



Prospective Advisor

# Questionnaire



Name			Today's Date:		
City	State	Zip	Phone		
Current Broker Dealer			Email Address		
How did you hear about BDFS/IAC?			Avg. Annual Production (last 2 yrs):		

Please answer the following questions about you and your business:

Do you have a non-compete with your current B/D or similar agreement?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you currently have any pending or open inquiries or disclosures with FINRA?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you have any convictions to any Felony or investigations by FINRA, SEC, the state, or Insurance Dept.?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you personally filed a bankruptcy petition or declared bankruptcy? Do you have liens?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you have unsatisfied judgements, garnishments or liens against you or unresolved matters with IRS?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you have brokerage accounts?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you sell insurance? (Fixed, Fixed Index, LT, DI, Life)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you sell alternative products or do you have any in your book of business?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you provide advisory services? (Advisory Managed, Third Party, Fin Planning) Who is the custodian?		
Do you do fixed and/or variable insurance? Do you currently use an IMO? What insurance carriers?		
What is your annual gross dealer concession? (proof is requested on application)		
What is your mix of brokerage/advisory/insurance/alternative investments?	/ / /	
Of your annual GDC, how much is reoccurring income? (Trails and advisory fees)		

### What brings you to BDFSC/IAC?

Reason:								
When are you looking to transition?	Now to 3 mo	<input type="checkbox"/>	3 to 6 mo	<input type="checkbox"/>	6 mo to 1 yr	<input type="checkbox"/>	1yr +	<input type="checkbox"/>
What do you expect from your future B/D?								

If you have any additional comments that you feel would be necessary, please let us know here: (250 characters only)

I hereby certify that to the best of my knowledge and belief the information contained in this questionnaire is true and correct. You may type your name and date.

Signature : \_\_\_\_\_ Date: \_\_\_\_\_

You may send this via email to [joinus@bdfs.com](mailto:joinus@bdfs.com), fax it to 515-727-6764 Attn: Recruiting Team or mail.

Broker Dealer Financial Services Corp. • Member <a href="#">FINRA &amp; SIPC</a> divisions: BDF Investments & IBA Securities • (515) 727-6700 Investment Advisors Corp. • (515) 727-6720	140 South 68th Street, #2200, West Des Moines, IA 50266 Mailing Address: P.O. Box 71339, Clive, IA 50325-0339 Facsimile: (515) 727-6790 • Toll-Free (800) 352-5634
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LETTER OF EXPLANATION OF

DISCLOSURES, BANKRUPTCY, LIENS, JUDGEMENTS, GARNISHMENTS OR CONVICTIONS

Date of Action: \_\_\_\_\_

Action: \_\_\_\_\_

Reason: \_\_\_\_\_

Explanation: \_\_\_\_\_

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Date of Action: \_\_\_\_\_

Action: \_\_\_\_\_

Reason: \_\_\_\_\_

Explanation: \_\_\_\_\_

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Date of Action: \_\_\_\_\_

Action: \_\_\_\_\_

Reason: \_\_\_\_\_

Explanation: \_\_\_\_\_

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**\*NOTE\* Use additional paper if necessary**

Professional Titles & Designations: \_\_\_\_\_

To which professional associations to do you belong? \_\_\_\_\_

What positions (if any) have you held in any of the associations listed above?

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

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References:

\_\_\_\_\_ *Email* \_\_\_\_\_ *Phone*

\_\_\_\_\_ *Email* \_\_\_\_\_ *Phone*

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