



INNOVATIVE
UNDERWRITERS

Notice of Producer Compensation – Broker

This notice is required by the New York State Insurance Department

Brokers, sometimes referred to as Producers are committed to working with clients to help them achieve personal, family and business goals. Your Producer is licensed by the State of New York to sell life insurance, disability insurance, long term care insurance, annuities, and group insurance products. Your Producer has also been appointed through Innovative Underwriters with _____ to offer its products to you.

As you consider this important purchase, there are a few things you should know:

- Your Producer represents you and should you choose to purchase this policy/contract, your Producer, will receive compensation from _____. Compensation for individual life insurance and annuity sales are strictly limited by New York State law.
- Further, compensation for group contracts is subject to the amounts on file with the New York State Insurance Department.
- Pursuant to New York State law, your Producer is prohibited from rebating any of his/her compensation to you.
- The compensation your Producer will receive on this policy/contract may depend on several factors, including:
 - the premium or deposit amount of the policy/contract
 - the policy or contract type you purchase
 - the volume of sales (limited to sales of individual disability insurance)

After reading this, if you wish, you may request more detailed information about your Producer's compensation. You may also request and will receive information regarding your Producer's compensation for any other product that your Producer presented.

Thank you for considering this purchase. Kindly indicate your receipt and acknowledgment of this notice by signing below:

Signature of Policy or Contract Owner

Signature of additional Policy or Contract Owner

Printed Name

Printed Name

Date

Date

To Be Completed by the Agent			
On the application	Directly involved in the sale	Producer ID: _____	Producer Name: _____
		Producer ID: _____	Producer Name: _____
		Date: _____ <input type="checkbox"/> NMI <input type="checkbox"/> RMI	
Not directly involved in the sale	Directly involved in the sale	Producer ID: _____	Producer Name: _____
		Producer ID: _____	Producer Name: _____
Not on the Application	Directly involved in the sale	Role (circle one) GA SM DIS LTCS IS	Producer Name: _____
		Role (circle one) GA SM DIS LTCS IS	Producer Name: _____