

SUITABILITY IN ANNUITY TRANSACTIONS

Thank you for your interest in a First Symetra National Life Insurance Company of New York annuity. Before we can process your application and issue your contract, we need to confirm that your annuity purchase suits your current financial objective and long-term goals. **Please complete this form in its entirety and submit with your application.**

Owner's name:	Occupation:	Owner's SSN:	Date of Birth:
Joint Owner's name:	Occupation:	Joint Owner's SSN:	Date of Birth:

Your privacy is a high priority to us. The information you provide will be treated with the highest degree of confidentiality.

Financial information:

1. Approximate annual household income \$ _____ Net worth \$ _____ (excluding primary residence)
2. Marital Status Single Married
3. Number of Dependents: _____
4. Federal Tax Rate: 0% 10% 15% 25% 28% 33% 35%
5. What is your source for this annuity's purchase payment? (check all that apply)
 Annuity Life insurance CD Inheritance Savings/checking Current income
 Reverse mortgage/home equity loan Other _____

Financial objectives:

6. What are your financial objective(s) in purchasing this product? (check all that apply)
 Income now Future income Tax-deferred growth Growth Pass on to heirs
 Other _____
7. After purchasing this annuity, are you able to access sufficient funds for emergencies without incurring a penalty?
 Yes No
8. If you are replacing an existing annuity or life contract, is there a withdrawal charge? Yes No N/A
 If there is a withdrawal charge, what is the amount? \$ _____
9. Does the First Symetra product you are purchasing today, have a withdrawal charge period? Yes No
 a. If there is a charge, what are the withdrawal charge percentages associated with the product you are purchasing today? Year 1 _____% Year 2 _____% Year 3 _____% Year 4 _____%
 Year 5 _____% Year 6 _____% Year 7 _____% Year 8 _____%
 b. If there is a charge, are you aware that withdrawals in excess of 10% of the contract value, per contract year during the withdrawal charge period, may result in a withdrawal penalty? Yes No
10. When do you anticipate taking your first withdrawal from this annuity? (choose one)
 Less than one year Between 1-5 years Between 6-9 years 10 or more years None anticipated

Reason for Purchase and Additional Information:

11. I believe the product I am purchasing today meets my needs at this time. Yes No
12. Is the product you are purchasing today the one recommended by your agent? Yes No

To the best of my knowledge, the information above is accurate and complete.

Owner Signature _____

Date _____

Joint Owner Signature _____

Date _____

Agent Signature _____

Date _____