

## FLORIDA REPLACEMENT REQUIREMENTS

In the state of Florida, the following are the required replacement forms necessary to accurately initiate the replacement of any life policy or annuity contract, whether the existing contract or policy is with another carrier or with North American Company for Life and Health Insurance.

## **EXTERNAL REPLACEMENTS**

Form 6779Z-FL, Notice to Applicant Regarding Replacement of Life Insurance, is the replacement form required by Florida that must be completed on all external replacements. This form identifies the company name(s) and address(es) of the insurance product(s) that may be replaced. The replacing insurer is required to complete this form no later than the time of application. This form, as explained below, is also used to request comparative information of both the replacing and existing insurance contracts.

Form 6153Z-A is the Comparative Information Form that must be provided by the replacing insurer and existing insurer when requested by the applicant. The applicant requests this form by checking the "Yes" box on the Replacement Form 6779Z-FL. The replacing insurer/agent must complete this form prior to, or at the time of, application. A copy of the Comparative Information Form and Replacement Form is to be retained by the applicant.

Upon receipt of both original forms by the Annuity Division, copies are to be forwarded to the existing insurer. The existing insurer must complete their own Comparative Information Form and provide a copy to their insured.

## **INTERNAL REPLACEMENTS**

On all internal replacements, both forms 6779Z-FL, Notice to Applicant Regarding Replacement of Life Insurance, and form 6153Z, Policy Disclosure Form, are required to be completed. Form 6153Z, Policy Disclosure Form, should be completed by the insurer and provided to the applicant at the time of, or prior to, the signing of the new application. The form must be completed for each contract where existing funds are being used to fund the new contract. The original forms should be forwarded to the Annuity Division, a copy to be retained by the sales representative, and a copy given to the applicant.

Please follow the guidelines above when submitting applications involving replacements. Your cooperation in reviewing applications and replacement forms for completeness prior to submission will minimize potential delays in New Business processing. Additional information regarding replacements can be found in the Compliance Manual (8943Z), and is also available on our website at www.nacannuity.com.

