



Transamerica Insurance & Investments
 Attn: Variable Life Unit – K25
 1100 Walnut Street
 Kansas City, MO 64106-2152
 Telephone: (800) 874-5450 (Option 2)
 Facsimile: (888) 837-2820

Registered Representative Data Sheet

State(s) for which appointment is requested	Licenses Currently Held for Appointment State(s)			
	License	License Number	Resident	Non-Resident
1. _____	Variable Life	_____	<input type="checkbox"/>	<input type="checkbox"/>
	Variable annuity	_____	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	Variable Life	_____	<input type="checkbox"/>	<input type="checkbox"/>
	Variable annuity	_____	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	Variable Life	_____	<input type="checkbox"/>	<input type="checkbox"/>
	Variable annuity	_____	<input type="checkbox"/>	<input type="checkbox"/>

Registered Representative (Applicant)		_____	_____
	Name	Date of Birth	
_____	_____	_____	_____
Your Central Registration Depository (CRD) number	Your representative number with your broker-dealer	Your Social Security Number	
Home Address: Street address	City	State	Zip Code
Broker-Dealer affiliation: _____			
Broker-Dealer name			
_____	_____	_____	_____
Branch business address: Street address or P. O. Box Number	City	State	Zip Code
_____	() _____	() _____	
Branch number (if any)	Branch business phone number	Branch facsimile phone number	

The following questions must be personally answered by the applicant. If you answer yes to any question, please provide a detailed explanation on a separate piece of paper and include that explanation with this appointment request.

- Have you ever had a license (other than a driver's license) revoked or suspended? Yes No
- Have you ever been convicted of, or plead guilty or nolo contendere ("no contest"), to (1) any felony; or (2) any misdemeanor involving insurance or investments, fraud, false statements or omissions wrongful taking of property or forgery? Yes No
- Are there any lawsuits, judgments, or liens pending against you? Yes No
- Have you ever been subject to an order or disciplinary action by the NASD, SEC state securities agency, state insurance department or any other regulatory agency? Yes No

As part of this application process, an investigation consumer report may be made, with information obtained through personal interviews with neighbors, friends, past employers, business associates and others with whom you are acquainted. This inquiry includes information as to your character, general reputation, personal characteristics, and mode of living, whichever may be applicable. **Please review and sign the attached Notice and Release Document which contains important information about your rights concerning these investigations.**

Signature of Registered Representative (applicant) _____ Date _____

Broker-Dealer Signature/Stamp _____ Date _____

- Attachments: Copy of NASD registration Copy(ies) of current life/variable annuity license
 Completed state appointment forms Other _____