

Marketplace Review of Application Form

I, _____, have reviewed the Marketplace eligibility application information and confirmed its accuracy prior to the application being submitted. The agent/agency explained the attestations at the end of the eligibility application to me prior to the application being submitted and I was given an opportunity to ask questions about them.

I understand that the agent/agency will not use or share my personally identifiable information (PII) for any purposes other than those to which I consented. The agent/agency will ensure that my PII is kept private and safe when creating, collecting, disclosing, accessing, maintaining, storing, and using my PII for the purposes I consented to. I understand that I do not have to share additional PII or protected health information (PHI) with my agent/agency beyond what is required on the Marketplace application for eligibility and enrollment purposes.

Name of Primary Writing Agent	
Agent National Producer Number:	
Phone Number:	
Email Address:	

Name of Agency (if applicable):	
Agency National Producer Number:	
Owner of Agency:	
Phone Number:	
Email Address:	

Name of Primary Household Contact and/or Authorized Representative:	
Phone Number:	
Email Address:	
Date:	
Signature:	