## Allianz 🕕

# NSW Workers' Compensation Policy Application Pack.

## Important Information.

Thank you for taking the time to read this page carefully before completing your Workers' Compensation Policy application. Please fill in your form using BLOCK LETTERS, tick ( $\checkmark$ ) the appropriate boxes and return it to Allianz within 14 Days.

There are three simple steps to taking out a NSW Workers' Compensation Policy with Allianz.

## We've got you covered.\*

#### Step 1

#### Tell us about your business.

Please fill out the Insurance Proposal and the Business Activity Details forms included in this pack. These forms have been designed to make it as easy as possible for you to give us the information we need to correctly complete your application.

It is important to carefully complete all parts of the Insurance Proposal and the relevant parts of the Business Activity forms. Completion of the Business Activity Details form will help us to categorise your business more accurately.

Please provide a clear description of your business activity and the goods/services you produce/handle/supply.

If your business activity does not fall into one of the eight groups defined, then tick "Other" and provide as much additional information about your business as possible. Feel free to include any brochures or your website address.

Please ensure that the completed Insurance Proposal form is signed by the business owner, director or other authorised signatory.\*\*

If you require assistance completing the form please contact your Insurance Adviser, Accountant or one of our helpful consultants on 1300 130 664.

## Step 2

#### We'll do the maths.

As soon as you have completed your Insurance Proposal and Business Activity Details forms, please send them to Allianz by either:

- Email: your covered@allianz.com.au
- Fax: (02) 9266 7387
- Mail: GPO Box 5429, Sydney NSW 2001

When we receive your completed forms we will calculate your premium using the information you provide. There are three key elements that are entered into the formula set by the WorkCover NSW, that is used to calculate your premium:

- Wages: The annual amount paid out to workers in wages and benefits, including superannuation.
- **'WIC' Rate:** The WorkCover Industry Classification (WIC) Rate. There are over 500 WIC rates, which are set each year by the WorkCover NSW and vary for each specific industry.
- Experience Premium: This figure is derived from the cost of any claims from your business for the previous 2 years.

## Step 3

#### We'll send you a 'Welcome Pack'.

Within 30 days of Allianz receiving your completed form we will send you our 'Welcome Pack', which includes:

- Details about Allianz NSW Workers' Compensation;
- Important information for you to display in your workplace; and
- An invoice for your premium.

\* Cover will commence from the time and date that cover is initially requested from Allianz Australia Workers' Compensation (NSW) Ltd. or from the date that the completed and signed Proposal Form is received by Allianz if a previous request for cover has not been received.

\*\* Please refer to the Declaration in Part 9 of the Insurance Proposal form.



## **Frequently Asked Questions**

#### Here are some Questions and Answers to help you complete your NSW Workers' Compensation Policy Application.

#### Q: What happens if I don't complete my form in full?

A: There will be a delay in processing your forms. We may be unable to correctly classify your business, which will mean we are not able to calculate your premium correctly.

#### Q: What is ITC?

A: This is 'Income Tax Credit' which is the amount of GST you may claim back (Please ask your Accountant for clarification if you have questions about ITC).

#### Q: Why can't my secretary sign the form?

- A: The person who signs the form must be authorised to incur debt on behalf of the business. If your secretary has this authority then they may sign on your behalf. Otherwise, the form must be signed by a person with such authority.
- Q: Why do I have to tell you about the insurance history if I've just bought the business?
- A: As the business is the same, only ownership has changed, the 'risk' carries over and as such we need to know about the previous insurance history.

#### Q: Can I change the start date of my policy?

A: Once the nominated start date of the policy has passed it is not possible to change it.

#### Q: Why do I need to tell you about my business activity?

A: Your premium is calculated using set industry classification rates. To correctly rate your business we need to know, in detail, what your business does.

#### Q: Do I need to estimate contractors' wages?

A: Yes. But you do not need to include contractors covered under their own Workers' Compensation Insurance. For further information please refer to 'Definition of Wages' Manual available at www.allianz.com.au

## Q: Why do I need to tell you about my insurance history?

A: The insurance history is important as it may have an effect on your premium. We also need to know because if you are changing insurer we are required to contact your previous insurer.

