

Workers' Comp Checklist

Underwriter: _____

Account: _____

1. Signed Workers' Comp Acord 130 ____ FEIN # ____
 2. Emod Worksheet ____ N/A ____
 3. Employee Census ____ N/A ____
 4. Mining Supplemental ____ N/A ____
 5. Officers, Partners, Sole Proprietors, & Members Exclusion/Inclusion ____ N/A ____
 6. Loss Runs ____ N/A ____
 7. RTW ____ PADT ____
 8. Underwriting:
 - › MSHA-OSHA ____
 - › UW Summary Sheet ____
 - › Tiered Rating ____ N/A ____
 - › Credit/Debit ____
 9. Binder/Invoice ____
 10. Inspection Ordered by: _____
 - › Location Site(s) to Inspect: _____
 - _____
 - › Reviewed by Underwriter ____
 - › Recommendation Letter Sent ____
 - › Compliance Due Back _____
 11. Other/Comments _____
- Agent contact: _____