

USPS First Class Mail Address:

Great-West Financial
 Attn: RROC
 PO Box 173920
 Denver, CO 80217-3920



GREAT-WEST
 FINANCIAL™

Annuity Service Center
 Phone: 1-800-838-0650 (Option 2)
 Fax Number: (866) 442-3887

Overnight Address:

8515 E. Orchard Road 8T2
 Greenwood Village, CO 80111

ANNUITY INVESTMENT ADVISOR ONLINE ACCESS FORM

The Investment Advisor named below requests user IDs and passwords to establish Great-West Advisor Navigator access for its authorized representatives. Advisor Navigator is the primary tool used by the Investment Advisor's representatives for on-line annuity account management, including checking account balances, making transfers among investment options, reallocating future contributions, downloading quarterly statements and e-mail notification of product regulatory updates. The Investment Advisor identified in Part I agrees to notify Advisor Navigator in the event that any of the below users' access is terminated. The identified users listed below will receive an e-mail notification when their Advisor Navigator authorization request has been completed.

SECTION 1: INVESTMENT MANAGER FIRM INFORMATION

If the Investment Management Firm has multiple Master Account Numbers with different contacts, please complete one login form for each Master Account Number.

Firm Name	Master Account Number		
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>		
Firm Address	City	State	Zip-Code
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Contact Name	Contact Phone		
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>		
Contact Email	<input style="width: 95%;" type="text"/>		

SECTION 2: ANNUITY ACCOUNT MANAGER(S) LOG-IN REQUEST INFORMATION

To obtain web-access for **Great-West Advisor Navigator** users requiring access to your plan, please complete the following (addendums may be attached as needed):

Requested Action: New Request Modify Terminate

First Name	Last Name	Last 4 of SSN
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Date of Birth (mm/dd/yyyy)	Male <input type="checkbox"/>	Email Address
<input style="width: 95%;" type="text"/>	Female <input type="checkbox"/>	<input style="width: 95%;" type="text"/>
		Phone
		<input style="width: 95%;" type="text"/>

Requested Action: New Request Modify Terminate

First Name	Last Name	Last 4 of SSN
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Date of Birth (mm/dd/yyyy)	Male <input type="checkbox"/>	Email Address
<input style="width: 95%;" type="text"/>	Female <input type="checkbox"/>	<input style="width: 95%;" type="text"/>
		Phone
		<input style="width: 95%;" type="text"/>

SECTION 2: ANNUITY ACCOUNT MANAGER(S) LOG-IN REQUEST INFORMATION (CONTINUED)

Requested Action: New Request Modify Terminate

First Name	Last Name	Last 4 of SSN	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Date of Birth (mm/dd/yyyy)	Male <input type="checkbox"/> Female <input type="checkbox"/>	Email Address	Phone
<input type="text"/>		<input type="text"/>	<input type="text"/>

Requested Action: New Request Modify Terminate

First Name	Last Name	Last 4 of SSN	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Date of Birth (mm/dd/yyyy)	Male <input type="checkbox"/> Female <input type="checkbox"/>	Email Address	Phone
<input type="text"/>		<input type="text"/>	<input type="text"/>

SECTION 3: EXISTING CONTRACT(S)

Please indicate the existing contract numbers you are requesting web-access for in **Great-West Advisor Navigator**.

Contract Number	Contract Number
<input type="text"/>	<input type="text"/>
Contract Number	Contract Number
<input type="text"/>	<input type="text"/>
Contract Number	Contract Number
<input type="text"/>	<input type="text"/>
Contract Number	Contract Number
<input type="text"/>	<input type="text"/>
Contract Number	Contract Number
<input type="text"/>	<input type="text"/>

SECTION 4: AUTHORIZATION AND SIGNATURES

Annuity Management Investment Advisor Administration Agreement

By signing this form, the Investment Advisor hereby agrees to the terms and to the responsibilities outlined as the Advisor Navigator Website Terms and Conditions of Use on Great-West Advisor Navigator. The Investment Advisor also agrees that the User Names listed are authorized to use the Annuity Account Management Tools.

FURTHER, THE INVESTMENT ADVISOR HEREBY AGREES TO NOTIFY EACH OF THE USER NAMES LISTED TO MAINTAIN THE CONFIDENTIALITY OF LOGON AND PASSWORD INFORMATION PROVIDED BY GREAT-WEST ADVISOR NAVIGATOR AND TO NOT SHARE SUCH INFORMATION WITH ANY THIRD PARTIES.

Print Name	Title
<input type="text"/>	<input type="text"/>
Signature	Date (mm/dd/yyyy)
<input type="text"/>	<input type="text"/>