



Conversion Request Form

**CALIFORNIA CONFERENCE OF MASON CONTRACTOR ASSOCIATIONS
GROUP 58**

Name of Business: _____

Address: _____

City, State, Zip Code: _____

To Whom It May Concern:

State Compensation Insurance Fund is currently providing coverage for our workers' compensation insurance.

Individual Policy Number: _____

Expiration Date: _____

Please consider this document as authorization to transfer my individual policy into the California Conference of Mason Contractors Associations group policy with State Fund. I am currently a member or will become a member of California Conference of Mason Contractors Association. I understand that conversion acceptance is contingent upon whether my company meets group underwriting criteria.

Signature of Owner/Officer _____

Date _____

Broker signature is required to request conversion review if brokered.

Broker Signature

Under California Law it is unlawful for an insurer to promise the future payment of dividends under an unexpired workers' compensation insurance policy or to misrepresent the conditions for dividend payment. Dividends are payable only pursuant to conditions determined by the Board of Directors or other governing board of the Company following policy expiration. It is a misdemeanor for any insurance broker or solicitor, to promise the payment of future workers' compensation dividends. Past dividend performance is no guarantee of an insurer's future dividend performance.

STATE FUND GROUP PROGRAMS
2300 River Plaza Drive, Suite 150 Sacramento, CA 95833-2293
(916) 263-8102 Fax (916) 263-5323
www.statefundca.com