

Specializing in Employee Benefits

Hartford New York New Business Submission Checklist

Group Insurance Application	
Cu	rent Census (in lieu of individual enrollment forms) t Month's Premium Check Payable to: ford Life (Business Check Required) rent Benefit / Booklet (if applicable)
	est Month's Premium Check Payable to: rtford Life (Business Check Required)
Cu	rrent Benefit / Booklet (if applicable)
Per	rsonal Health Statement (if applicable)
	rms Must Be Submitted to PGP Office ays prior to the effective date.

If you have any questions, please contact your PGP representative.