



MOUNTAIN LIFE INSURANCE COMPANY
NEW ACCOUNT REPORT

Credit Insurance

ACCOUNT NUMBER
HOME OFFICE USE ONLY

ACCOUNT NAME EFFECTIVE DATE
ADDRESS (P.O. BOX) ZIP CODE
ADDRESS (STREET) ZIP CODE
CITY STATE
PHONE NUMBER FAX NUMBER
EXPECTED PRODUCTION \$ /PER MONTH BANK WEBSITE

NAME OF LICENSED AGENT FOR AGENCY AGREEMENT CONTRACT & EMAIL ADDRESS
(MUST BE AN OFFICER OF THE FIRM OR OWNER OF DEALERSHIP)
(COPY OF LICENSE OR APPLICATION FOR LICENSE MUST ACCOMPANY THIS REPORT)

OTHER LICENSED INDIVIDUALS
PRINCIPAL CONTACT & EMAIL ADDRESS
MONTHLY REPORT CONTACT & EMAIL ADDRESS
CLAIMS CONTACT & EMAIL ADDRESS
F & I MANAGER & EMAIL ADDRESS

A & H PLAN 7 DAY RETRO 14 DAY RETRO
COVERAGES CREDIT LIFE CREDIT A & H BANK CLUB ACCIDENTAL DEATH
ACCIDENTAL DEATH (INDIVIDUAL)
OUTSTANDING BALANCE (ONLY IN STATES APPROVED)

COMMISSION TO BE PAID % PAID TO
(Name of firm or individual)
FEDERAL TAX ID # SOCIAL SECURITY #
(Applicable only if commissions are to be paid to an individual)

TYPE OF ACCOUNT DIRECT REINSURANCE WAREHOUSING
REINSURANCE CO. NAME
REINS REPORT CONTACT & EMAIL ADDRESS
LOAN OFFICER REPORT (YES/NO)? (If yes, attach a Loan Officer Report Data Sheet*)
REPORT BY LOAN TYPES (YES/NO)? (If yes, also include loan types to be used on Report)
LOAN OFFICER INCENTIVE REPORT (YES/NO)? % NET OR GROSS
LOAN OFFICER PENETRATION REPORT (YES/NO)? *FORM MLIC-LOR-0608-CR

PROVIDE LOAN OFFICER & LOAN TYPES REPORT RECIPIENT'S NAME & EMAIL ADDRESS

COMMENTS

FIELD REPRESENTATIVE GENERAL AGENT

HOME OFFICE USE ONLY
CHECKING ACCT # GROUP # ROLL UP #
APPROVED (YES/NO)? DATE AUTHORIZED SIGNATURE

COMMENTS
MAILED HAND DELIVER DATE PROCESSED SIGNATURE
MLIC-NAR-0608-CR