

Helpful Hints to the Policyholder Regarding your Policy and Premium

Please send all premium payments to the following address

Standard Security Life Insurance Company of New York
P.O. Box 2875
Clinton, IA 52733-2875

Please send all correspondence regarding your policy and policy changes to

Standard Security Life Insurance Company of New York
Attn: Policyholder Services Department
488 Madison Avenue Suite 803
New York, New York 10022
Phone 646-509-2100 | **Fax** 212-644-5786

Please Be Sure

To include your completed premium notice with the premium remittance.

To indicate your policy number on your check. If we cannot identify your policy, your payment will be returned to you, causing a delay in processing and possible cancellation.

To pay the premium on a timely basis. Policies cancelled numerous times for non-payment may not be reinstated.

To allow 7-10 working days for premium to be posted to your account.

To immediately notify us of an address change.

To keep your policy active. This coverage is required by law and non-compliance is subject to penalty by the Workers' Compensation Board.

Please Note

Do not include correspondence with your premium and do not indicate any changes on your premium notice. Policy changes that are requested on or submitted with your remittance will not be processed. All correspondence must be submitted separately to the proper address indicated above.

Your Form DB-120 (Blue wall poster) should be posted in a prominent area, advising employees of their coverage under the New York Disability Benefits Law.

This coverage is for non-job-related disabilities, including pregnancy, and should not be confused Workers' Compensation Coverage which covers job-related disabilities.

If you have any questions regarding the New York Disability Benefits Law, as it relates to your policy, please feel free to call our office.