Workers Compensation and Employers Liability Insurance Policy

Out-of-State Questionnaire

Application/Policy: Date: Business name:

Please answer the following questions so that we may properly evaluate your application or policy.

1. Business is domiciled/headquartered in which state? ____________________________________________________________

2. Other states operations?  □ Yes  □ No

<table>
<thead>
<tr>
<th>State</th>
<th>Physical location(s)</th>
<th>Type of operations</th>
<th>Permanent operations?</th>
<th>Temp job/Length of time</th>
<th>Temp job/Length of time</th>
<th>Existing WC policy</th>
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3. Describe hiring and where contract-for-hire takes place for each state, including those states where there is no hiring office:
   ____________________________________________________________________________________________________________________________
   ____________________________________________________________________________________________________________________________

4. Will Oklahoma-hired employees live and work permanently in Oklahoma?  □ Yes  □ No If not, provide details:
   ____________________________________________________________________________________________________________________________
   ____________________________________________________________________________________________________________________________

5. Will Oklahoma-hired employees be transferred to out-of-state locations or travel temporarily outside of Oklahoma?  □ Yes  □ No If so, provide details:
   ____________________________________________________________________________________________________________________________
   ____________________________________________________________________________________________________________________________

6. Could out-of-state employees (non-Oklahoma) be transferred or work in Oklahoma locations?  □ Yes  □ No If so, provide details:
   ____________________________________________________________________________________________________________________________
   ____________________________________________________________________________________________________________________________