#### And some general Questions and Answers about NSW Workers' Compensation.

- Q: Who is covered by the policy?
- A: All employees will be covered. Sole Traders or partners of a Partnership will not be covered as they are deemed to be the employer. For further information visit www.workcover.nsw.gov.au

#### Q: Can I pay by instalments?

- A: Yes, from the 30th June 2007, if your basic tariff premium is over \$1000 and your policy is for a 12-month period, you may pay quarterly instalments. If your basic tariff premium is over \$5000 and your policy is for a 12-month period, you may pay monthly instalments.
- Q: Do I really get a Discount if I pay my premium annually?
- A: Yes! If you pay your full premium in a single lump sum, and on time, you will receive a discount.

- Q: How can I prove to a potential client I am covered?
- A: We can issue you with a 'Certificate of Currency'. Just tick the box in Part 8 of the Insurance Proposal. You can also get a request form from www.allianz.com.au or by calling 1300 130 664.
- Q: Why can't I pay by instalments if the policy is for less than a year?
- A: Current legislation stipulates that the policy must be for 12 months before it can be considered for an instalment plan.

#### Q: What are the methods of payment?

- A: From the 30th June 2007, you may pay the following ways: Cheque, B-Pay, Direct Deposit and Direct Debit. For Direct Debit, please complete our Authority form.
- Q: I am a principal contractor. What are my obligations?
- A: From 1st July 2003 principal contractors are required to check that their subcontractors have proper Workers' Compensation Insurance. To protect themselves, principal contractors must have:
  - A copy of the subcontractor's current 'Certificate of Currency'
  - A written statement from the subcontractor that all applicable premiums have been paid (until this statement is received the principal contractor may withhold payment without penalty).

Otherwise the principal contractor may be liable for premiums owing by contractors in connection with services performed on behalf of the principal.

For further help in completing your Policy Application please visit our website at **www.allianz.com.au** or contact one of our helpful representatives on 1300 130 664.



#### Agent for the NSW WorkCover Scheme

ABN: 83 564 379 108/002 GPO Box 5429 Sydney NSW 2001 Ph: 1300 130 664 Fx: 02 9266 7387



1 2

To 3

0 / 0 6

Policy number

MWN6052545

#### Period of insurance From 2 0 / 0

9

1 ||1

## WORKERS COMPENSATION ACT 1987 **INSURANCE PROPOSAL**

| This form is to be used to provide esse<br>the commencement of a new workers<br>This form is required for the initial ins<br>for subsequent renewals of the policy.<br>Please complete this form in BLOCK I<br>If further space is required, please att | compensation insu<br>surance proposal of<br>etters and use a b | rance policy.<br>hly and is not required<br>lack pen.                        |          |  |  |  |
|---|--|--|----------|--|--|--|
| 1 EMPLOYER'S DETAILS  |  | 1  |          |  |  |  |
| Legal name of employer<br>(Your legal name may be different from your trading name. Give (<br>Sole Trader or Partners' full names. If a trust give the name of the  |  | Postal address (if different from business pre<br>(PO Box or Street address) | mises)   |  |  |  |
| MANTILLA MEDICAL PTY LTD  |  | Suburb   | Postcode |  |  |  |
| Trading name  |  | Contact person   |          |  |  |  |
| ABN   |  | Phone  |          |  |  |  |
| 152 083 997   |  | Work   |          |  |  |  |
| ACN/ARBN  |  | Mobile   |          |  |  |  |
| 43 152 083 997  |  |  |          |  |  |  |
| Location of business premises<br>Street   |  | Fax  |          |  |  |  |
| 4/90 TERALBA ROAD   |  |  |          |  |  |  |
| Suburb  | Postcode   | Email  | ]        |  |  |  |
| ADAMSTOWN, NSW  | 2289   |  |          |  |  |  |
|   |  | -  |          |  |  |  |
| 2 IS YOUR BUSINESS A:   |  |  |          |  |  |  |
| ✓ Registered company (eg. Pty Ltd company)  |  |  |          |  |  |  |

## Name of Directors Address Dr Anecito Mantilla 4/90 Teralba Road, Adamstown, NSW, 2289 Sole Trader **GOODS AND SERVICES TAX** Partnership 🖌 Yes 🗌 No

Trust

Cooperative, welfare or charitable organisation

Other - please specify below

Australian Proprietary Company, Limited By Shares

Are you registered for GST? If you are registered for GST, can you claim back 100% of the GST from the ATO in your BAS return (ie. your input tax credit entitlement is 100%)?



