

CONFIDENTIAL REQUEST FOR INFORMATION

The following confidential ownership statements may be used only in establishing premiums for any of your insurance coverages. It is extremely important that all questions be answered completely; otherwise, the form may be returned. The second page must be completed. If this form does not provide the means to explain the transaction, supplement the form with a narrative on the employer's letterhead, signed by an owner, partner, or executive officer. The form can be submitted by you, your agent or your insurance carrier, and it must be submitted to the WCRIBMA and the carrier within 90 days of the change.

PURPOSE – Check one. If more than one category applies, complete a separate form for each purpose.

- Name and/or Legal Entity Change** – Complete Column A to show the name/ownership percentages before the change and Column B to show the name/ownership percentages after the change.
- Determination of Combinability of Separate Entities** – Complete a separate column for each entity. Attach additional forms if necessary.
- Sale, Transfer or Conveyance of an Entity's Ownership Interest** – Complete Column A to show the name/ownership percentages before the change and Column B to show the name/ownership percentages after the change.
- Sale, Transfer or Conveyance of an Entity's Physical Assets to Another Entity Which Takes Over its Operations** - Complete Column A to show the name/ownership percentages of the original entity and Column B to show the name/ownership percentages of the acquiring entity. (See the questions on page 2 in reference to this type of change.)
- Merger or Consolidation** – Complete Columns A and B to show the original entities and Column C to show the surviving entity. Attach a copy of the signed Agreement and Plan of Merger.
- Voluntary or Court-Mandated Establishment of a Trustee or Receiver, Excluding a Debtor in Possession, a Trustee Under a Revocable Trust or a Franchiser** - Complete Column A to show the name/ownership percentages before the change and Column B to show the name/ownership percentages of the trustee or receiver established.
- Formation of a New Entity that acts as, or in effect is, a successor to another entity that:** (a) has dissolved (b) is non-operative (c) may continue to operate in a limited capacity. Complete Column A for the previous entity and Column B for the newly formed entity.

INFORMATION	COLUMN A	COLUMN B	COLUMN C
Name and Street Address of Entity (P.O. Boxes are not acceptable.)			
Federal Employers Identification Number			
Carrier, Policy Number and Effective Date			
Legal Status of Entity (Corporation, Partnership, Sole Proprietorship, Trust, Receiver, ...)			
Ownership: Corporations – List names of all owners of 5% or more of the voting stock and number of shares owned. Partnerships – List each general partner and his/her share in the profits. (For limited partnerships, list only the general partner.) Other – If no voting stock, list the members of the Board of Directors or comparable governing body.	Enter Owners and %s	Enter Owners and %s	Enter Owners and %s
Total Shares of Voting Stock Issued			
Date Ownership in Each Column Became Effective			
In each column, indicate whether the entity is active or inactive. If the entity was dissolved or is inactive, provide the effective date.			

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ALL QUESTIONS MUST BE ANSWERED.

1. NAME CHANGE

Has there been a name change within the last five years? YES NO

A 'name change' would include a change to a trade name or a corporate name.
If **YES**, an ERM Form must be completed to show the old name and ownership percentages in Column A and the new name and ownership percentages in Column B.
If there was a change to a corporate or LLC name, attach the Amendments to the Articles of Organization.

2. DETERMINATION OF COMBINABILITY OF SEPARATE ENTITIES

Have any owners shown on this form either currently or previously had ownership in any business not shown on this form? YES NO

If **YES**, list all such businesses below **AND** complete a separate column on an ERM for each and attach.

3. SALE, TRANSFER OR CONVEYANCE OF OWNERSHIP INTEREST

Has there been a sale, transfer or conveyance of ownership within the last five years? YES NO

If **YES**, an ERM Form must be completed to show the old name and ownership percentages in Column A and the new name and ownership percentages in Column B.

4. SALE, TRANSFER OR CONVEYANCE OF ASSETS FROM ANOTHER ENTITY WHO PREVIOUSLY RAN THE OPERATION

Has there been a sale, transfer or conveyance of (all or a portion) of physical assets from another entity who previously ran the operation within the last five years? YES NO

If **YES**, please explain in detail below, providing the following information and answering the following questions: Provide a list of all assets that were transferred. Were the employees (all or some) retained? Did the operations change at all as a result of the sale? If the changes to the operation were sufficient to reclassify the governing classification or if the transfer of assets was accompanied by a change in the process and hazard of the operation, please explain that as well.

This is to certify that the information provided on this form is complete and correct:

Name of Insured: _____

Printed name and title of person completing form: _____

Date changes were reported to your insurance company: _____

Name of Business: _____



Signature and Title (Sole Proprietor, Partner, Officer, Trustee or Member) Date

Signer's Name (Printed) Signer's Email Address