



State Insurance Corporation

Redcliffe Street, P.O. Box 290, St. John's, Antigua. W.I.
 Tel: (268) 481-7800/1/2/3/4 Fax: (268) 481-7860 E-mail: stateins@candw.ag

PROPOSAL

WORKMEN'S COMPENSATION ORDINANCES CHAP. 377 OF THE REVISED LAWS OF ANTIGUA # 24/1956.
 AS AM

PROPOSER'S NAME in full

PROPOSER'S Business Address

PROPOSER'S Trade or Occupation

Particulars of Work

SCHEDULE A

All persons within the scope of Workmen's Compensation Ordinances #24/1956 must be included

Description of Employees	Estimated Number of Employees	Estimated Annual Wages Salaries and Other Earnings			Office Use Only		
		Cash	Value of Food, Fuel and Quarters or Other Considerations in Addition to Money Earnings	Total	Rate Per cent	Premium \$	Classification No.
Clerical Staff							
Commercial Travellers							
Apprentices and Articed Pupils							
Employees engaged with Woodworking Machinery including Machinists and Machinists' Labourers							
Other viz							
<p>The total amount of wages, salaries and other earnings paid by me/us to the above-mentioned employees during the past twelve months was \$.....</p> <p>Do you wish to insure your liability under the Workmen's Compensation Ordinances #24/1956 to the workmen of sub-contractors? (i.e. "Contractors" as defined in the #24/1956 Ordinance). If so PLEASE STATE :</p>							
Names of Contractors		Nature of Work subject	If contract for labour and materials state estimated amount of contract	In cases for which the contract is for labour only state amount of contract			
			\$	\$			
			\$	\$			
			\$	\$			
					Total Premium \$		