

Appointment Data Sheet

1 INSTRUCTIONS

To sell Delaware Life Insurance Company Fixed and Variable Annuities products an Agent/Broker must first be properly licensed and then appointed by Delaware Life Insurance Company, a member of the Delaware Life group of companies.

I would like to sell the following Delaware Life Insurance Company products.

Please check appropriate box(es): ☐ Fixed annuities ☐ Variable annuities ☐ Fixed and Variable annuities

in the states of:

Please attach a copy of the state insurance licenses for which you are requesting an appointment.

Note: This application for licensing/appointment will only be processed if the Broker/Dealer with whom you are affiliated has signed and returned a Delaware Life Insurance Company selling agreement and complied with applicable licensing requirements.

Important: When completed, please mail or fax to: Delaware Life
P.O. Box 758581
Topeka, KS 66675-8581
Fax: 785-286-6119

For more information or assistance, please call **877-253-2323**.

2 PERSONAL DATA

REPRESENTATIVE'S NAME (LAST, FIRST, MIDDLE INITIAL)		<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	SOCIAL SECURITY NUMBER	DATE OF BIRTH (MM/DD/YYYY)
BROKER DEALER				
BUSINESS ADDRESS				
RESIDENCE ADDRESS				
BUSINESS PHONE		CRD NUMBER		
NATIONAL PRODUCER NUMBER	RESIDENT STATE	LICENSE NUMBER	EXP. DATE (MM/DD/YYYY)	
EMAIL ADDRESS				