

Ascot Enterprises, Incorporated



As you have filled out an applicataion to enroll in our group insurance, CBSA, we need to have a copy of your proof of insurance certificate from your former insurance carrier. Please indicate by marking the proper section below whether you have a certificate of insurance. If you do have a certificate of insurance, we will need it to send in with your application. If you do not have a certificate of insurance, pre-existing conditions may apply to your coverage.

_____ I have enclosed a copy of my certificate of insurance.

_____ I do not have a certificate of insurance and understand that pre-existing conditions may apply to my insurance coverage.

Name

Signature

Date

Witness