

Allstate Financial/Lincoln Benefit Life

MILLION DOLLAR APPROVAL FORM (FPDA, SPIA, VA)

Form Submitted by _____

Phone # _____ Channel _____

Producer Name _____

Phone # _____ Fax # _____

Producer Number _____

Is producer currently appointed with us?
yes No

Firm Name _____

MBA/Wholesaler Name _____

Purchase Amount _____

Commission Option (VA Only) _____

Product/Riders _____

Client Information

	Owner 1*	Owner 2*	Annuitant*
Name	_____	_____	_____
Age	_____	_____	_____
Sex	_____	_____	_____
SSN/TIN	_____	_____	_____
Health	_____	_____	_____

*Is the client the owner or annuitant on any other annuity issued by us? Yes No
 If yes, please provide the name of the product, riders, total purchase payments and current value for each annuity. Use a separate sheet if necessary: _____

Employee Plan Yes No Will this be a 1035 transfer? Yes No

Coming From _____

Ownership Corporate Partnership Trust Individual

Funding Information

Source of Money: _____ Anticipated Funding Date: _____

Intended Fund Allocation: _____

Where permitted will the contract be assigned as collateral? Yes No Collateral owner: _____

SPIA ONLY: Is this for premium financing? Yes No If yes, total face amount of life case \$ _____

Special uses of this annuity contract _____

Home Office Use Only

Approved by _____
Authorized Signature Date

Approval terms _____

Declined by _____
Authorized Signature Date