

Waiver of Subrogation Endorsements

Policy Number (Policy #-YY):	
Company Name:	
Completed By Name:	
Completed By Title:	
Date Completed:	

For your protection California law requires the following to appear on this form: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

The Waiver of Subrogation Endorsement states that the policyholder shall maintain payroll records accurately segregating the payroll of employees by classification while engaged in work for any entity holding a waiver of subrogation. Please provide payroll totals by classification assignment for each waiver of subrogation endorsed to your policy.

Name of Company	Payroll Amount (Numeric value only)	Classification