

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

**MARYLAND CONSTRUCTION CLASSIFICATION PREMIUM REDUCTION PROGRAM (CCPRP)  
WORKERS COMPENSATION PREMIUM CREDIT APPLICATION**

The Maryland Construction Classification Premium Reduction program is applicable to qualifying employers engaged in contracting operations. In order to qualify for the program, a policy must have more than 50% of manual premium attributable to one or more construction classifications (as designated by the program) and be experience rated.

A special premium calculation, which may result in a premium credit for you, will be based on hourly pay rates for each construction classification. 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:

National Council on Compensation Insurance, Inc.  
Customer Service Center  
901 Peninsula Corporate Circle  
Boca Raton, Florida 33487  
ATTN: EXPERIENCE RATING—MD  
1-800-**NCCI**-123

NCCI will advise us of any premium credit applicable.

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

For each applicable classification covering your company's operations in the state of Maryland, report the total Maryland payroll (excluding overtime premium pay, vacation pay, unanticipated bonuses and Davis Bacon fringe benefits you pay into any ERISA qualified third party pension plan) and the corresponding total number of hours worked, for the third calendar quarter (July, August, September) of the year preceding your anniversary rating date as reported to taxing authorities.

- Note #1. If you did not engage in construction operations during the third quarter, the requested information to be provided should then be for the last complete calendar quarter prior to the anniversary rating 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 anniversary rating 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 forty (40) hours per week. Payroll for partners, sole proprietors, and corporate officers subject to construction classifications will be allocated according to appropriate **Basic Manual** minimums and maximums.
- Note #4. In absence of specific anniversary rating date being supplied on application, it will be assumed that the policy effective date is the same as the anniversary date.

You must preserve your anniversary rating date and payroll records which formed the basis for this declaration as we will be required to verify the reported information in order for any premium credit to be applied.

Thank you for your cooperation.

Sincerely,

TURN PAGE OVER FOR PREMIUM CREDIT APPLICATION

**WORKERS COMPENSATION—PREMIUM CREDIT APPLICATION**

**INSURED:** \_\_\_\_\_

<b>POLICY NUMBER:</b>	<b>POLICY EFFECTIVE DATE:</b>	<b>ANNIVERSARY RATING DATE (as defined in NCCI's Basic Manual):</b>
_____	_____	_____

**CARRIER NAME:** \_\_\_\_\_

Notice: Unless Code(s), total wages paid, total hours worked, calendar quarter reported are indicated and application is signed, it cannot be processed. *Contact your agent or carrier* if assistance is desired.

**Is this a new business?** No \_\_\_ Yes \_\_\_

If no, submit information for the third calendar quarter (July, August, September) of the preceding calendar year as reported to taxing authorities.

If yes, submit information for the first complete calendar quarter following the anniversary rating date of your workers compensation policy.

The following is based on actual wages and hours worked, as reflected in our payroll records, for the complete calendar quarter.

**Complete Calendar Quarter (please circle one):**

<b>1st (1/1–3/31)</b>	<b>2nd (4/1–6/30)</b>
<b>3rd (7/1–9/30)</b>	<b>4th (10/1–12/31)</b>
<b>Calendar Year:</b> _____	

"Contracting classifications" are those classifications subject to the following code numbers:

0042	5057	5221	5473	5551	6045	6237	7611
0050	5059	5222	5474	5606	6204	6251	7612
1322	5069	5223	5478	5610	6206	6252	7613
3365	5102	5348	5479	5645	6213	6260	7855
3719	5146	5402	5480	5651	6214	6306	8227
3724	5160	5403	5491	5703	6216	6319	9534
3726	5183	5437	5506	5705	6217	6325	9554
5020	5188	5443	5507	6003	6229	6400	
5022	5190	5445	5508	6005	6233	7538	
5037	5213	5462	5535	6017	6235	7601	
5040	5215	5472	5537	6018	6236	7605	

CLASSIFICATION	CODE	TOTAL MARYLAND WAGES PAID*	TOTAL HOURS WORKED
<b>Example: Electrical Wiring</b>	5190	\$8,000	520
<b>Construction Classifications:</b>			

For each application classification (both contracting and noncontracting) covering your company's operations in the state of Maryland, report the total Maryland payroll (excluding overtime premium pay, vacation pay, unanticipated bonuses, and Davis Bacon fringe benefits you pay into an ERISA qualified third party pension plan, 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 anniversary rating date as reported to taxing authorities.

**SIGNATURE:** \_\_\_\_\_ **POSITION:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

This application must be completed and signed or it will not be processed.