

Customer Service Information

Personal Insurance Yes No with _____

Group Insurance Yes No with _____

Group Disability Insurance Yes No with _____

Personal Disability Insurance Yes No with _____

Critical Illness Yes No with _____

Group Pension/RRSP Yes No

_____ Monthly Contribution with _____

RRSP's Yes No with _____

with _____

Non-Reg Yes No with _____

with _____

House Own Rent with _____

Mortgage _____ Renewal Date _____

Insured(covered) Yes No

Approx. Net Worth _____ Invest. Knowledge _____

Approx. Liquid Assets _____

Comments/Notes
