

The Windham Group, Inc. Request for Proposal

Name:					
Company Name:					
E-mail Address:					
Street Address:					
Phone:		Fax:			
Business Type: <small>*LLC, LLP, Sole-Proprietorship, S-Corp, C-Corp, or other</small>		Tax ID or Social:			
Website:	http://				
Business Description:					
No. of Employees:		Work Comp Code(s): <small>*From your worker's compensation certificate example: 5645 Construction</small>			
Work Comp Modifier: <small>(if known)</small>		Current Pay Cycle: <small>*Weekly, Monthly, or Semi-Monthly</small>			
Gross Payroll:		Per: (Week, Month, Year)		Current SUTA Rate:	
About Your Company:	Gross Payroll/Work Comp Codes	Payroll/Code	# Full-time Employees	# Part-time Employees	Total Wages
In addition we will also need:					
<input type="checkbox"/>	Current declaration page from current work comp policy				
<input type="checkbox"/>	"Loss runs" - minimum of three year history.				
<input type="checkbox"/>	SUTA report of your annual rate notices including current rate				

You may fax or mail this document to the Windham Group, Inc. 370 Kendemere Pointe, Roswell, GA 30075 or fax 678-559-0330