
COMPANION LIFE HEALTH STATEMENT (EOI) GUIDELINES

1. **Do not use whiteout.**
2. **All corrections must be dated and initialed.**
3. All portions must be answered.
 - a. Full physical address for employee
 - b. Full address for doctor (on page 1 and for number 11)
 - c. Height and weight
 - i. *If answered "yes" – must explain*
4. All questions must be answered.
 - a. Number 3 must be "yes" for the employee
 - b. *Number 11 can be "N/a" if the member does not know*
5. Explanations in box 11 must be in full – see the blurb in the box.
 - a. For *every* question answered "yes" in 4-10
 - b. Must include date
 - c. Must include name *and* address of physician/hospital
 - d. *The more details included, the better*

*****Please note, Underwriting may ask for explanations to answers marked "yes" in 1 and 2***

*****The EOI must be signed within 30 days for Underwriting to review***