



SECURITY BENEFIT FUND OF THE UNIFORMED FIREFIGHTERS ASSOCIATION

OF GREATER NEW YORK LOCAL 94 I.A.F.F. AFL-CIO
204 EAST 23RD STREET, NEW YORK, N.Y. 10010
TEL: 212-683-4723 FAX: 212-683-0693

TRUSTEES:

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NEW FATHER CHECKLIST

1. Get a note from **OB-GYN** to keep on file so **YOU** can legitimize **YOUR** Emergency Leave if **YOU** must use it.
2. Fill out and forward Form ERB (Employee Health Benefit Application) with copies of **Birth Certificate** and **Social Security Card** to add dependent to your medical plan, to:
BUREAU OF PERSONNEL RESOURCES / HEALTH PLAN UNIT
9 METROTECH CENTER, 6th FLOOR
BROOKLYN, NY 11201-5431
PHONE 718-999-2196
3. Call the Security Benefit Fund – 212-683-4723, Ext 2. Let them know you are a new father, and request a copy of the green beneficiary enrollment card. When you receive the card, fill it in completely (both sides), sign it and send it, with a copy of **Birth Certificate** and **Social Security Card** to:
SECURITY BENEFIT FUND
204- EAST 23RD ST, THIRD FLOOR
NEW YORK, NY 10010-4628
PHONE 212-683-4723, EXT. 2
FAX 212-683-0693

This will take care of your dependents Prescription, Dental, Optical, etc.

4. If you have **Catastrophic Major Medical Insurance Family Coverage** add your new dependent. You must send letter (in folder) to:
MARSH AFFINITY GROUP
PO BOX 10374
DES MOINES, IA 50306-0374
PHONE 800-503-9230
5. If you have **Deferred Compensation Plan**, you may want to add beneficiary. Fill out and forward Enrollment/Change Form to:
CITY OF NEW YORK / OFFICE OF LABOR RELATIONS
40 RECTOR STREET, 16TH FLOOR
NEW YORK, NY 10006-1705
ATTENTION: DEFERRED COMPENSATION DESK
PHONE 212-306-7760

6. If you want to **Change Tax Exemptions**, you need to fill out a NEW Federal and State Tax Withholding Forms (W-4 and IT2104). There are 3 ways this can be done:
 1. Go online to ESS (www.nyc.gov/ess) and fill out the form online.
 2. You can go online to Payroll, print up the forms, fill them in and mail them. Go to www.nyc.gov/payroll and print up the Federal Form (W-4) and the State Form (IT2104). Or you can
 3. PHONE 718-999-2288 and ask them to mail you the new withholding forms, fill them in and mail them back.

It is also important to realize that any change in withholding can and will affect your individual tax returns. For this reason, it is suggested that you consult with your tax advisor to fully understand the meaning of any change in withholding.

7. If you want to **add beneficiary to UFA Life Insurance**, fill out form and send to:

GROUP LIFE INSURANCE PROGRAM
UNIFORMED FIREFIGHTERS ASSOCIATION
204 EAST 23RD STREET, 3RD FLOOR
NEW YORK, NY 10010-4628
ATTENTION: ACTIVE / CHANGE OF BENEFICIARY
PHONE 212-683-4723 EXT. 4

8. If you want to **add beneficiary to FDNY Life Insurance** (Instruction sheet in folder) send **notarized “Designation of Life Insurance Beneficiary”** to:

FDNY PENSION BENEFITS UNIT
9 METROTECH CENTER, ROOM 6W-4K
BROOKLYN, NY 11201-5431
PHONE 718-999-1196 OR 718-999-2321

9. If you want to add **Pension Beneficiary** (Instruction sheet in folder) send **notarized “Designation of Beneficiary of Death Benefits” Form** to:

FDNY PENSION BENEFITS UNIT
9 METROTECH CENTER, ROOM 6W-4K
BROOKLYN, NY 11201-5431
PHONE 718-999-1196 OR 718-999-2321

10. If wife required caesarian section and you are part of the Surgical Assistance Fund, fill out and forward MD-35. There is an instruction sheet in the folder. You may get money back!

11. If you are a member of one of the Societies (i.e. Emerald), you may want to add beneficiary to Life Insurance. Give them a call!