

WC-Procedure for Obtaining Experience Rating Sheets

To Obtain Experience Rating Sheets:

- 1) **NCCI-** forward the Dec. page of the client you want to Dennis Sturtz. If they are not a client we need a letter of authorization completed on their letterhead. (LOA Attached)
- 2) **New York- NYCIRB:** If they are our client we need to send a letter requesting rating sheets to:

NY Compensation Insurance Rating Board
733 Third Avenue
New York, NY 10017
Att:Experience Rating Dept.

The letter MUST be an "ORIGINAL" NO EMAIL, NO FAX , NO XEROX. It should include the NY Board # (Dennis can get if you don't have it), client name and the rating period you are requesting)
They will bill us the \$10.00.

In your request give them your email and request an email copy. You will get an email copy and one in mail.

If they are NOT our client we need the attached LOA on their letterhead signed by an officer. The letter MUST be an "ORIGINAL" NO EMAIL, NO FAX , NO XEROX. It should include the NY Board # (Dennis can get if you don't have it), the rating period you are requesting
They will bill us the \$10.00.

Please be aware that SIF and Safety Groups can pull this for you. (assuming they are the carrier)

- 3) **New Jersey-NJCIRB** If we are the broker send a letter requesting experience rating sheets. If we are not the broker then send a request with the attached LOA (**Alter it for NJ**). An original letter is not necessary, however \$5.00 for each rating period requested must be included. (**they will not bill us**).

**New Jersey Compensation Rating & Inspection Bureau
60 Park Place
Newark, NJ 07102
Att: Experience Rating Dept.**

They will not fax or email, it will just be mailed.

If you just need mods Dennis can pull NCCI, NY, NJ, CA, DE, and PA.

AUTHORIZATION / DECLARATION
OF REPRESENTATION

I _____, _____(TITLE) of

Do hereby appoint, **STERLING & STERLING** and their subsidiaries, divisions and partners to act on our behalf pertaining to matters of workers' compensation and obtaining any information needed from the New York Compensation Rating Board and/or National Council on Compensation Insurance (NCCI). Including but not limited to Experience Rating Sheets and Construction Credits.

Please release any information and/or documentation pertaining to the above to the following Representative of "**STERLING**"

Name:
Title:

Date:_____

Signature of Insured_____