



Pre-Submission Form for Replacement Cases ages 81+

Nassau Life and Annuity Company (Nassau)

Regular Mail: PO Box 22012, Albany, NY 12201-2012

Express Mail: 15 Tech Valley Dr., Suite 201, East Greenbush, NY 12061-4142

Email: annuity.newbusiness@nsre.com

Fax: 321-400-6317

Nassau recognizes that consumers in their 80's, or later stages of retirement are confronted with unique financial circumstances, needs and objectives. Age is one of many important considerations when exploring financial options for seniors and is a critical component of a comprehensive evaluation of financial objectives for your senior clients. Along with regulatory bodies, Nassau has an increased awareness for consumers over age 80 and requires that any recommendation to replace an existing policy demonstrate a substantial financial benefit over the life of the contract. Please refer to Nassau's position on Suitability and FAQ located on our website (<https://salesnet.nsre.com/compliance.html>) for more detailed information regarding these types of sales.

PLEASE NOTE THAT THE PURPOSE OF THIS PRE-SUBMISSION CHECK IS TO PROVIDE AN INDICATION AS TO WHETHER NASSAU WILL CONSIDER THE REPLACEMENT SALE PRIOR TO A FORMAL SUBMISSION. IT IS NOT IN ANY WAY A FINAL APPROVAL.

Pre-Submission options:

- Option 1 – Fill out the form(s) and email to: annuity.newbusiness@nsre.com
This may take up to 2 business days for review.
- Option 2 – Call the suitability department at #800-417-4769 opt 2, opt 2.
You will complete the pre-submission form via phone call with a suitability analyst who will provide you with an indication on if we will consider the application.

Pre-Submission restrictions: Any cases that are submitted above age 80 must meet the following additional criteria for replacements (Please refer to the Suitability FAQ for additional information):

- There can be no penalties (surrender charges, market value adjustment, bonus recapture) on the replacement contract.
- The contract being replaced must have a Minimum Guaranteed Interest Rate (MGIR) equal to or less than the MGIR on the Nassau contract.
- A detailed basis for your recommendation is required for all replacements. Space has been provided on the second page of this form for you to provide this information.

Owner Name	Date of Birth	Social Security Number
Joint Owner Name	Date of Birth	Social Security Number
Producer Name and IMO		
What are the client's financial objectives in purchasing this annuity? (Select all that apply)		
<input type="checkbox"/> Potential for Growth	<input type="checkbox"/> Preservation of Principal	<input type="checkbox"/> Tax Deferral of Growth
<input type="checkbox"/> Death Benefit	<input type="checkbox"/> Ability to Allocate to Index Accounts	

Current Product Replacement Information

Company name for the replacement: _____ Issue Date: _____

Product Name: _____

Product type: Life Insurance Index Annuity Fixed Annuity Variable Annuity

Estimated Premium: \$ _____

Full or partial transfer: _____

Dollar amount of the surrender charge: \$ _____

Dollar amount of bonus recapture (if applicable): \$ _____

Dollar amount of the MVA (negative and positive): \$ _____

Minimum guaranteed interest rate: _____

Current fixed rate: _____

Name of writing agent: _____

Recommendation

Provide a detailed description regarding what your client is looking to accomplish with this transfer and what the substantial financial benefit will be for the client: