



LIFE INSURANCE COMPANY

488 Madison Avenue, New York, NY 10022  
646-509-2100

Your agent is **LLOYD S. BERKETT INSURANCE AGENCY INC.**

They can be reached at (310) 857-5757

VERATEX INC  
C/O AVI COHEN  
P.O. BOX 682  
NEW YORK, NY 10108

**MESSAGE:**

NYS WCB regulations require Form DB-120/PFL-120 (Notices of Compliance) to be issued annually. New copies are available at <https://www.sslicny.com/secure/login.aspx?GoTo=PostingNotice>. Use your registered email address & password, and you will access both copies.

Visit our official YouTube homepage for a brief tutorial on how to process & pay your premium invoice on our website

Policy #: **D29603-000**

DBL Quarterly Premium Calculation											
Employees	Jan	+	Feb	+	Mar	=	Total Lives	X	Rate	=	Premium Due
# Males		+		+		=		x	2.46	=	
# Females		+		+		=		x	5.36	=	
The minimum DBL premium amount is \$16.00.					Total DBL	A					

**Payment Due: 4/30/2024**

PFL Quarterly Premium Calculation									
	# of Lives	Quarterly Payroll (Subject to Premium Rate)							
Male					Rate		=	Premium Due	
Female									
Total Payroll				x	.00373	=	B		

The **PFL Quarterly Premium Due** is calculated by multiplying the rate of .00373 by the quarterly payroll that is subject to the premium rate. The **Quarterly Payroll** is defined as an employee's wage, including bonuses and commissions, up to and not to exceed \$89,344 per employee, per year, as reported to the State of New York on Form NYS-45-ATT (Quarterly Combined Withholding Report).

**Total DBL & PFL Premium Due**

Write the DBL & PFL Premium Due in the applicable boxes below to calculate the Total Premium Due.

Total DBL	A	
Total PFL	B	
Total Due (A+B)		

**TO PAY ONLINE:**

- ✓ Visit [WWW.SSLICNY.COM](http://WWW.SSLICNY.COM)
- ✓ Click on "Quick Service"
- ✓ **No delays – payment posts immediately to account**
- ✓ Quick, one-time registration and set-up
- ✓ Website calculates your total premium due
- ✓ Detailed payment receipt within seconds of completed payment

**TO PAY BY CHECK:**

- ✓ Check payable to: **Standard Security Life Ins. Co. of NY**
- ✓ Include policy # on check
- ✓ Be sure to include invoice or check will be returned
- ✓ Mail check, with completed invoice, to:  
**Standard Security Life Insurance Company of New York**  
**P.O. Box 2875**  
**Clinton, IA 52733-2875**

