

Inshore Benefits

EMPLOYEE INFORMATION Employee Last Name: Employee Last Name:	Employer Name:	Employee Application — CO								
Employee Last Name: cial Security #: Date of Hire: State: Zip Code: Email: Your email address will not be used for any purpose other than communications from Inshore Benefits Trust. Pour email address will not be used for any purpose other than communications from Inshore Benefits Trust. Rew Coverage (give reason below) Date of Qualifying Event: New Group Enrollment Open Enrollment New Hire Rehire within 30 days - Reinstate to term date Rehire more than 30 days - subject to group's new hire waiting period Part-time to Full-time Waiving Coverage Other Other Waving Coverage Members who waive coverage must have a qualifying event or ait until open enrollment to enroll on the plan at a later date. We Wire or Member with Qualifying Event: We must receive the completed application within 30 days of the date of hire or of the qualifying event. The Enrollee: A late enrollee is an employee and/or their dependently who has submitted their Enrollment Application more than 30 days after their eligibility date. These employee's and/or dependent(s) ust have a qualifying event to enroll at a later date and provide proof of the qualifying event. Otherwise, the employee will not be eligible for coverage until the group's open enrollment period. Perpendent(s): An eligible dependent(s) is an individual's spouse/domestic partner, who is under age 26. An eligible dependent(s) is a pendent(s) and individual's spouse/domestic partner, who is under age 26. An eligible dependent(s)	Employer Name: Billing #:									
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Inshore Benefits is a product portfolio of North Ranch Benefits Trust | Website: InshoreBenefits.com Inshore Benefits is marketed by Warner Pacific Insurance Services, Inc. | Phone: (800) 801-2300 | Fax: (800) 609-0111 | Email: quoting@warnerpacific.com Inshore Benefits is administrated by Pathian Administrators | Phone: (800) 786-6525 | Fax: (818) 960-0141 | Email: inshore@pathianadministrators.com