



# Notice of Portability Privilege

All of your group Life insurance has been terminated as of the termination date indicated.

You are hereby notified that you may be entitled to port the terminated group Life insurance in accordance with the terms of the group policy's portability provision, summarized in your Certificate of Group Insurance. The maximum portability period is summarized in your Certificate of Group Insurance.

An application for portability and quote can be obtained by submitting this Notice of Portability Privilege form to the email address, fax or address shown below.

Your application must be completed and returned with the first full premium within 31 days after the termination date indicated.

Name \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

\*Group policyholder \_\_\_\_\_

Group policy number \_\_\_\_\_

Termination date \_\_\_\_\_ Date of this notice \_\_\_\_\_

Original effective date \_\_\_\_\_ Life Amount terminated \$ \_\_\_\_\_

Reason for termination \_\_\_\_\_

Date of birth \_\_\_\_\_ Totally disabled?  Yes  No

\* If the group policy is self-administered or Third Party Administered, an employer signature is required to verify the above employee information.

Employer Signature \_\_\_\_\_ Title \_\_\_\_\_

Insurance products are underwritten by Union Security Insurance Company (Kansas City, MO) and administered by Sun Life Assurance Company of Canada (Wellesley Hills, MA) in all states except New York.

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