

Senior Life Settlement Quote Request Form

First name _____ Last name _____

Address _____ Apt /Unit # _____

City _____ State _____ Zip _____

Phone number _____ Cell phone _____ Fax _____

E-Mail address _____

How much lump sum cash do you need now? \$ _____

Name of insurance company issuing your policy ? _____

What is your current age? _____ What is the policy's face value (death benefit)? _____

Type of Policy

- Term Whole Life Universal Life
 Convertible Term Other _____

How much is your current annual premium? \$ _____

Your current payment is received..... Monthly Quarterly Annually

Date of your first premium _____ Date of final premium _____

Your next 3 premiums are due.....

Due Date _____ Amount \$ _____

Due Date _____ Amount \$ _____

Due Date _____ Amount \$ _____

What are your current needs? (Why would you like to sell your payment stream?)

Complete the form and return via fax to our offices. You will receive a call from one of our underwriters within 24 hours of submission.