

# **NEW GROUP SET-UP CHECKLIST**

• Please make sure all questions are answered completely.

### □ Employee Enrollment

Employee Applications or census enrollment spreadsheet

### □ Binder check for first month's premium

- Check copy: provide a copy of the front and back of the binder check.
- Premium checks should be made payable to <u>NWFA</u> and mailed directly to:

Mailing Address Physical Address

Vimly Benefit Solutions Vimly Benefit Solutions

NWFA NWFA

PO Box 6 12121 Harbor Reach Dr, Suite 105

Mukilteo, WA 98275 Mukilteo, WA 98275

□ Copy of the quote that was sold

If NOT currently a Washington Bankers Association (WBA)/Community Bankers of Washington (CBW) member:

#### ☐ WBA/CBW Membership

• Online Membership Application: <a href="https://www.bankerscontent.com/nwfawa">https://www.bankerscontent.com/nwfawa</a>

# Optional forms if required by group

- □ Common Ownership form
- □ Waiver Forms
- Most recent EOB for deductible credit

Please submit all new business group paperwork in a complete packet to DiMartino

Associates by the 15<sup>th</sup> of the month prior to the effective date:

