

# **TOPGUN Financial Services, LLC**

## **Privacy Policy**

At TOPGUN Financial Services, LLC, protecting your privacy is very important to us. We are committed to safeguarding the information you provided us and to use it responsibly. Because of our commitment to you, we have adopted and adhere to the following policy regarding the privacy of your personal information.

### **Collection of Information**

We collect nonpublic financial information about you from some or all of the following sources:

- Information we receive from you on applications, new accounts forms, and fact-finding questionnaires;
- Your transactions with us, our affiliates, and those product sponsors with whom we have vendor agreements or other arrangements for the provision of services to you;
- Information we receive from non-affiliated third parties, including but not limited to consumer reporting agencies; and
- Affiliated and unaffiliated product sponsors with whom we have selling relationships and whose products you own

### **Disclosure of Information**

We will not share nonpublic personal information concerning our potential, current former customers with affiliated or unaffiliated third parties, except as permitted by law. Nor will we share this information for marketing purposes, except as permitted by law. Generally, we may disclose customer nonpublic personal information to affiliates and nonaffiliated third parties that provide services to us or have contracts with us to supply the products or services that you have requested through us. Examples of third parties with whom we may share your information include:

- Insurance companies, mutual fund companies, insurance support organizations, and other product sponsors to effect purchases and sales and allow for the servicing of your account;
- Your agent or broker/dealer;
- Clearing agencies through whom we clear and settle securities transactions;
- Third party investment advisory firms with whom we have relationships for the management of customer advisory accounts;
- Businesses , like banks and other financial institutions with whom we have an agreement for the marketing and sale of products and services;
- Regulatory of law-enforcement authorities; and
- Record keeping companies

Where we share your nonpublic information with third parties for the purpose noted above, we ensure that there are contractual restrictions on their use and disclosure of that information.

## Protection of Information

We have security practices and procedures in place to prevent unauthorized use or access to your nonpublic personal information. Within TOPGUN Financial Services, LLC, your information is only available to those individuals requiring access to process or service your transactions with us, and those fulfilling compliance, legal or audit functions on our behalf. We maintain physical, electronic and procedural safeguards to ensure the protections of your nonpublic personal information in accordance with state and federal regulations.

Applicant acknowledges, understands and agrees as follows:

- that Applicant has filed an application with TOPGUN Financial Services, LLC intending to secure life insurance from one or more insurance underwriters.
- that, in the course of applying for life insurance coverage, TOPGUN Financial Services, LLC has asked for and received information concerning Applicants medical condition and history, as well as other information that is of a personal and confidential nature.
- that TOPGUN Financial Services, LLC will provide that information, or parts of it, to a number of potential insurers and their agents, employees and representatives.
- that, TOPGUN Financial Services, LLC, or will maintain an electronic data interchange ( the "Interchange") through which certain authorized underwriters and/or other insurance industry representatives ( referred to in this Waiver as "Underwriters") may gain access to information concerning persons either covered by or applying for coverage under insurance policies issued and serviced by those Underwriters.
- that, TOPGUN Financial Services, LLC will use the Interchange to store some or all of the confidential and personal information Applicant has provided to TOPGUN Financial Services, LLC, and, therefore, that Underwriters will be able to gain access to that information through the Interchange.
- that, the Underwriters will gain access to the Interchange via the internet or other, similar computer-based telecommunications systems.
- that, even though TOPGUN Financial Services, LLC has in place security measures TOPGUN Financial Services, LLC, believes appropriate to protect the Interchange and the information it contains from unauthorized access and use, and even though TOPGUN Financial Services, LLC will continue to upgrade those security measures from time to time as circumstances warrant, TOPGUN Financial Services, LLC can make no guarantee as to TOPGUN Financial Services, LLC ability to protect the Interchange and the information it contains from unauthorized access by "hackers" or persons, who through wrongful means, may bypass the security measures protecting the integrity of the Interchange.
- that, TOPGUN Financial Services, LLC cannot control the use, dissemination, publishing or interpretation of the information contained in the Interchange once that information is gathered by an Underwriter

- that, Applicant will hold harmless from and against any unauthorized access to or use of, by any person or company, any information pertaining to Applicant in TOPGUN Financial Services, LLC possession and/or stored on the Interchange.
- that, Applicant will indemnify TOPGUN Financial Services, LLC for all costs and expenses incurred by TOPGUN Financial Services, LLC or any of its employees, shareholders, directors, agents or representatives in enforcing this Waiver. Applicant has evidenced his/her acknowledgment, understanding and agreement with respect to the foregoing by signing this document below.

Applicant has evidence his/her acknowledgement, understanding and agreement with respect to the foregoing by signing this document below.

**I ACKNOWLEDGE** that I may request to receive a copy of this document.

**I AGREE** this form shall be valid for two and one half years from the date shown below.

Signed on this date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
\_\_\_\_/\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Soc. Sec#: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

X

\_\_\_\_\_  
Signature of Proposed Insured/Parent or Guardian

X

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Printed name of Proposed Insured/Parent or Guardian