



New York Life Insurance Company
 New York Life Insurance and Annuity Corporation
 (A Delaware Corporation)
 51 Madison Avenue, New York, NY 10010

NYLIFE Insurance Company of Arizona
 (Not licensed in every state)
 4343 North Scottsdale Road, Suite 220
 Scottsdale, AZ 85251

Agent or Registered Representative Assignment Request Form

STEP 1 Tell us your policy information. Please print the required information.

Policy number(s)					
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Policy owner name, address, other contact information					
FIRST	M.I.	LAST			
Trust/Corporate name (if applicable)					
Preferred phone #			Email		
Residential address for individual policy owners. Please provide applicable address for Trust/Corporate policyowners.					
STREET		APT.	CITY	STATE	ZIP
Insured/Annuitant's name (If different than policy owner)			Other insured's name (for Survivorship plans)		
FIRST	M.I.	LAST	FIRST	M.I.	LAST

STEP 2 Agent/Registered Representative (RR) Assignment and Policy owner and Agent/RR Signatures

Please assign Agent/Registered Representative (please print name)

as servicing agent, and if also a registered representative of NYLIFE Securities LLC., as a registered representative on the policy number(s) above. The assignment of a registered product policy must be to a Registered Representative of NYLIFE Securities, LLC. The assigned Agent/Registered Representative must be properly licensed, registered (if applicable) and appointed in the customer's state of residence. This request replaces all previous requests.

Agent/Registered Representative address

STREET APT. CITY STATE ZIP

Agent/Registered Representative's code	General Office name	General Office code
X Policy owner/Officer/Trustee Signature	Title of Officer (if applicable)	Name (Print) Date
X Policy owner (required if joint owner) Officer/Trustee Signature	Title of Officer (if applicable)	Name (Print) Date
X Agent/Registered Representative Signature	Name (print)	Date

Additional business written in the household:
 Policy Number(s):



21134GO 0121 01

Continued on the next page ►

Agent or Registered Representative Assignment Request Form *continued*

Please select one assignment request:

Temporary Servicing Agent

To qualify as a Temporary Servicing Agent (TSA), please have the client sign page one of this form (cannot be solicited by mail), and return to your General Office for processing.

Please note, a TSA assignment will expire after 24 months if the TSA does not meet additional criteria required to become a Permanent Servicing Agent. No new paperwork is needed to extend a TSA, if the Managing Partner approved. A TSA assignment can be revoked at any time at the discretion of the Managing Partner. TSA assignments are not available for registered products, LTC, fixed annuities, or BOLI/COLI.

Criteria

Required Documentation

Client has no active agent

Form 21134GO

Permanent Servicing Agent

To qualify as a Permanent Servicing Agent (PSA), please have the client sign page one of this form (cannot be solicited by mail), and return to your General Office for processing.

To qualify as a Permanent Servicing Agent (PSA) on a Fixed Life Product (Term, Whole Life, Universal Life, Asset Flex), please select one of the criteria below and submit the required documentation. Note that this section is **not required** if the client is requesting the assignment of a Servicing Agent/Registered Representative on a Fixed Annuity, a Registered Product (Variable Annuity, Variable Universal Life), a Long Term Care policy, or BOLI/COLI.

Criteria

Required Documentation

Sale to existing household

First page of application

An increase or decrease in face amount

First page of application

An increase or decrease in premium, including adding an OPP rider

First page of application

Adding, removing, or exercising a rider

First page of application

Completing a Transfer or Interest Sweep

Form 18523 or 18485

Change in future allocation or automatic reallocation for a variable annuity or variable life policyholder

Form 18485 or 21130

Changing a beneficiary

Form 21131

Delivering a death claim to a member of the household

Form 20838A

Processing a waiver of premium for a member of the household

Form 22030

Processing a transfer of ownership

Form 21132

Managing Partner's signoff:

X

Managing Partner's Signature

Date

Securities are offered through by properly licensed registered representatives of NYLIFE Securities LLC (member FINRA/SIPC), a Licensed Insurance Agency, 51 Madison Avenue, New York NY 10010.

