

Sold Small Group Checklist



Group Name: _____
Effective Date: _____
Broker: _____ Agency: _____

Be sure to upload the following to Jet-Insure:

- ODJFS (OBES) for Ohio groups OR
- Michigan Wage and Tax *UIA 1028 Form) for Michigan groups
- Current bill from previous carrier
- First months premium (copy uploaded; mail original to AE)
- *Implementation Page (signed)
- *Disclaimer Page (signed)
- *Certification of Eligibility
- *Common Ownership Certification
- *Group Pediatric Dental:
 - Attestation
OR
 - Application
- *Superior Vision Application
- Proof of Alliance association, if applicable
- *Employee Waivers, if applicable

Note: These documents can be found under "Help Material" or within the "Quote/Proposal PDF" in Jet-Insure.

OFFICE USE ONLY:

Marketing Rep: _____
Underwriter: _____
Plan Design: _____ Group Number: _____
Members: _____ Contracts: _____