If No, specify your reduced input tax credit entitlement

| <b>3 PREVIOUS INSURANCE </b>  | HISTORY   |  | 4 BI   | JSINESS AC  | CTIVITY                                  |  |                        |   |  |
|---|---|--|--|---|--|--|------------------------|---|--|
| Did you establish this business?<br>✓ Yes □ No If Yes, when   | To ensure correct premium calculation a detailed description<br>s required for each separate and distinct business. Based on<br>his description your Agent will assign a WorkCover Industry |  |  |   |  |  |                        |   |  |
| Did you purchase this business?   | ation (WIC) to  |  |  |   |  |  |                        |   |  |
| Yes ✓ No If Yes, when<br>Have you purchased or taken over an<br>thereof within the previous 12 months   | To help describe your business, attach company brochures and website addresses.<br>Describe your business or industrial activity  |  |  |   |  |  |                        |   |  |
| Yes V No If Yes, wher   | m a courier dri   |  |  |   |  |  |                        |   |  |
| If yes to the above, did you acquire ac<br>staff as a result of this acquisition?   |   |  | the loo  | a general prac<br>cal hospital for  | in-patient                               | / emergenc   |                        |   |  |
| Yes Vo If Yes, when   | <sub>1?</sub> /   |  |  | to drive to the hospital when needed) secretary will be buying equipments, drop off/pick-up dry |  |  |                        |   |  |
| (Note: it is compulsory for you to answ   |   | our questions)   |  | cleaning and other things when required   |  |  |                        |   |  |
| Has this business or any business acc<br>(or part thereof) been insured for work<br>compensation in the past two years?   | kers  |  |  | What goods/services do you produce/handle/supply?<br>- eg. I carry documents and small parcels. |  |  |                        |   |  |
| If Yes, complete details of previous we<br>insurance coverage. If No, go to section   |   | sation   |  | vide services   |  |  |                        |   |  |
| Insurance for previous two years  |   |  | - carry  | medications v   | with me al                               | ways when  | at work                |   |  |
| Last year   |   |  |  |   |  |  |                        |   |  |
| Scheme Agent  |   |  | What e   | uipment/macl  | ninery/tool                              | s do you us  | e in you               | Ir                                      |  |
| Policy number   |   |  |  | s/industrial ac   |  |  |                        |   |  |
|   |   |  |  | dable / reliable  | e car                                    |  |                        |   |  |
| Period of insurance   |   |  | medic  | al tools  |  |  |                        |   |  |
|   | ō / _   |  |  |   |  |  |                        |   |  |
| Year before last<br>Scheme Agent  |   |  |  | ecific trade qu   |  |  |                        |   |  |
|   |   |  | in your  | business/indus  | strial activ                             | i <b>ty?</b> - eg. dri                             | ver's lic              | ence.                                   |  |
| Policy number   |   |  |  | s license   |  |  |                        |   |  |
|   |   |  | medic  | al license  |  |  |                        |   |  |
| Period of insurance<br>From   | ō _ / _   |  |  |   |  |  |                        |   |  |
| 5 ESTIMATED WAGES FOR   | THE RELEV   | ANT PERI   | OD OF INS  | JRANCE  |  |  |                        |   |  |
| If you are engaged in separate and di<br>Note: If the estimated wages for all yo<br>compensation insurance, except when<br>to what gross wages specifically comp  | our workers tota<br>re vou engage a   | al \$7500 or les<br>an apprentice  | s per financia<br>and/or a train                         | year, you are<br>ee. and/or are a   | no longer r                              | eauired to h                                       | nold wor               | kers                                    |  |
| A. Direct workers   |   |  |  |   |  |  |                        |   |  |
| Description of work performed   |   |  |  | Total no. of work<br>(including appre   |  | l gross wages (<br>luding apprent                  |                        | ent use<br>C code                       |  |
| Medical Practitioner  |   |  |  | 1   |  | \$125,000  |                        |   |  |
| Secretary   |   |  |  | 1   | \$2                                      | 5,000  |                        |   |  |
|   |   |  |  |   |  |  |                        |   |  |
| B. Details of apprentices – included  | above (see no   | te under APPI  |  |   |  |  |                        |   |  |
| Description of work performed   |   |  |  | Total no. of  | Tota                                     | l gross  |                        | ent use                                 |  |
|   |   |  |  | apprentices   | app                                      | rentice wages (                                    | .\$) WI                | C code                                  |  |
|   |   |  |  |   |  |  |                        |   |  |
|   |   |  |  |   |  |  |                        |   |  |
|   |   |  |  |   |  |  |                        |   |  |
| C. Contract workers who are deeme<br>(see note under CONTRACTOR in E<br>For the purposes of calculating cont<br>and other components (if known) in<br>indicating the components included<br>percentages referred to in the Wage | DEFINITIONS) -<br>tractor remuneration<br>to the applicable<br>in the contract  | record the full<br>ation, enter furt<br>e column/s (4),<br>without providi | her details re th<br>(5), (6) and/or<br>ng \$ figures. D | e breakdown of<br>(7). If these am<br>O NOT reduce t  | the full con<br>ounts are r<br>he amount | ntract value in<br>not known, pl<br>to reflect the | nto the \$<br>ace an ' | S value of labour<br>X' in the column/s |  |
| (1)<br>Description of work performed  | (2)<br>Total no. of   | (3)<br>Full contract   | (4)<br>Labour only                                       | (5)<br>Labour and tools   | (6)                                      |  | <b>7)</b>              | (8)<br>Agent use                        |  |
|   | contract workers  |  | (\$)   | Labour and tools<br>(\$)<br>L:  | Labour and<br>(\$)<br>L:                 | material   |                        | WIC code                                |  |
|   |   |  |  | L:<br>T:<br>L:  | P:<br>L:                                 | P/M:   |                        |   |  |
|   |   |  |  | L:<br>T:<br>L:  | L:<br>P:<br>L:                           | P/M:   |                        |   |  |
|   |   |  |  | L:<br>T:  | P:                                       | P/M:   |                        |   |  |

