

Pre-Qualify Your Client



Life insurance cost is based on your clients age, tobacco use, health, family history and lifestyle activities. Prior to providing your client with a life insurance cost you need to gather some basic information. This form will help you through the pre-qualification process.

Your name: _____ Client Name _____

Clients DOB: _____ Gender _____ State application being taken: _____

Benefit Amounts: _____ Type of coverage: _____

Height: _____ Weight: _____ Occupation: _____ Current income: _____

Is your client a U.S. Citizen? _____ If no, explain. _____

Has your client ever used any form of nicotine product? _____ If so what type? _____

Have they stopped using nicotine products? _____ If so, when? _____

Do they have any traffic violations in the past 5 years? _____ If so, what and when: _____

Any death in the family, parents or siblings, due to cancer or heart disease prior to age 60? _____

If so, who and why? _____

Has your client been hospitalized in the past 5 years? _____ If so, when, why and what was the outcome: _____

When was their last doctor visit? _____ Reason and outcome: _____

Is your client on any medications? Please include the type, purpose, frequency and dosage: _____

Is there any additional history of illness? Provide date and treatment: _____

Any foreign travel plans? _____ If so, where, why and how long: _____

Does your client participate in any hazardous activities like piloting a plane, scuba diving, racing, mountain climbing, etc.

If so which and how often? _____

If you have determined that your client is healthy, go ahead and run a quote based on a Preferred rate classification. If you are not sure and your client has some health issues, provide this form and the Quick Quote form found at bbalife.com under the Underwriting section. Email or fax this information to us for a tentative quote on your client.

Email to moremoney@bbalife.com or fax to 877.747.4445/361.993.3820

