



LATE SUBMISSION FORM

Dear Producer:

This form must be completed, signed and submitted to Health Republic Insurance of New York's Small Group Underwriting Department by the group administrator, along with their completed group enrollment paperwork and first month's premium.

Since you are submitting a new group enrollment application seven business days or fewer prior to the effective requested effective date, you must inform the Group Administrator that their group's application and coverage will take up to 15 business days to process once received.

As a condition of our acceptance of this application, given its late submission, please review the following statement and have the group administrator sign in the space provided.

I as the group administrator of _____ (the "Group") certify that the Group agrees and acknowledges that it is requesting a coverage effective date that will result in Health Republic Insurance of New York receiving the groups application and paperwork Seven or fewer business days prior to the requested coverage effective date. Upon approval of our request for insurance, we acknowledge that delivery of our identification cards and system activation may occur after our effective date.

The submission of this form is not a guarantee of late acceptance of the group's application.

Group Name: _____ Requested Effective Date: _____

Group Administrators Name: _____

Signature: _____

Date: _____

Please submit this form with your completed group enrollment paperwork and payment. Partial applications are not accepted nor will partial applications "hold" an effective date.