



UNITY AND STRENGTH FOR WORKERS

Request for a Quote

Steelworkers Benefit Plan

90 Burnhamthorpe road west, Suite 410

Mississauga Ontario L5B 3C3

Phone: (905) 281-9948

Fax: (905) 281-2912

SBP@benefits-counsel.com

Marty Warren

Chairperson

Bill Anderson

Consultant

- Please provide all information requested below.
- Request that the employer complete the attached request for information form.
- All information should be returned at least 60 days prior to the expiration of the collective agreement

If at any time you or the employer require assistance, please contact Bill Anderson Phone: (905) 281-9948 Fax: (905) 281-2912

SBP@benefits-counsel.com

Instructions for union representative:

Staff Representative:

District:

Local Union Contact:

Phone:

Company Name:

Company Location:

Phone:

Company Contact:

Expiry Date:

Proposed Implementation date:

Reason for Quote (check all that Apply):

- Contract Expiration
- Early negotiation
- Re-opener due to financial hardship
- Employer requesting benefits concessions
- First contract negotiations

In order that your quote can be processed effectively, please check all that apply:

- Match current benefit plan (as best as possible)
- Adding just one benefit (please identify)
- Lower cost of benefits
- Improve benefits (if so, please list details of requested improvements on a separate page)

Benefits Being Requested:

- Life Insurance
- Dependent Insurance
- Dental
- Steelworkers Dental Centre
- Weekly Indemnity
- Extended Health Care
- Emergency out of Country Medical Coverage
- AD&D
- Pay-Direct Drug Card
- Vision Care
- Long Term Disability
- Critical Illness
- Hospital Cash Benefit
- Retiree Benefits

Please return this form, along with the Employer information as soon as possible to:

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Staff Representative: Please note that representatives of the **Steelworkers Benefit Plan** may be in contact with the Employer and your Local Union contact unless you specifically request otherwise.