#### D. Non-wage based business activities

| No. of per<br>capita units | Description - eg. taxi plates, rides, bouts, games, etc. |
|----------------------------|--|
|                            |  |
|                            |  |
|                            |  |

If you are a taxi operator, you will need to provide the following additional information: a list of plate/s held at the beginning of the period of insurance (including plate number/s), purchase/sale dates of any plate/s that have changed hands in both the previous and current 12 months, indicate if plate/s are metropolitan or country, and the average number of bailee shifts/week per plate. Please provide this information on a separate sheet and attach to this form.

#### **6 RELATED CORPORATIONS**

Is your organisation related to or part of another organisation?

Yes 🗸 No

⊥ Yes ⊻

(eg. holding company, subsidiary. Refer to DEFINITIONS) If Yes, provide details below. If insufficient space or if more than one related organisation, please attach a separate sheet.

| Name of organisation                 |  |
|--------------------------------------|--|
| ABN                                  |  |
| Scheme Agent                         |  |
| Policy Number                        |  |
| Policy Renewal Date                  |  |
| How Related to Employer organisation |  |

#### E. Asbestos

(see note under ASBESTOS in DEFINITIONS) Do you anticipate any of your workers in the course of their employment will handle or become

Yes V No

\$

✓ Yes

No

exposed to products containing asbestos? Yes No If you answered Yes, provide details of the activity/activities in which the worker/s will be exposed to asbestos containing products. If insufficient space please attach a separate sheet.

If Yes, estimate the above worker's total gross wages for the relevant period of exposure to asbestos.

These wages must also be included in A and/or C on page 2 of this form. In which industry are they employed?

#### 7 GROUPING OF RELATED EMPLOYERS

| Are you a member of a Group that pays<br>combined wages in excess of \$600,000<br>in New South Wales? (see note under<br>GROUPING OF RELATED EMPLOYERS in DEFINITIONS | 5 _ 110 |
|---|---------|
| If Yes, have you registered with WorkCover<br>as a member of a Group?   | s 🗌 No  |
| If Yes, what is your Group Number?  | ,       |
| 8 CERTIFICATE OF CURRENCY OPTION  |         |
| Do you require a Certificate of Currency to be issued based on the information you have   |         |

### 9 DECLARATION BY EMPLOYER OR THEIR AUTHORISED REPRESENTATIVE

Dr Anecito Mantilla

- declare that the information provided in this request and any attachments is true, correct and complete
- declare that no information has been suppressed or omitted from this request
- agree to supply a correct declaration of actual wages paid at the expiry of the period of insurance to allow an accurate calculation of premium. I understand the declaration of actual wages may result in further premium payable or a refund of premium paid

PRINT NAME

- acknowledge that the terms and conditions of the policy are as prescribed by Form 3 of Schedule 1 of the *Workers Compensation Regulation 2003*
- acknowledge that the Premium Forms Definitions supplement has been provided to me
- consent to the information provided in this form, and any further information provided, be used for the purpose
  of evaluating and administering the employer's workers compensation policy, and any related purpose
- am authorised by the employer to complete this form and sign this declaration on behalf of the employer.

