



GROUP BENEFITS APPLICATION REQUEST

Groups less than 50 lives takes approximately 10 business days for turn around and larger groups take 10 – 15 business days due to the size and timelines the carriers require as well.

Please download and fill out the PDF application (you can either print and then scan it, or fill it out electronically and save it as a PDF file), then email the finished application to info@cannabisinsurancecanada.com

In order to quote we would require the following:

- **Employee Census (Next Page)**
- **Copy of your current plan design (if applicable)**
- **Copy of your most recent renewal (if applicable)**
- **Up to date claims experience no longer than 6 months old (if applicable)**
- **For virgin a plan design and census is required**

Name of Business:

Years in Business:

Full Address:

Website if Applicable:

Nature of Business:

Current Coverage: Yes No

Excluded Employees: Yes No

Employee(s) on Disability: Yes No

Disability Start Date:

Date of Birth:

Expected Return Date:

Monthly Benefit:

Type of Disability:

Any Disability in last 5 years: Yes No

All covered by WSIB: Yes No



CENSUS LISTING

Company Name:

Current As of:

[illegible]

Notes:

Employee Identifier: For confidentiality an identifier can be used such as a company payroll number etc.

Occupation: For risk classification, the insurance industry needs to know the type of work involved.

Earnings: If there are any income related benefits supplied then the earnings will be required.

Coverage: This refers to what the employee is currently covered for, i.e. Single, Family, Couple (married with no children) or Waiving - Covered through their Spouse.

Class: If there are more than one class involved then each employee must be identified appropriately.

- Class Description: 1 All Eligible Employees / 2 Management / 3 Full Time / 4 Part-Time / 5 Seasonal

Division Description: 1 – Location (Head Office) and/or 2 – Location (Other)

