

POLICY REVIEW IS EASY AS 1, 2, 3...

- 1. Provide clients with in-force authorization letter from Quality Quote Insurance Solutions.
- 2. Fax signed authorization letter to QQIS.
- 3. Receive in-force illustrations and guidance about current policy information from QQIS.

For more information, please contact Quality Quote Insurance Solutions at (844) TRY-QQIS







ADVISOR INFORMATION

Phone Number E	Email Address		
CLIENT/POLICY INFORMATIO	ON		
(If there is more than one policy, you must fill o relevant information)	out additional copies of this form with the other poli		
First Insured Name	Date of Birth		
Second Insured Name	Date of Birth		
Policy Number	Policy Type		
Carrier Company	Policy Date		
ORIGINAL POLICY DESIGN			
Premium: Pay \$ for	years Outcomeat age 100		
Interest Rate Assumption in original illustr	ation Policy Purpose:		
IN-FORCE ILLUSTRATION DE	SIGN		
o Use original policy design (see abov			
o Change policy design			
Use original policy design (see aboveChange policy designGuaranteed premium solve	ve)		
Use original policy design (see aboveChange policy designGuaranteed premium solve			
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 Use original policy design (see above) Change policy design Guaranteed premium solve Pay premium for Premium solve Pay premium for 	years to solve for at age 1 years to solve for at age 1		

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provide the signed agent authorization letter along with this form.







THE CONCEPT OF POLICY REVIEW

When your clients purchased their life insurance policy, they invested in a financial plan to last a lifetime. However, the strength and performance of their life insurance policy may have changed over the years, as have their needs. Many older policies issued prior to 2001 are not cost effective given recent improvements to products and pricing.

Their life insurance policy should be reviewed periodically to ascertain whether it is meeting their expectations. This is an excellent opportunity to review their existing policies. Quality Quote Insurance Solutions can assist the financial advisor in providing clients with an analysis of their existing coverage, including how their policy is performing, a cost comparison, and options they have within their policy.

In addition, this will give the advisor an opportunity to explore their clients' insurance needs to assure that they are not under or over-insured. Simply have your client fax or email their most recent life insurance statement. In addition, have them sign an authorization allowing a review of their policy and contact QQIS' Sales Desk.

We will coordinate the reviews with our planning department.

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QUALITY QUOTE INSURANCE SOLUTIONS – AUTHORIZATION FORM

Insurance Company:		
Address:		
City:	State:	Zip Code:
Re: Policy # (s):		
Insured:		
Owner: _		
provided with pertinent information	regarding the a	elow named agent(s) or agency(ies) to be above policy(ies). This information may as in-force ledgers as needed in order to
Agent Name(s):		
	Agency	:
Qualit	y Quote Insura	ance Solutions
42	5 California Str	reet, #400
S	an Francisco, C	CA 94104
www	<u>.qualityquoteso</u>	olutions.com
<u>Authorization</u>		
		r(ies) to obtain information, including any me with a current review of the above listed
Printed Name of Insured		Date
Signature of Insured		Date

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*For Internal Use Only. Please remit completed form to QQIS Life Sales