#### Penalties may apply for providing false, misleading or incomplete information.

Signature of person authorised to act on behalf of employer



### DEFINITIONS

To assist employers to complete this form a PREMIUM FORMS DEFINITIONS supplement is available separately. The DEFINITIONS supplement is common to the Insurance Proposal, Declaration of Estimated Wages, Declaration of Actual Wages and Request for Certificate of Currency and Statement of Wages forms. Please contact your Scheme Agent for the DEFINITIONS supplement if it has not been provided with this form. Employers are required to acknowledge that they have obtained the DEFINITIONS supplement when completing this form.

### DISCLAIMER

provided in this Proposal?

This form provides information and may refer to some of your obligations under the various workers compensation and occupational health and safety legislation that WorkCover NSW administers. To ensure you comply with your legal obligations you must refer to the appropriate Acts and regulations at **www.legislation.nsw.gov.au** 

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## **Business Activity Details**

Only complete the parts relevant to your organisation.

### Agriculture

#### Farming, Forestry and Fishing

Please provide a description of your business activity.

If you are involved in more than one activity, e.g. beef farming and sheep farming, please advise percentage of wages paid to each activity.

|  | %_ |
|--|----|
|  | %  |
|  | %  |
|  | %  |
| Are you only growing crops to food your own stack? |    |

Are you only growing crops to feed your own stock?



### **Community Services**

No

#### Education

Which type of educational services are you providing? e.g. primary, secondary, tertiary, tutors, driving school, etc.

#### **Preschool and Childcare Services**

Which services do you provide? e.g. childcare, day care services, preschool, etc.

#### Health (including Aged & Community Care)

Which services do you provide? e.g. GP/specialist, aged accommodation, ambulance, optometry, pathology, etc.

General Practitioner, VMO-GP



✓ Non-residential

#### **Cultural Services**

Which type of services are you providing, please specify? e.g. library, museum, theatre production, etc.

### Construction

**Building Construction** What do you build?

Please complete below part in regards to building type and time spent.

| Residential 1 to 3 storeys | % |
|----------------------------|---|
| Residential 3+ storeys     | % |
| <br>Commercial             | % |

Policy Number MWN6052545

Construction continued

### **Non-Building Construction**

Please specify if you are involved in non-building construction e.g. cable laying, swimming pools, roads, dams, etc.

#### **Trade Services**

Which trade do you provide? e.g. electrical contracting, plumbing services, etc.

#### Concreting

Please advise type of concreting undertaken. e.g. kerbs, gutters, footpaths, housing foundations, drilling or cutting, formwork, etc.

#### **Machinery and Equipment Hire**

Which type(s) of machinery and/or equipment do you hire out?

Do you hire the goods with or without operators?

|  | With | operato |
|--|------|---------|
|--|------|---------|

ors Without operators

| - | - |  | 1 | r |  |  |  |
|---|---|--|---|---|--|--|--|
|   |   |  |   |   |  |  |  |
|   |   |  |   |   |  |  |  |

| Which | industries | do | you | hire | to? |
|-------|------------|----|-----|------|-----|

#### Entertainment

## Hospitality

Please tick appropriate boxes to describe your business.

Hotel Motel

|                       | drinking mainly          |  | accommodation mainly |  |  |  |  |  |
|-----------------------|--------------------------|--|----------------------|--|--|--|--|--|
| Food                  | services                 |  |                      |  |  |  |  |  |
|                       | dine in mainly           |  | takeaway mainly      |  |  |  |  |  |
| Club                  | S                        |  |                      |  |  |  |  |  |
| licensed not licensed |                          |  |                      |  |  |  |  |  |
| Othe                  | r e.g. catering services |  |                      |  |  |  |  |  |

#### Sport and Recreation

Which type of services are you providing, please specify? e.g. sports grounds facilities, coaching, sporting clubs, etc.



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No

Wholesale

Yes

Which product(s) do you sell?

Do you handle the goods?

## Business Activity Details continued

Only complete the parts relevant to your organisation.

#### Accountants, etc

Which services are you providing?

