

Specializing in Employee Benefits

Sun Life NY LTD 10 to 24 Lives New Business Submission Checklist

	Group Application
\$	Special Risk Questionnaire
]	Final Census OR Enrollment forms
]	Policy Holder Information Form
	Group Life Insurance Transition Form
	Copy of Sold Proposal
]	Prior Carrier Booklet (if applicable)
	First Month's Premium Check Payable to: Sun Life
	Forms Must Be Submitted to PGP sprior to the effective date

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