

## TO COMPLETE THE PROCESS OF YOUR STRUCTURED SETTLEMENT

### WE WILL NEED THE FOLLOWING FROM YOU:

Please indicate all documents submitted by a check mark ( X ) in space provided

**AUTHORIZATION** Signed and Dated, along with your social security #

**SETTLEMENT AGREEMENT and RELEASE** documents from your settled case releasing the defendants and everyone involved also stating what was agreed upon. **Please make sure you have signed copies.** If you do not have this you may call your attorney who handled your case, or the courthouse where you settled the case.

**ORDER APPROVING MINORS CLAIM and DISMISSAL TO THE ORDER OF MINORS CLAIM.** (if applicable) These are documents that gave court approval for you to enter into a Settlement. If you do not have this you may call your attorney who handled your case, or the courthouse where you settled the case. (these documents are only applicable if your case settled when you were a minor).

**ANNUITY CONTRACT AND BENEFITS LETTER** Annuity contract is the policy that your Insurance Company issued to you when you settled your case. Benefits letter is a typed letter on your Insurance Company's letterhead listing the scheduled payments. If you do not have this you may contact the Insurance Company making payments to you, and ask for copies to be sent to you. In most cases you will have to write a letter requesting the paperwork.

**QUALIFIED ASSIGNMENT** (if applicable) A qualified assignment occurs when the defendant's insurance company assigns all of their liabilities and obligations to make the Periodic Payments to another insurance company .

**APPLICATION** To be completed in detail and signed.

**RECENT CHECK STUB OR RECENT BANK STATEMENT** only needed if you are receiving monthly payments. If you have the payments wired into your bank account, please send your most recent bank statement indicating the wired funds.

**CLEAR PHOTO ID** please make sure the photo is clear. Sometimes it is difficult to copy a picture clearly. If this is a problem you may send us an old picture along with your copied ID.

**SECOND ID** this may be a copy of your social security card, birth certificate, marriage license, passport or all of the above mentioned.

**INCOME TAX RETURN** WE ONLY NEED THE FIRST PAGE.

**DIVORCE DECREE OR SEPARATION PAPERS & Property disbursement schedule** (if applicable)

**BANKRUPTCY DOCUMENTS AND DISCHARGE** (if applicable)

## STRUCTURED SETTLEMENT PROCESSING

This letter has been designed for you to use as a reference so that you have a step-by-step outline explaining to you how your transaction will occur. Your cooperation in all steps will insure that your transaction is completed in a timely manner so that you can receive your money as quickly as possible.

The first step is to return our application completed, include a clear copy of your photo ID, your most recent annuity check stub (if applicable), a copy of your Annuity Contract, signed copy of your Settlement Agreement, Qualified Assignment, (if applicable) and if you were a minor when your Settlement occurs, a copy of the Order for the Minors Claim, (if applicable). **If you are missing any of the documentation, send us everything you have and we will help you to obtain the missing documentation.**

After we have received and reviewed your documentation, we begin our internal process. The amount of information you have provided to us will determine how long you can anticipate receiving closing documents. Normally it will be within 2 to 5 business days after we receive the initial documentation back from you.

Once the file review has been completed, we will create and issue to you the closing documents. The closing documents consist of a *Disclosure Statement*, which outlines the financial terms of the transaction and the *Transfer Agreement*, which outlines the legal terms of the transaction. Based on the State statute where we will be petitioning for the Court's Approval, the Disclosure Statement and Transfer Agreement may be sent together or separate. If the Disclosure Statement is sent separate, the Transfer Agreement will be sent to you upon our receipt of the signed Disclosure Statement, but no sooner than ten (10) days after the Disclosure Statement was initially sent to you.

Once you receive the closing documents, **review them completely.** If you have any questions, give me a call and I will be glad to review those items on which you have questions. After this review, **you will need to take the contract to a notary and sign the contract in front of the notary.** The notary will need to notarize each of your signatures, where noted. Once completed, you will need to send the closing documents back to us.