#### Consultants

| Which consulting services do you provide?<br>e.g. IT consultant, etc.        | Transport and Storage   |
|--|---|
|  | Road Transport     What type of vehicle do you use?     e.g. tipper truck, prime mover, bus, etc.                             |
| <b>Property Services</b> Please tick appropriate box Strata Schemes          |   |
| commercial residential   | Average round trip?   |
| Property Operators/Developers  | less than 500km more than 500km   |
| commercial residential   | Do you or your employees load and/or unload?  |
| Real Estate Agent  | Yes No  |
| Other e.g. body corporate  | What do you transport? e.g. goods, sand, cement, etc.   |
| Finance and Insurance<br>Which types of services do you provide?             | Taxis         Please advise plate type.         T Plate       TC Plate         HC Plate                                       |
| Manufacturing (including Assembly)<br>What product(s) are you manufacturing? | Water Transport         Air Transport         Storage         What type of goods are you storing? e.g. grain, furniture, etc. |
| What materials are the product(s) made from?                                 |   |
| How are the products made? e.g. blow moulded, etc.                           | Is this a self storage operation?   |
|  | Yes No  |
|  | Do you and/or your employees assist your customers with the storage of the goods?   |
|  | Yes No  |
| What are your products used for?   | Other Please give a detailed description<br>Which business are you in?  |
| Retail   |   |
| Please advise what type(s) of goods are being retailed?                      | What products do you make?  |
|  |   |

Which services do you provide?

Allianz (1) Agent for the NSW WorkCover Scheme

ABN: 83 564 379 108/002 GPO Box 5429 Sydney NSW 2001

Ph: 1300 130 664 Fx: 1300 662 954 NSW WorkCover

# WORKERS COMPENSATION ACT 1987 PREMIUM FORMS DEFINITIONS

This DEFINITIONS supplement is common to the Insurance Proposal, Declaration of Estimated Wages, Declaration of Actual Wages and Request for Certificate of Currency and Statement of Wages forms.

The DEFINITIONS supplement is provided by the Scheme Agent to assist employers complete the forms. Employers are required to acknowledge that they have obtained the DEFINITIONS supplement when completing the forms.

#### RECORDS

Section 174 of the *Workers Compensation Amendment Act 1987* (the Act) requires an employer to keep correct records of all wages paid to their workers as well as the trade or occupation of each worker. Section 174(2) of the Act stipulates that the employer is to retain these records in good order and condition for at least 5 years after the last entry is made in the record.

#### INPUT TAX CREDIT ENTITLEMENT

If you are registered for GST and you are entitled to claim back all the GST on your premium from the ATO in your business activity statement (BAS) return, you have a 100% input tax credit entitlement. Some employers such as banks or financial service providers are input taxed and only able to claim back a portion of the GST from the ATO. Those entities have a 'reduced input tax credit entitlement' and are required to note this percentage on the form. In the event of non-notification of a lower input tax credit entitlement, the premium will be based on a 100% entitlement.

#### WAGES

Gross wages includes total gross earnings (before tax deductions) and some payments that are not generally thought of as wages.

It includes, but is not limited to:

- salary/wages
- overtime, shift and other allowances
- over-award payments
- bonuses, commissions
- payments to working directors (including directors' fees)
- payments to certain contractors
- payments to pieceworkers
- payments for sick leave, public holidays and the associated leave loadings
- value of any substitutes for wages
- grossed-up value of fringe benefits (allowances subject to fringe benefits tax are counted at the grossed-up value, that is the value of the benefit multiplied by the relevant Australian Tax Office benefit formula)\*
- trust distributions to workers where the distribution is in lieu of wages for work done for the trust.
- employer superannuation contributions (including the superannuation guarantee levy)
- long service payments (including lump sum payments instead of long service leave)
- termination payments (lump sum payments in respect of annual leave, long service leave, sick leave and related leave loadings).

#### It does not include:

- directors' fees paid to non-working directors
- compensation under the Workers Compensation Act 1987
- any GST component in a payment to a worker.

\* Non-profit organisations, public benevolent institutions (PBIs) and charities should continue to declare worker benefits that aren't subject to fringe benefits tax at the net value. Once the worker benefits exceed the Australian Tax Office fringe benefit threshold, the employer must declare the benefit at the grossed-up value.

For further information refer to the WorkCover *Wages Definition Manual*, available as a Publication from WorkCover's website.

#### WORKER

A 'worker' is any person who has entered into, or who works under, a contract of service or apprenticeship with an employer (whether by way of manual labour, clerical work or otherwise, and whether the contract is expressed or implied, and whether the contract is verbal or in writing).

