

State of Connecticut
Property and Casualty Division
Workers' Compensation Loss Cost Adoption Form

This form should be used by an insurer that is adopting an approved NCCI advisory loss cost reference filing **with no change to the insurer's currently approved loss cost modifier and deviation(s)**. Any insurer filing a new loss cost multiplier, deviation or otherwise modifying its currently approved workers' compensation rates or rating procedures must follow the filing procedures described in Bulletin PC-1-89.

Company is adopting NCCI advisory loss costs approved effective		January 1, 2001		
Referenced in Connecticut Insurance Department Docket Number		PC 00-97		
Company Name		NAIC No.		
Company Group Name		Group NAIC No.		
Company Filing Number				
Proposed Effective Date				
Contact Name		Title		
Telephone No.		Fax No.		
Mailing Address		E-Mail		
City				
State				
Zip				
Company Name	NAIC Number	Conn. 1999 Page 15 Workers' Comp. Written Prem. (000's)	Approved Multiplier	* Approved Deviation Not in Multiplier
Estimated Company/Group Connecticut Overall Percentage Rate Level Change				
Signature of authorized company employee				

* List company deviations only. Do not list individual classification deviations. Currently approved individual classification deviations will continue in effect.

Other instructions:

1. Attach Form WC2001 to a company letterhead filing cover letter.
2. Include one copy of the company's rate pages with this loss cost adoption form.
3. Adjust advisory pure premium loss elimination ratios on the Miscellaneous Values Page to be expressed as a percentage of rates.