

Please complete, sign and submit the Common Ownership Certification. This form must be filled out and returned.

COMMON OWNERSHIP CERTIFICATE

The Health Insurance Portability and Accountability Act of 1996 states that all persons treated as a single employer under subsection (b), (c), (m), or (o) of section 414 of the Internal Revenue Code of 1986 shall be treated as one employer.

Please list all companies that would qualify as one employer under the above referenced sections of the Internal Revenue Code.

Name of Group on Policy _____

Business Name

Employer Identification Number

I certify that the group named above is a single employer under section 414 of Internal Revenue Code of 1986 (26 U.S.C. Section 414 (b), (c), (m), or (o)), and under any applicable state law. I further certify that there are no other affiliated entities other than the ones listed above who are eligible to file a combined state tax return.

Signature _____

Date _____

Title _____

Company _____