An injured worker is only eligible to claim workers compensation in NSW when they have a 'State of Connection' that is NSW. A worker's 'State of Connection' is determined using the following tests.

- test A the State in which the worker usually works in that employment
- test B if no State is identified by test A, the State in which the worker is usually based for the purposes of that employment
- test C if no State is identified by test A or B, the State in which the employer's principal place of business in Australia is located.

If it is determined that NSW is a worker's 'State of Connection' their wages must be declared for NSW premium calculation purposes and they must be covered under their employer's NSW workers compensation policy, unless their employer's NSW workers combined wages are \$7500 or less per financial year, in which case the employer is not required to hold a policy. The exception is those employers who engage an apprentice/trainee and/or are a member of a Group, in which case a workers compensation policy is required regardless of the estimated wages total.

#### **APPRENTICE INCENTIVE SCHEME**

The *Growing Our Skills Base:* Apprentice Incentive Scheme provides a premium reduction for employers of apprentices. For new or renewed policies commencing on or after

31 December 2006, the wages you pay to an apprentice will be used to calculate your premium reduction.

To be eligible you must have entered into a NSW Department of Education and Training (NSW DET) approved 'Training Contract' with the apprentice in a designated trade vocation and the apprentice identified in the training contract. [Note the reduction is available only to these apprentices and not to NSW DET recognised traineeships].

From 31 December 2006, when renewing or obtaining a new workers compensation policy, you are required to declare the amount of wages you pay your apprentice(s) and the industry in which they work separately from wages to other workers. This will allow your Scheme Agent to calculate your premium reduction.

You will need to retain your apprentice wages records, as well as your Apprentice Training Contract and letter from the Department of Education and Training advising that the application for the training contract has been approved. These documents will need to be produced in the event of a wage audit.

For further information contact: your workers compensation Scheme Agent, the WorkCover Information Centre on 13 10 50 or visit

**www.workcover.nsw.gov.au** [Enter "Apprentice" under the Search facility for Fact Sheets and FAQs on the Apprentice Incentive Scheme].

#### PREMIUM FORMS DEFINITIONS (cont.)

#### CONTRACTOR

Some people working as contractors are also treated as workers for workers compensation purposes, depending on the individual circumstances. This means that if there is a workplace injury the contractor may be entitled to receive workers compensation. The law refers to these contractors as 'deemed workers'. For this reason, their employer (or principal) must declare any payments made as wages and cover them for workers compensation if the total estimated wages for all that employer's NSW workers combined is greater than \$7500 per financial year (unless employing an apprentice and/or a trainee and/or are a member of a Group in which case the \$7500 exemption does not apply). For further information see www.workcover.nsw.gov.au/WorkersCompensation/InsurancePolicies/PrincipalContractors

Under workers compensation law, a principal contractor is anyone who enters into a contract with another person (subcontractor) to carry out work. A principal may be liable to pay workers compensation to workers employed by subcontractors if a subcontractor was required to have a policy and does not have one and there is a workplace injury. Further, a principal contractor may be liable for their subcontractor's unpaid premiums if they fail to check that their subcontractors are properly insured (this law only applies when a subcontractor is engaged to carry out work relating to the business of the principal). Principal contractors should check that their subcontractors have signed a statement that there are no outstanding liabilities and that all workers compensation premiums applicable for that work have been paid. If the subcontractor is required to have a policy they should also have a Certificate of Currency in which they:

- are classified in the correct industry
- have declared an appropriate amount of wages for their insurance cover.

#### **WORKER STATUS SERVICE & PRIVATE RULINGS**

WorkCover NSW provides assistance to employers through the Worker Status Service to help them determine whether a person is a worker or contractor for premium calculation purposes.

Employers can contact the Worker Status Service to discuss their particular situation or use the tools provided. These tools include a self-assessment tool, which is a simple, anonymous tool that can provide clarity on whether a person is a worker or contractor. This tool also may help an employer decide whether they wish to lodge an application for a private ruling. The self-assessment tool is a guide only and not a binding ruling.

A private ruling is a binding notice from WorkCover that states whether a person is a worker or contractor. A private ruling is only relevant for the circumstances described by the employer in their application and does not impact upon a person's ability to lodge a workers compensation claim, nor can it be used in any claims proceedings.

