

Original Request for Group Insurance Form 603 (Rev. 10/2019)

Instructions

Purpose of Form

This form is intended for insurers submitting an original request for group insurance to the WCIRB.

Form Requirements

Only insurers may complete and submit this form. To complete this *Original Request for Group Insurance*:

1. Complete the Insurer Information section below.
2. Submit a completed *Association's Original Request for Group Insurance* (available at wcirb.com/content/group-insurance) or attach the following:
 - A. A copy of the association's articles of incorporation and bylaws (or agreement of association and rules and regulations), all certified by the custodian of the originals; and
 - B. Certifying statements from the association:
 - Reasons for desiring group insurance;
 - Confirmation that a safety committee, which, by education or otherwise, will seek to reduce the incidence and severity of accidents will be maintained;
 - No less than 75% of the regular membership of the association is engaged in a common trade or business and that such percentage of membership will be maintained during the time the group insurance is in force; and
 - Indication that either 51% of the association's total payroll is developed under a single classification or combination of classifications; or that 75% or more of the total payroll is developed under the same two standard classifications and 50% or more of the association's present members have been members for at least one year prior to the issuance of the group insurance policy; The applicable classification(s) must be indicated.
 - C. An agreement between association and insurer confirming that all members of the association are engaged in a common trade or business and are members in good standing, and that the association will notify the insurer of any change in such status for purpose of immediate elimination from participation in the group plan.
- D. If the association has agreed to pay past due premium of individual group members:
 - An agreement stating that if the insurer notifies the association of the nonpayment of a premium by an individual group member within 60 days after the premium was due, the association will be responsible for past due premiums and that the association and insurer agree to use dividends due for nonpayment of past due premiums; and
 - A resolution of the governing board of the association authorizing the execution of the agreement.

Form Submission

This form may be emailed or mailed.

Email safetygroups@wcirb.com
Mail WCIRB California
Attention: Legal Department
1221 Broadway, Suite 900
Oakland, CA 94612

Questions/Additional Information

Call WCIRB Contact Center toll free
888.CA WCIRB (229.2472) 7:30 AM–4:45 PM PST.

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Insurer Information

Insurer Name

Business Address

Insurer Representative Name

Title

Phone

Email

Group Name

Policy Effective Date