

## **Intake Form**

- For retirement account deals, please include a past account statement.
- For trust deals, please include a copy of the trust.
- Please email this completed intake form and the above documents, if applicable, to barry@equitylifellc.com.

## Investor 1

Name:			DOB:	
Street address:				
City:	State:	ZIP code:		
Phone number:	Alternate numbe	er:		
Email:	Social Securi	ity Number:		
Investor 2 (For joint investments only)				
Name:			DOB:	
Street address:				
City:	State:	_ZIP code:		
Phone number:	Alternate numbe	er:		
Email:	Social Securi	ity Number:		
Investment Details				
Portfolio:	Amo	ount:		
Cash				
Individual	Trust			_Corporation
OR				
IRA				
Traditional	Roth			_SEP
1000 Northwest Street, Suite 1200, Wilmington, DE 19801 Phone: (800) 484-6414 - www.EquityLifeLLC.com				



## Employer Name: Employer Address: Employer Telephone: Mature of Employment: Position & Duties: Any other occupations or duties within the past five years: My net worth (or my net worth with my spouse, if I have one,) exceeds \$1,000,000 (Y/N):

Suitability (May be completed now or by the investor with the signing documents)

I had an individual income of \$200,000+ in each of the two most recent years, or if I have a my spouse, our

joint income was \$300,000+ in each of those two years, and I/we reasonably expect to reach the same

income level in the current year (Y/N): \_\_\_\_\_\_