

NORTH CAROLINA RATE BUREAU

CLASSIFICATION SURVEY

Combo/Coverage ID			
Employer –		Legal Status –	
Mailing Address			
Physical address - If different from mailing address			
Employer Contact Name –		Contact Title	
Interviewer–		Date –	/ /

General Information (Explain Each Question Answered Affirmatively.)	Yes	No
1. Do you have a website? If yes, address is HTTP://www.	<input type="checkbox"/>	<input type="checkbox"/>
2. Has there been a name change, change in legal status or change in ownership in the last 4 years?	<input type="checkbox"/>	<input type="checkbox"/>
3. Is the company related by common ownership to any other business?	<input type="checkbox"/>	<input type="checkbox"/>
4. Are there any other business operations in other states or countries?	<input type="checkbox"/>	<input type="checkbox"/>
5. Has there been a change in business operations in the last 4 years?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please explain		
6. Does this company subcontract any operations?	<input type="checkbox"/>	<input type="checkbox"/>
7. Does this company lease any employees?	<input type="checkbox"/>	<input type="checkbox"/>
8. Does this company or any of its employees or officers own, rent or operates aircraft in conducting its business? If yes, give names of each employee including executive officers that owns rents or operates aircraft. Also, state the seating capacity and type of aircraft used.	<input type="checkbox"/>	<input type="checkbox"/>
9. Have any of the company's employees conducted new construction or alterations to the business premises during this policy year?	<input type="checkbox"/>	<input type="checkbox"/>
10. Do any employees engage in stevedoring operations (loading and unloading of ships, railroad cars or airplanes)?	<input type="checkbox"/>	<input type="checkbox"/>
11. Do any employees engage in sawmill operations?	<input type="checkbox"/>	<input type="checkbox"/>
12. Does the company operate a day care service for the employee's children?	<input type="checkbox"/>	<input type="checkbox"/>

Exception Questions		Yes	No
1. Does the company employ clerical workers exclusively in an office engaged in record keeping, correspondence, or phone work?		<input type="checkbox"/>	<input type="checkbox"/>
2. Does the company employ clerical workers who work exclusively in a residence office engaged in record keeping, correspondence, or phone work?		<input type="checkbox"/>	<input type="checkbox"/>
3. Does the company employ outside salespersons, messengers or collectors who do not engage in delivery operations?		<input type="checkbox"/>	<input type="checkbox"/>
4. Does the company employ drivers?		<input type="checkbox"/>	<input type="checkbox"/>

PRIMARY BUSINESS OPERATIONS

Please attach or provide below a detailed written description of the business operations.

SECONDARY BUSINESS		Yes	No
Is there a secondary business? If no, disregard.		<input type="checkbox"/>	<input type="checkbox"/>
Is this a legal entity?		<input type="checkbox"/>	<input type="checkbox"/>
Is this business being conducted as a separate undertaking or enterprise?		<input type="checkbox"/>	<input type="checkbox"/>
Are separate payroll records maintained for the secondary business?		<input type="checkbox"/>	<input type="checkbox"/>
Is the secondary business physically separated from the principal business by structural partitions?		<input type="checkbox"/>	<input type="checkbox"/>
Is there any interchange of labor between the principal and secondary business?		<input type="checkbox"/>	<input type="checkbox"/>
Do all employees interchange labor between the principal and secondary business?		<input type="checkbox"/>	<input type="checkbox"/>

All requested information must be provided before we can render an opinion.

