

Missed Premium Payment Form

MAKE A COPY OF THIS FORM FOR FUTURE USE

INSTRUCTIONS

To make sure that your coverage is uninterrupted when a premium payroll deduction is missed:

1. **Make copies** of this form before filling it out so that you have a copy when needed.
2. **Complete** the form.
3. For each payroll deduction that was missed, you must **attach a personal or cashier's check (or a money order) made payable to RSL Specialty Products Administration**. If consecutive payroll deductions are missed, you must submit the total premium due for all missed payroll deductions.
4. **Mail the form and your payment** to the address below within 45 days from the pay period end-date in which the deduction would have been taken.

IMPORTANT INFORMATION

- We will not accept a Missed Premium Payment if you have never had a premium payment deducted from your paycheck, or if you are no longer part of the eligible group (for example: if your employment has been terminated).
- We will not accept a Missed Premium Payment after 45 days from the end of the missed pay period.
- Once you have sent in payment for three (3) consecutive missed premium payroll deductions, you must then begin to submit a copy of your paycheck stub for the 4th consecutive period, and any that follow.
- We will not accept your Missed Premium Payment without a completed Missed Premium Payment Form and, when required, a copy of your paycheck stub.

Remember: FAILURE TO PAY PREMIUMS, either through payroll deduction or by sending in a Missed Premium Payment, means that your insurance coverage is interrupted for that time period.

MISSED PREMIUM INFORMATION

Company Name:

Employee Name:

Employee SSN:

Begin Date(s):

End Date(s):

Amount Enclosed:

\$

Employee Signature: _____ Date: _____

SEND THIS FORM along with your payment and a copy of your paycheck stub (when required) to:

**RSL Specialty Products Administration
MISSED PREMIUM DEPARTMENT
509 S. LENOLA ROAD, BLDG. #2
MOORESTOWN, NJ 08057**