The Worker Status Service can be contacted on 13 10 50 or email privaterulings@workcover.nsw.gov.au

The worker status self-assessment tool, fact sheets and the private ruling application form are also available at

www.workcover.nsw.gov.au/workerstatus

#### NON-WAGE BASED BUSINESS ACTIVITIES

To calculate the premium for taxi operators further details are required than those requested in the forms. These details are to include the following: a list of plate/s held at the beginning of the relevant period of insurance (including plate number/s), purchase/sale dates of any plate/s that have changed hands in both the 12 months prior to and during the relevant period of insurance, an indication if plate/s are metropolitan or country, the anticipated number of drivers and the average number of bailee shifts/ week per plate. If you are unsure as to what constitutes the relevant period of insurance, please contact your Scheme Agent. Taxi operators are to provide these additional details on a separate sheet, which should be attached to the other form/s being submitted.

#### ASBESTOS

Asbestos is the generic term for a number of fibrous silicate minerals including chrysotile (white asbestos), amosite (brown asbestos), crocidolite (blue asbestos), tremolite, actinolite and anthophylite. The manufacture and use of products containing chrysotile was prohibited nationally from 31 December 2003 and all other forms of asbestos were banned in the mid-1980s. As a result, the use of all forms of asbestos is no longer permitted except for the purpose of sampling or analysis, maintenance, removal, disposal, encapsulation or enclosure. The prohibition of products containing chrysotile did not extend to the removal of asbestos products *in situ* at the time the prohibition took effect. These *in situ* asbestos-containing materials must be appropriately managed to ensure that the risks of exposure to airborne asbestos fibres are eliminated or controlled.

It is important that employers indicate whether any of their workers in the course of their employment are exposed to or handle any asbestos containing products. It is a legal requirement for the controller of premises to identify all asbestos containing materials within a workplace, and these materials must be recorded in an asbestos register.

A Dust Diseases Levy rate will be applied to calculate the premium of those employers whose business activities involve exposure to asbestos.

#### **BUSINESS ACTIVITY**

Provide a full description of your business activities and include any brochures or website addresses that may clarify the definition of these business activities. Based on this description your Scheme Agent will assign a WorkCover Industry Classification (WIC) to enable calculation of your premium.

Refer to the *Insurance Premiums Order* for further clarification, available from www.workcover.nsw.gov.au/ WorkersCompensation/Premiums/ IndustrialClassification

## RELATED CORPORATION FOR BUSINESS ACTIVITY PURPOSES

A corporation is related to another corporation (whether or not that other corporation is an employer) if:

- the employer and other corporation are related to each other by reason of the Corporations Act 2001 (Commonwealth)
- the directors of the employer act under the instructions of the directors of the other corporation
- the directors of the other corporation act under the instructions of the directors of the employer
- the directors of the employer and the other corporation act under the instructions of another person
- the directors of the employer exercise 50% or more of the voting power of the other corporation
- another person exercises 50% or more of the voting power of both corporations.

If a corporation carries on clerical, administrative or managerial services only and predominantly supplies those services to a related corporation, then that corporation is classified on the same basis as the related corporation. Clerical, administrative or managerial services include accounting, drafting, designing, marketing, sales, legal and training.

#### **GROUPING OF RELATED EMPLOYERS**

Provisions for grouping for workers compensation purposes are set out in Divisions 2A & 2B of Part 7 of the *Workers Compensation Act 1987*. These provisions determine who is a related entity.

All related employers that pay combined wages over \$600,000

in NSW must be grouped for premium assessment purposes.

However, charitable and not-for-profit organisations may apply to WorkCover for exemption to grouping status for those related employers who are not in direct competition with the private sector.

All employers within a Group must have separate policies and must insure with the same Scheme Agent, with a common renewal date for all policies.

Note: Grouping provisions commenced from 30 June 2006.

For further information contact 13 10 50 or visit www.workcover.nsw.gov.au/WorkersCompensation/

Premiums/Groupings

#### INSURANCE POLICY WORDING

The wording of the employer's insurance policy is prescribed by Form 3 of Schedule 1 of the *Workers Compensation Regulation 2003*. This may be accessed through a link from WorkCover's website to the NSW legislation website:

http://www.workcover.nsw.gov.au/LawAndPolicy/Regulations/default.htm Alternatively you may contact your Scheme Agent for a copy of the policy wording.

#### DISCLAIMER

This DEFINITIONS supplement provides information and may refer to some of your obligations under the various workers compensation and occupational health and safety legislation that WorkCover NSW administers. To ensure you comply with your legal obligations you must refer to the appropriate Acts and regulations at **www.legislation.nsw.gov.au**