about smoking, drinking habits, and drug use.