

Account Change



Skip this form! Log in at hraveba.org and submit your account change online.

Submit paper forms to: forms@hraveba.org | HRA VEBA Plan, PO Box 80587, Seattle, WA 98108

Submitting your changes online is faster and more secure. It is recommended that you take advantage of this service.

1 UPDATE PARTICIPANT INFORMATION | CHANGE NAME

I want to update or change my: Contact information Name

ACCOUNT NUMBER or SSN _____ DATE OF BIRTH mm / dd / yyyy _____

NEW OR CURRENT LAST NAME _____ NEW OR CURRENT FIRST NAME _____ M.I. _____

MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____

AREA CODE and PHONE NUMBER _____ EMAIL ADDRESS (use home or personal email address) _____

IMPORTANT: Have you previously separated or retired from the employer that made or is making contributions to this account?

YES

NO

DATE OF SEPARATION or RETIREMENT mm / dd / yyyy _____

EMPLOYER NAME _____

E-COMMUNICATION

GO GREEN! Sign up for **e-communication** and avoid the paper clutter: Make your election online. After getting your welcome packet in the mail, log in at hraveba.org and click **My Profile** to update your **Account Preferences**.

2 ADD/REMOVE SPOUSE OR DEPENDENT

Your spouse and dependent(s) are eligible for coverage under this Plan. **Federal law requires us to have on file the full name, Social Security number, and date of birth of all covered individuals.** Use another form or list any additional dependents on an attached sheet of paper.

ADD	REMOVE	FIRST NAME	M.I.	LAST NAME	DATE OF BIRTH mm/dd/yyyy	SOCIAL SECURITY NUMBER
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____	_____
		SPOUSE				
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____	_____
		CHILD / DEPENDENT 1				
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____	_____
		CHILD / DEPENDENT 2				
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____	_____
		CHILD / DEPENDENT 3				

3 CERTIFICATIONS: READ BEFORE SUBMITTING

By completing and submitting this form, you agree to the **Terms and Conditions**, as amended from time to time, which can be found in the **Plan Summary**. To get a current copy of the Plan Summary, log in at hraveba.org and click **Resources** on the menu bar or contact our Customer Care Center at customercare@hraveba.org or 1-888-659-8828.