



AFFIDAVIT OF DOMESTIC PARTNERSHIP

STATE OF \_\_\_\_\_ )  
:SS.:  
COUNTY OF \_\_\_\_\_ )

The undersigned, being duly sworn, depose and declare as follows:

We are both eighteen years of age or older and unmarried. If either or both of us has been married, we submit evidence of the termination of the marriage.

We are not related by blood in a manner that would bar marriage under the laws of the State of New York.

We are each other's sole domestic partner, have been so for at least six months prior to the date of this affidavit, and intend to remain so indefinitely. We are in a relationship of mutual support, caring and commitment, and have assumed responsibility for each other's welfare.

We have been living together on a continuous basis for at least six months prior to the date of this affidavit.

One of us is enrolled in an employer group health insurance program.

Neither of us has been registered as a member of another domestic partnership within the last six (6) months.

I, the enrollee, affirm that I will file a Termination of Domestic Partnership form within 30 days of the date I/my partner no longer meet one or more of the qualifying criteria set forth above.

I, the enrollee, understand that any false or misleading statement made in order to receive benefits for which I do not qualify will subject me to financial responsibility for any benefits paid on behalf of my partner and/or other legal actions appropriate to the prosecution of insurance fraud.

\_\_\_\_\_  
Print Name (Enrollee)

\_\_\_\_\_  
Print Name (Partner)

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

Sworn to before me this

\_\_\_\_\_ Day of \_\_\_\_\_ 2 \_\_\_\_\_

\_\_\_\_\_  
Notary Public

**YOU NEED A TOTAL OF 3 SEPARATE PROOFS\*, AS DESCRIBED BELOW (1 PROOF OF COHABITATION DURATION AND 2 PROOFS OF FINANCIAL INTERDEPENDENCE)**

\*Proofs should be clearly unaltered copies of original documents.

**Proof of Six Months of Cohabitation**

You must submit proof that you and your partner have resided together for at least **six months**. The proof may be one document with both names or two separate documents that show the residence of each partner. The following is a list of items that can be used to demonstrate proof of residency.

**Submit one (1) of the following (check proof submitted):**

- |  |  |
|--|--|
| <input type="checkbox"/> Auto Registration   | <input type="checkbox"/> Mortgage agreement listing both parties   |
| <input type="checkbox"/> Bank Statement  | <input type="checkbox"/> Pay check stub  |
| <input type="checkbox"/> Certificate of Domestic Partnership or Certificate of Civil Union (from a Municipality in any state of USA). If this document is provided and indicates an issue date of 6 months prior to requested effective date, no other documents are required for Financial Interdependence. | <input type="checkbox"/> Registration as a Domestic Partnership In a New York State municipality that has established such a procedure (e.g., Albany New York City, Rochester, Ithaca) |
| <input type="checkbox"/> Driver's License  | <input type="checkbox"/> Tax return  |
| <input type="checkbox"/> Mailed insurance benefits statement   | <input type="checkbox"/> Telephone bill  |
| <input type="checkbox"/> Lease agreement listing both parties  | <input type="checkbox"/> Utility bill  |

**Proof of Financial Interdependence**

You must submit two (2) copies of clearly unaltered documents as proof of financial interdependence of at least **six months duration**. Below is a list of acceptable proofs. **Check the two (2) proofs you are submitting:**

**Note: "Joint" proofs must contain both names (enrollee and domestic partner).**

- |   |   |
|---|---|
| <input type="checkbox"/> Same sex marriage or civil union certificate   | <input type="checkbox"/> Joint renters' or home owner's insurance policy                    |
| <input type="checkbox"/> Joint ownership or lease of your <b>Shared</b> residence (condo, time share, house, apartment – e.g Deed, Mortgage Renter's Lease) | <input type="checkbox"/> Joint ownership or holding of stocks, bonds or other investments   |
| <input type="checkbox"/> Joint bank account statement   | <input type="checkbox"/> Joint credit card statement – authorized Signatory is not accepted |
| <input type="checkbox"/> Joint ownership or lease of a car/boat   | <input type="checkbox"/> Joint obligation on a loan   |