

Non-Resident Sales Verification Form

- This form is for information purposes only. It is not an application and does not become a part of the contract.
- This form is required whenever an applicant applies for an annuity in a state other than his or her resident state. It enables the Company to evaluate the appropriateness of the non-resident solicitation.

Generally, sales of insurance products should not be solicited other than in the state where the applicant resides. However, in some cases, it may be permissible for an applicant to complete and sign an application in a non-resident state. The Company will determine the appropriateness of the proposed sale by evaluating whether the applicant has a significant connection to the non-resident state, such as a second home, place of employment, or a pattern of business dealings that brings the applicant to the non-resident state.

For questions or help with this form, call us at 877-253-2323.

Name		Application Date (mm/dd/yyyy)	
Product Name		Purchase Payment Amount	
Applicant's State of Residence	State Where Purchase Will Be Made	Daytime Phone	
Reason(s) for solicitation outside of applican	t's state of residence:		
Second home			
Place of employment			
The applicant has regular business deali	ngs in the non-resident state		
The applicant has a pre-existing relationship with broker of Ti			period (months/years)
Other (please explain reason)			
We hereby certify that the above informati	on is true and complete.		
Applicant's Signature		Date (mm/dd/yyyy)	
X			
Please Print Name Below			
Agent's Signature		Date (mm/dd/yyyy)	
X			
Please Print Name Below			
Co-Applicant's Signature (if applicable)		Date (mm/dd/yyyy)	
X			



Delaware Life Insurance Company is authorized to transact business in all states (except New York), the District of Columbia, Puerto Rico and the U.S. Virgin Islands and is a member of Group One Thousand One.

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By mail

Online

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By phone

Customer Service 877-253-2323 M-F 7:30 a.m.-5:00 p.m., CT

delawarelife.com

By fax

785-286-6118