Salary change request

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Experience the Benefits of People

Sirius Benefits
Sirius Benefits is a People Corporation Company

Group no. _____ **Firm no.** _____ **Firm name:** _____

Certificate no.	Plan member name	New monthly salary	Effective date of change
			DD / MM / YYYY
			DD / MM / YYYY
			DD / MM / YYYY
			DD / MM / YYYY
			DD / MM / YYYY
			DD / MM / YYYY
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			DD / MM / YYYY

Plan administrator signature		Date signed	DD / MM / YYYY

All changes are subject to the terms of the Group Contract(s) and any applicable legislation.

Reminder: Disability insurance is based on declared monthly income. Confirmation of income, deemed satisfactory by the insurer, will be required at the time of claim. This usually consists of the last two T1 General Income Tax returns. Premium refunds will not be issued for any discrepancies.

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