After we receive the closing documents, we will review them. We then continue with our internal process. At which point, we will pull your credit and search records for UCC filings, judgments, liens and child support obligations against you. We may either pay or escrow funds to satisfy any lien filed against you or the periodic payment if necessary, and deduct the amount from the purchase price. If we are not satisfied with the results of our investigation, in our Sole and Absolute discretion we shall have the right to cancel your request.

To continue the sale process we will copy the closing documents to the attorney representing the Transfer, with information on proceeding with the Court Order. Once the transfer has been approved and Ordered by the Court, an acknowledgement letter is sent to the insurance company. Upon our receipt of the acknowledgement letter, our final funding review is started. Provided that everything is complete, funding is set up and will take place within ten (10) business days after final approval has been received.

If you have any questions regarding this process, please give me a call so that we can discuss them.

**Please acknowledge receipt by signing here:** \_\_\_\_\_

**APPLICATION FOR THE SALE OF STRUCTURED SETTLEMENT ANNUITY PAYMENTS**

**Seller(s) must fill in the following information. If an answer to the question is "None" or "Not Applicable," you must so indicate.**

1. Applicant's Name: \_\_\_\_\_ 2. Mother's Maiden Name: \_\_\_\_\_

3. Do you have an Alias or Maiden Name: \_\_\_\_\_

4A. Applicant's Street Address and Apt. No., City, State & Zip Code: \_\_\_\_\_

\_\_\_\_\_

4B. County or Parrish: \_\_\_\_\_ 4C. How long have you lived at your current address? \_\_\_\_\_

4D. Phone: Home \_\_\_\_\_ 4E. Cell \_\_\_\_\_ 4F. Email: \_\_\_\_\_

5A. Landlord's Name (if applicable): \_\_\_\_\_ 5B. Phone: \_\_\_\_\_

6. List previous addresses for the past ten (10) years and length of time at each:

6A. Address: \_\_\_\_\_

6B. Address: \_\_\_\_\_

6C. Address: \_\_\_\_\_

7A. Applicant's Date of Birth: \_\_\_\_\_ 7B. Applicant Social Security Number: \_\_\_\_\_

7C. Applicant Driver's License Number: \_\_\_\_\_ 7D. State: \_\_\_\_\_

8A. Are you currently employed?  Yes  No 8B. Name of Employer: \_\_\_\_\_

8C. Address: \_\_\_\_\_

8D. Length of Time: \_\_\_\_\_ 8E. Occupation: \_\_\_\_\_

8F. Work # ( ) \_\_\_\_\_ 8G. Fax # ( ) \_\_\_\_\_

8H. Annual Salary: \_\_\_\_\_ 8I. Length of time in current position: \_\_\_\_\_

9. If less than two years, list your previous employer: & length of time with employer: \_\_\_\_\_

10. Do you have any disabilities that prevent you from working? Yes No If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

11. Marital Status (check one):  Single  Divorced  Separated  Married  Widowed

12A. If Married, Spouse's Name: \_\_\_\_\_ 12B. Marriage Date: \_\_\_\_\_

12C. Spouse's Date of Birth: \_\_\_\_\_ 12D. Spouse's Social Security Number: \_\_\_\_\_

12E. Spouse's Driver's License Number: \_\_\_\_\_ 12F. State: \_\_\_\_\_

13A. Spouses Employer: \_\_\_\_\_ 13B. Occupation: \_\_\_\_\_

13C. Employers Phone Number: \_\_\_\_\_ 13F. Spouse's Salary: \_\_\_\_\_

14A. Name of closest relative not living with you: \_\_\_\_\_ 14B. Relationship to you: \_\_\_\_\_

