

North Carolina Rate Bureau Company Contact Form

Please complete the information below to assist us in distribution of circulars, reports, etc. to members of your company. NAIC Group Code NAIC Group Name (If Company is in a group, please show the group information)

NAIC Code Insurance Company Name(s)

NCCI Code

If more room required please use additional forms

COMPANY CONTACT INFORMATION - Prior Contacts for single contact roles will be eliminated and replaced with any new information

		NCRB		
Contact Name:		Qtrly Assessment Bill*	Proxy Forms*	
Title:		Workers Compensation Notifications		
Mailing Address:		Billing Invoices*∆	Manage Data Error/Rejection	
City:		Notice of Assignment*	Manage Data Policy Fine*	
State:	Zip Code:	Rating Worksheet	Manage Data USR Rejection	
Phone Number:	Fax Number:	Underwriting EXR	Manage Data Unit Stat Fine*	
Email address:		Ownership Rulings*	Manage Data Noncompliance	
Distribution Email:		Circulars	IDC Roles	
Remove / Replace:		Member	Annual Statements	
		Automobile	Auto Expense Experience	
	No Longer w/Company (Retired - Left Company)	Property	Property Expense Experience	
	Still with Company - Different Position	Work Comp	Installment Premium Charge(s)	

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Requestor: Email: Title: Date*:*

Please return the completed form to: UpdateContactInfo@ncrb.org 2910 Sumner Boulevard, Raleigh, NC 27616 Phone: 919-783-9790