Metro Insurance Services - Lic OB95215
17421 Irvine Blvd. • Tustin, CA 92780
p. 800.640.4430 • f. 714.573.7202

METRO INSURANCE SERVICES

Work Comp QuickQuote

Basic Information

Company: ____________________ **Contact Name:** ____________________

Address: ____________________ City: ____________ State: ____ Zip: ________

Phone: ____________ Fax: ____________ Email: ____________________

Check one: Individual Corporation LLC Partnership Joint Venture

Business Details

Year Business Started: ________ # Years Owner Experience: ______

Business Description: ____

Website: ____________________ **FEIN or SSN:** ____________________

Are you a contractor? Yes No If yes: License Type: ____________ License #: ____________

Total # of employees: ______ Estimated Annual Gross Sales: $ ________ Subcontract/10-99: $ ________

Rating Info

#FT = Full-Time Employees; #PT = Part-time employees

Class Code	Categories	#FT	#PT	Estimated Payroll

Previous Insurance / Carriers

Are you currently insured? Yes No

Current Policy Expiration Date: ________ Any losses in the past 5 years? Yes No

2021 **Name:** ____________ **Policy #:** ____________ **Eff-Exp Date:** ________
2020 **Name:** ____________ **Policy #:** ____________ **Eff-Exp Date:** ________
2019 **Name:** ____________ **Policy #:** ____________ **Eff-Exp Date:** ________

I hereby give permission and authorize Metro Insurance Services to obtain our hard copy loss runs directly from the above listed carriers. I also certify that all information on this application is correct to the best of my knowledge.
You may email us, or otherwise you can fax this and any loss runs to (714) 573-7202.

Signature ____________________ Date ________

Please check if "yes":

- Any past claims over $25,000?
- Has there ever been employees working without worker comp coverage in the past 4 years?
- Harassment or wrongful discharge?
- Acts of violence against any employee(s)?
- Do you work with hazardous material?
- Perform work underground or above 15 feet?
- Do you use subcontractors?
- Health plans provided to employees?
- Any labor volunteered or donated?
- Engaged in any other types of business?