

GUARANTEED ISSUE GROUP LIFE AND DISABILITY INSURANCE APPLICATION (New York Residents)



PLEASE PRINT IN INK OR TYPE ALL ANSWERS. INITIAL AND DATE ANY CHANGES YOU MAKE. DO NOT USE CORRECTION FLUID OR GEL PENS.

Name (First, MI, Last	:)					Sex:	M D F		Title 32	Title 5	;		
Address				City				ZII)	Age	Birth D	ate	
Work Phone Number Home Phone Number				SSN	N Date of Employme			mploymen	<u>I</u> nt				
Location of Paying Office/Number Employing Office				Annual Salary			Job Duty E		Enrolle	Enroller Code			
GROUP LONG TERM					SABILITY INSURANCE								
Insurance requested: I hereby apply for the following coverage(s) checked below. ✓ Check the box for the coverage you want based on your salary, either BASIC or BASIC+SUPPLEMENTAL. Rates are based on bi-weekly deductions. Refer to the brochure for eligibility, options and coverage description.													
SALARY UNDER \$18,000 Your Age				SALARY \$24,000 - \$25,999				Your Age					
)-59 4.95		THLY B 600 Bas	ENEFITS				der 40 2.50	40-49 \$ 6.75	50-59 \$18.30	
	+ \$400 Supplement			9.55				Sup	plemental		4.10	\$10.35	\$27.50
SALARY \$18,000 - \$19,999 Your Age							26,000	- \$	27,999			Your Ag	
MONTHLY BEN ☐ \$600 Basic			Under 40 40-49 50-		MONTHLY BENEFITS \$600 Basic				Unde \$ 2.			40-49	50-59 \$18.30
	+ \$400 Supplement	\$ 2.50 tal \$ 3.30		8.30 2.90				Sup	plemental		4.50 4.50	\$ 6.75 \$11.25	\$18.30
SALARY \$2	0,000 - \$23,999		Your Age		SAL	ARY \$	28,000	- \$	29,999			Your Ag	e
MONTHLY BEN	NEFITS	Under 40)-59	MON	THLY B	ENEFITS				der 40	40-49	50-59
\$600 Basic	+ \$500 Supplement	\$ 2.50 tal \$ 3.70		8.30 5.20		'00 Bas		Sur	plemental		3.00 5.00	\$ 8.10 \$12.60	\$21.65 \$31.55
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		☐ \$700 Basi	ic c + \$800 Suppler	mental	\$ 3.00 \$ 5.40		\$ 8.10 \$13.50		\$21.65 \$35.45				
									755.45				
GROUP TERM LIFE INSURANCE Insurance requested: I hereby apply for the following coverage(s) checked below. ✓ Check the box for the coverage you want based on your age, either TechLife or TechLife + GUARD LIFE. Rates are based on bi-weekly deductions. Refer to the brochure for eligibility, options and coverage description.													
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