Private Financing



	Date
AGENT INFORMATION	
Name	Company
Address	City
StateZipEmail	Phone
CLIENT INFORMATION CLIENT	SECONDARY INSURED
First Name	First Name
Last Name	Last Name
Age/Date of Birth	Age/Date of Birth
Sex ☐ Male ☐ Female State	Sex □ Male □ Female State
Adjusted Gross Income (AGI)	
Federal Income Tax Bracket	l.
What is the client's estimated net worth?	
Was a recommendation made to the proposed insured to:	
• Use distributions from an IRA or qualified plan to purch	ase this insurance coverage?
• Hold this insurance coverage in a qualified plan? ☐ Ye	s 🖵 No
INSURANCE INFORMATION (Not for use with varial	ble products.)
Death Benefit	/ears to pay premiumType of insurance ☐ UL ☐ IUL
☐ Guaranteed No Lapse ☐ ROP ☐ ROP % Factor	☐ SUL ☐ Other
What is the purpose of this insurance?	
EXIT STRATEGY	
When does the policy owner plan to repay the loan?	
Does the policy owner plan to make premium contributions	after the loan repayment?
What assets will be used to repay the loan?	
Will a side fund be used to help repay the loan? \square Yes \square N	lo If "Yes," what pre-tax interest rate should be assumed?
LOAN AND OWNERSHIP INFORMATION	
Lending Source - Who will make the loan to the ILIT?	
$lue{}$ Donor $lue{}$ Other Trust (i.e., Existing ILIT or CST) $lue{}$ Fam	nily Limited Partnership (FLP)
Who will own this policy? ☐ Trust Owned ☐ Other	Partial Payment (\$)
Type of Note - Will the interest rate be fixed for a term of ye	ars or will the interest change annually?
☐ Term Note (fixed); Number of Years	Demand Note
Interest Options 🚨 Interest in Advance 📮 Interest Accru	ed Number of Years
How much insurance does the client currently have in place?	?
How many potential beneficiaries are there (number of Crur	nmey Beneficiaries)?
Comments	
Trusts should be drafted by an attorney familiar with such matters in or	rder to take into account income and estate tax laws (including the generation-skinning tax).

