

NIAC #8

Employee Benefits Liability Supplemental Application

Applicant Name: _____

Please Note: This application is for Employee Benefits Liability coverage, and can only be bound in conjunction with a General Liability policy. For complete instructions on our submission requirements, please visit <https://secure.insurancefornonprofits.org/Brokers-New-Submissions.cfm>

EMPLOYEE BENEFITS LIABILITY (EBL)

1. a. In the past three (3) years, has any insurance carrier declined, canceled or non-renewed any Employee Benefits Liability coverage for which Applicant has applied? Yes No

If yes, please explain: _____

- b. Does Applicant have knowledge or information of any incidents which might reasonably be expected to give rise to a claim? Yes No

- c. Attach currently valued loss runs for the past three (3) years as well as a completed NIAC/ANI #11 Claims Supplemental Application for each claim that has been reported under any Employee Benefits Liability policy in the last three (3) years. If no coverage was in force, but an incident did occur, please complete the #11 Claims Supplemental Application to describe each incident. If none, please check here: None

2. Does Applicant currently have any Employee Benefits Liability coverage in force? Yes No

If yes, please complete the following:

Prior Carrier	Effective Dates	Limit	Retro Date (if claims made)	Premium

3. Are benefits offered to all regular, full-time employees? Yes No

4. Are any benefits offered to part-time employees? Yes No

5. Is a signed acceptance/rejection form kept in all employees' personnel files? Yes No

6. Has there ever been a dispute or threatened dispute over benefits? Yes No

7. Does Applicant have a pension/retirement plan available to your employees? Yes No

If yes, please complete the following:

- a. Plan is managed by: Applicant Third Party Administrator - Name: _____

- b. Is the administrator of the plan also an investment advisor registered with the Securities and Exchange Commission? Yes No

- c. Investment decisions are made by: Applicant Employees

- d. Does Applicant provide investment advice to employees? Yes No

Notice: This risk pooling contract is issued by a pooling arrangement authorized by California Corporations Code Section 5005.1. The pooling arrangement is not subject to all of the insurance laws of the State of California and is not subject to regulation by the Insurance Commissioner. Insurance guaranty funds are not available to pay claims in the event the risk pool becomes insolvent.