14C. Mailing Address: \_\_\_\_\_ 14D. Phone: ( ) \_\_\_\_\_

15. Have you been divorced or separated since the settlement?  Yes  No If yes, please provide additional information:

16A. Name of Ex-Spouse #1: \_\_\_\_\_ 16B .Social Security Number: \_\_\_\_\_

16C. Ex-Spouse's Address: \_\_\_\_\_ 16D. Date Divorced: \_\_\_\_\_

16E. Divorce Attorney's Name \_\_\_\_\_ 16F. Phone No. (\_\_\_\_) \_\_\_\_\_

16G. Name of Ex-Spouse #2: \_\_\_\_\_ 16H. Social Security Number: \_\_\_\_\_

16I. Ex-Spouse's Address: \_\_\_\_\_ 16J. Date Divorced: \_\_\_\_\_

16K. Divorce Attorney's Name \_\_\_\_\_ 16L. Phone No. (\_\_\_\_) \_\_\_\_\_

17. Dependents: Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

18A. Do you pay child/spouse support?  Yes  No 18B. If yes, how much per month? \$ \_\_\_\_\_ 18C. County? \_\_\_\_\_

18D. To Whom: \_\_\_\_\_ 18E. Address: \_\_\_\_\_

18F. Are you in arrearage?  Yes  No 18G. If yes. Total amount of arrearage: \$ \_\_\_\_\_ 18H. Case No.: \_\_\_\_\_

18I. If agency case, provide contact information: \_\_\_\_\_

18J. If court case, provide court information: \_\_\_\_\_

19A. Do you have any tax liens or unpaid taxes?  Yes  No 19B. If yes, please describe: \_\_\_\_\_

20A. Do you have any outstanding judgments?  Yes  No 20B. If yes, please describe: \_\_\_\_\_

21A. Have your settlement payments ever been garnished?  Yes  No 21B. If yes, please explain: \_\_\_\_\_

21A. Have you ever entered a plea of guilty (or been found guilty) or no contest to a felony?  Yes  No

21B. If yes, please explain when, where and nature of crime: \_\_\_\_\_

22A. Are you currently involved in any legal action?  Yes  No 22B. If yes please describe: \_\_\_\_\_

23A. Have you ever filed for bankruptcy? (Attach all documents)  Yes  No 23B. Year filed: \_\_\_\_\_ 23C. State Filed: \_\_\_\_\_

23D. Is the bankruptcy currently open? \_\_\_ Yes \_\_\_ No 23F. Please explain when and where, and if discharged: \_\_\_\_\_

23G. Check one  CH. 7  CH.13

24A. Have you ever sold or assigned any of your structured settlement payments (including pledging the payments as collateral to repay a loan)?  Yes  No 24B. If yes, please explain when, how much and to whom: \_\_\_\_\_

25A. In the last 12 months have you applied for a similar type of funding and have been rejected?  Yes  No

25B. If so, please provide the name of the funding source: \_\_\_\_\_

26. Do you have other income that you wish to have considered for a credit decision? (Describe) \_\_\_\_\_
27. Why do you want to sell your structured settlement payments? \_\_\_\_\_  
\_\_\_\_\_
28. Specify the amount of money you need to raise to fulfill your financial need. \_\_\_\_\_
29. What payments are you interested in selling (Amount & Dates): \_\_\_\_\_  
\_\_\_\_\_
- 30A. From which insurance company do you receive your structured settlement payments? \_\_\_\_\_
- 30B. Insurance Company Address: \_\_\_\_\_
- 30C. Contact Name: \_\_\_\_\_ 30D. Phone (\_\_\_\_) \_\_\_\_\_
- 30E. Policy Number: \_\_\_\_\_ 30F. Policy Owner's Name: \_\_\_\_\_
31. The structured settlement payments are sent via:  Check  Direct Deposit
32. Address mailed to: \_\_\_\_\_
33. For monthly payments, what day of the month do you usually receive your annuity payment? \_\_\_\_\_
34. What is the date of the final guaranteed payment? \_\_\_\_\_
35. Do payments continue after the guaranteed period for the life of the Annuitant? Yes No
36. Who is listed as payee on the checks? \_\_\_\_\_
37. Who is listed as the annuitant on the annuity policy? \_\_\_\_\_
38. Who is/are your current beneficiary (ies) in the event of your death? \_\_\_\_\_
- 39A. Have you ever changed the beneficiary?  Yes  No 39 B. If yes, name of previous beneficiary: \_\_\_\_\_
- 40A. Who was the attorney who represented you in your settlement? \_\_\_\_\_
- 40B. Attorney's Address: \_\_\_\_\_
- 41A. Was the annuity a result of (check box)  Court Judgment  Out-of-Court Settlement Agreement
- 41B. Original Defendant \_\_\_\_\_
- 41C. Date of Settlement: \_\_\_\_\_
- 41D. State where settlement occurred: \_\_\_\_\_
- 41E. What was the primary injury the settlement provided for? \_\_\_\_\_
- 41F. Was your settlement the result of a workers compensation claim? Yes No
- 41G. Where you a minor at time of settlement? Yes No 41H. Age \_\_\_\_\_
- 41H. Besides the Annuitant, were others listed as plaintiffs in the original Settlement Agreement?  Yes  No
- 41I. If yes, who? \_\_\_\_\_
42. Are you currently applying for structured settlement financing through a firm other than First Providian, LLC?  Yes  No

