(Name of Insured) (Address) (City, State, Zip Code)

CONTRACTING CLASSIFICATION PREMIUM ADJUSTMENT PROGRAM WORKERS COMPENSATION PREMIUM CREDIT APPLICATION

The Contracting Classification Premium Adjustment Program is applicable to qualifying employers engaged in contracting operations.

A special premium calculation, which may result in a premium credit for you, will be based on average hourly pay rates for each classification of contracting operations. In order that your premium may be correctly established, please return the completed premium credit application, as set out on the reverse side of this letter, to:

NCCI Customer Service Center 901 Peninsula Corporate Circle Boca Raton, FL 33487-1362

NCCI will advise us of any premium credit applicable.

If NCCI does not receive this application within 180 days after policy inception, your premium calculation will not reflect any possible premium credit.

For each applicable classification (both contracting and noncontracting) covering your company's operations in the state that this credit is being applied for (please note that each state that offers this credit requires a separate application), report the total payroll (excluding overtime premium pay, pay in excess of payroll amount charged to partners and sole proprietors as shown on the state rate pages, as well as the entire pay for any exempt sole proprietor, partner, or officer), and the corresponding total number of hours worked for the third calendar quarter (July, August, September) of the year preceding your policy effective date.

- Note #1: If you did not engage in contracting operations during the third calendar quarter, the requested information to be provided should, then, be for the last complete calendar quarter prior to the policy effective date of your workers compensation policy.
- Note #2: If you are a new business (no prior operations), submit the requested information for the first complete calendar quarter following the policy effective date of your workers compensation policy when available.
- Note #3: In the absence of specific records for salaried employees, you should assume that each individual worked 40 hours per week.

Please preserve your payroll records that formed the basis for this declaration, because we will be required to verify the reported information in order for any premium credit to be applied.

Thank you for your cooperation.

Sincerely,

CONTRACTING CLASSIFICATION—PREMIUM CREDIT APPLICATION

Insur	ed:						
	E CREDIT BEING APP E: one state per applic						
POLIC NUMI		POLICY EFFECTIVE DATE:					
CARE	RIER:						
		es paid, total hours worked, and calend ontact your agent or carrier if assistance			indicated and a	application is sigr	ned and
	SIFICATION			CODE	TOTAL WAGES PAID	TOTAL HOURS WORKED	_
Exam	ple: Electrical Wiring			5190	\$8,000	520	
Nonco	ontracting Classifications	:					
							_
sole pr worked	roprietors as shown on the	wages (excluding overtime premium pastate rate pages, as well as the entire precords for the complete calendar quation (please circle one):	pay for any	xcess of pay exempt sole	vroll amount cha	arged to partners tner, or officer) a	and nd hours
	/1–3/31)		nd (4/1–6/3				
3rd (7	7/1–9/30)	4t	h (10/1–12	2/31)			
Calen	ndar Year:						
SIGNATURE: POSITION:						DATE:	