

RETURN TO: Laura A. Condon, Administrator
New Hampshire Life and Health
Insurance Guaranty Association
10 Chestnut Drive, Unit B
Bedford, NH 03110
Phone: (603)472-3734
Fax: (603)472-3741
lcondon@nhlifega.org

NEW HAMPSHIRE LIFE AND HEALTH INSURANCE GUARANTY ASSOCIATION

ACCEPTANCE OF THE PLAN OF OPERATION

The undersigned member insurer hereby accepts the Plan by causing its corporate name to be hereunto subscribed by its president or by an authorized officer. Each member so accepting does hereby declare its unqualified authorization to the Board to levy such assessments, and to take such other actions as are deemed by the Board to be necessary to assure the fair, reasonable and equitable administration of the Association, as required by law.

Enclosed please find a \$25.00 Class A assessment to be used for administrative purposes.

Date Accepted: _____

Name of Member Insurer: _____

NAIC# _____

Address: _____

Email: _____

By: _____

Printed Name: _____

Title: _____