

Wisconsin Compensation Rating Bureau

Current Date

Coverage Group ID Employer Name Employer Street Address City, State Zip Code

Dear Policyholder,

Please be advised that the Wisconsin Compensation Rating Bureau is required to complete an on-site operational review of your business. The objective of this review is to establish the nature and scope of your business operations, which will determine the proper classification codes to be applied to your worker's compensation insurance policy.

To facilitate scheduling, **please email your designated contact person's name and phone number** immediately upon receipt of this letter. This review process should not be confused with a premium audit, which is conducted by your carrier of record (i.e. no payroll records will be needed). The time needed to conduct an inspection depends on the complexity of your business. An estimate of the time it will take to perform the inspection can be offered when the appointment is scheduled.

Please prepare the following ahead of our scheduled meeting:

- ✓ full, legal business name(s) for all entities that compensate Wisconsin-based performed employees ✓ legal status (Corporation, LLC, Sole all vehicles used (number, type owned, leased or borrowed) Proprietor, etc.) ✓ ownership/membership & Corporate ✓ type of equipment used (owned, leased, Officers (if applicable) or borrowed)
 - ✓ total number of employees by job duties & titles
 - ✓ number of remote employees working in a residence-based office or elsewhere, including city and state

- ✓ nature and scope of business operations
- ✓ materials used & processes conducted
- ✓ source(s) of annual revenue

A tour of the business premises to observe the operations will be completed.

Go to https://wcrb.org/aboutinspections for more information.

Letter ID: ############# Form: W056, 10/10/2024 Enclosure: WCRB Informational Brochure