**Authorization to Conduct Credit and Criminal Background Check**

I hereby authorize Prosperity Partners, Inc., and/or its assigns, to conduct any and all criminal background checks and any and all credit history reports, searches, or checks that it, in its sole discretion and judgment, deems necessary or advisable.

**Authorization to Release Information**

I hereby authorize Prosperity Partners, Inc. and/or any of their successors, assigns, designees, agents or administrators to disclose, make available and furnish to them any and all information pertaining to my settlement as set forth below. I specifically direct that the Annuity Issuer and Annuity Owner, Attorney that represented me in the settlement, or any of their successors, assigns, designees, agents or administrators cooperate and make available and furnish to Prosperity Partners, Inc. and/or its assigns any and all documentation and information pertaining or related to my settlement agreement and annuity policy. Please Provide copies via fax or otherwise of any and all documents requested by Prosperity Partners, Inc., and/or its assigns regarding my settlement agreement and/or annuity policy. This also authorizes Prosperity Partners, Inc., and/or its assigns to contact next of kin for data resources. Any requested information can be faxed to Prosperity Partners, Inc. at 1-800-938-3700 or sent via US regular mail to Prosperity Partners, Inc. at 824 US Highway One, Suite 100, North Palm Beach, Florida 33408.

**Acknowledgement of Fraud Prevention System Inquiry**

I hereby acknowledge that the National Association of Settlement Purchasers maintains records of individuals who sell, assign or otherwise hypothecate structured settlement annuity payments. I authorize you to check the records of said association for such activity.

By signing below, I / we understand that any intentional misrepresentations on my / our part will result in the immediate cancellation of the transaction.

**I HEREBY CERTIFY THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT.**

Applicants Signature \_\_\_\_\_

Date \_\_\_\_\_

State of )  
 )  
County of )

The foregoing instrument was acknowledged before me this \_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, by \_\_\_\_\_, who is presently known to me or who produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
Notary signature

Notary Seal

\_\_\_\_\_  
Printed Name

Date \_\_\_\_\_

Attn: Structured Settlement Dept.

To Whom It May Concern:

I am currently trying to qualify for a loan. The finance company I am working with is requesting proof of my annuity income. My contract number is \_\_\_\_\_ and my Social Security number is \_\_\_\_\_.

I am requesting a complete copy of my annuity policy. I am also requesting an updated benefits letter outlining my benefits, how long the payments will last, and who is the designated beneficiary.

Please send the letter to me via fax at 800-938-3700, and also mail the originals to me at:

Please mail the letter to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sincerely,

State of                    )  
                                  )  
County of                )

The foregoing instrument was acknowledged before me this \_\_\_ day of \_\_\_\_\_, 20\_\_, by \_\_\_\_\_, who is presently known to me or who produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
Notary signature

\_\_\_\_\_  
Printed Name

Notary Seal

Date \_\_\_\_\_

Attn: Structured Settlement Dept.

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sincerely,

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                                  )  
County of                )

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\_\_\_\_\_  
Notary signature

\_\_\_\_\_  
Printed Name

Notary Seal