

Please print, preferably in capital letters and black ink.

Name

- ☐ I DO NOT require appointments for variable insurance products. Note: You do not need to complete the information below. Please return this form to the Registration and Licensing department.
- ☐ I DO require appointments for variable insurance products. Note: Please complete the information below and return this form to the Registration and Licensing department.

1. Insurance License(s)

I will need appointments for variable insurance products in the following state(s):

Resident State:

Additional State(s): _____

- Please remember to send us a copy of your current state insurance license(s). We must keep these on file.

2. Variable Insurance Appointment Form(s)

Insurance Company Appointment Forms –

Download the appointment forms, complete and return with this form to the Registration and Licensing department along with a copy of your current state insurance license(s). If you require an appointment form for a company that is not listed, please contact Steve Donald at sdonald@spireip.com

3. Additional Instructions *Points to ensure that your appointment requests are processed in a timely manner:*

- Complete appointment paperwork even if you have been appointed by your previous broker/dealer.
- Complete all applicable sections of appointment forms.
- Include a copy of your current state insurance license(s) for all states.
- Remember to complete appointment forms for all insurance companies that are being transferred via Change of Broker/Dealer Letter - Individual.