

LOSS HISTORY-LOSS RUN INFORMATION REQUEST

Workers Compensation Insurance

Please note: Insurance carrier name and policy number for each year listed is needed to obtain your history, for the purposes of analyzing loss information for WV loggers, as the first step in developing a more cost effective workers compensation insurance alternative.

Policy Year: 2015 – Present

Insurance Carrier:

Policy Number:

Policy Year: 2014 – 2015

Insurance Carrier:

Policy Number:

Policy Year: 2013 – 2014

Insurance Carrier:

Policy Number:

Policy Year: 2012 – 2013

Insurance Carrier:

Policy Number:

Policy Year: 2011 – 2012

Insurance Carrier:

Policy Number:

Please send completed form in the enclosed stamped envelope to:

WV Loggers Council
PO Box 718
Ripley, WV 25271