

Request For Renewal of Group insurance Form 604 (Rev. 10/2019)

Instructions

Purpose of Form

This form is intended for insurers submitting a renewal request for group insurance to the WCIRB.

Form Requirements

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

1. Complete the Insurer Information section below; and
2. Submit a completed *Association's Renewal Request for Group Insurance* (available at wcirb.com/content/group-insurance) or attach the following:
 - A. Certifying statement from the association that the group is being maintained.
 - B. Select one – (*must be certified by the custodian of the original*):
 - A copy of the association's articles of incorporation and bylaws; or
 - An agreement of association, rules and regulations
 - C. Agreement that all insured employers are engaged in a common trade and are members in good standing. (The agreement must provide that the association shall immediately notify the insurer of any change in status for the purpose of immediate elimination from the group plan).
 - D. If the association has agreed to pay past due premium of individual group members:
 - A new agreement stating that if the insurer notifies the association of the nonpayment of 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

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| Insurer Name | Business Address |
| Insurer Representative Name | Title |
| Phone | Email |
| Group Name | Policy Effective Date |