



Servicing Agent / Payment Change Request

Please return completed form to agentchanges@nationallife.com.

The effective date of the change will be upon processing by the home office.

Section 1 (required): Policy Information

Include full social security/tax ID number if policy number(s) are unknown.

Policy Number(s):

Social Security Number/Tax I.D. Number:

Owner Name:

Owner Address:

☐ New owner address

Section 2 (if applicable): New Servicing Agent Information

☐ Change of servicing agent

Only one agent is allowed to be listed as the primary servicing agent.

New Agent Name:

New Agent Signature:

Percent:

NLG Number:

Agency:

Section 3 (if applicable): Payment Change

☐ I am changing my total salary reduction/deduction by \$ _____ per pay period for a total contribution of \$ _____.

This is a(n) ☐ Increase ☐ Decrease

☐ I am submitting a transfer/1035 request of \$ _____ from _____ (company).

☐ I have changed employers since starting my salary reduction/deduction _____ (new employer).

Indicate the commission split for the payment change.

Agent Name:

Percent:

NLG Number:

Agency:

Agent Name:

Percent:

NLG Number:

Agency:

Agent Name:

Percent:

NLG Number:

Agency:

Agent Name:

Percent:

NLG Number:

Agency:

Section 4 (required): Signature

Policy Owner Signature:

Date:

If any proposed servicing agent is a member of the same agency as the writing agent, and or seeks to become the servicing agent on any Elite, Elite 3, Elite 5 policy or any policy written on a high-low commission basis, such proposed servicing agent must be paid on the same commission basis (heaped/level) as the writing agent.