SEIU 668
PSSU LOCAL UNIT HEALTH & WELFARE FUND

2589 Interstate Drive
Harrisburg, PA 17110-9602
(717) 526-4856
(888) 243-1524
FAX (717) 651-9529
www.pssuhwfund.org

STEVE CATANESE, CHAIR

LINDA R. WHITTINGTON, ADMINISTRATOR

NEW LOCAL UNIT APPLICATION

LOCAL UNIT NAME: _____
BUSINESS AGENT: _____
CONTRACT NEGOTIATIONS START: _____

PLEASE PROVIDE THE FOLLOWING INFORMATION:

1. Total number of employees _____
2. Number of Employee/Family Coverage _____
3. Number of Employee/Single Coverage _____
4. Number of Employee/Spouse Coverage _____

Benefit Plan Description and Cost Information Needed for:

_____ Prescription
_____ Dental
_____ Vision
_____ Short-Term Disability
_____ Long-Term Disability

Information Needed By: _____

RETURN THIS FORM TO THE HEALTH AND WELFARE FUND OFFICE.

_____ _____
BUSINESS AGENT DATE

_____
CONTACT NUMBER