

I, _____, certify that the employee wages noted below were paid to furloughed employees as a result of the COVID-19 pandemic.

Policyholder name

These wages were paid to my employees while they were not engaged in any form of work activities for my business. The wage amounts noted below were identified by the class codes from my Hanover workers' compensation policy:

Total payroll assignment to 0012 furlough class code: \$_____.

ORIGINAL CLASS CODE	FURLOUGH PAYROLL	DATES OF FURLOUGH PAY	
Class code#	Payroll total: \$	Start date:	End date:
Class code#	Payroll total: \$	Start date:	End date:
Class code#	Payroll total: \$	Start date:	End date:
Class code#	Payroll total: \$	Start date:	End date:
Class code#	Payroll total: \$	Start date:	End date:
Class code#	Payroll total: \$	Start date:	End date:
Class code#	Payroll total: \$	Start date:	End date:

I understand that this payroll will be temporarily coded under furlough class codes and have no premium bearing on my workers' compensation premiums due to the COVID-19 pandemic (NY and OR are exceptions).

I also understand that the payroll should be endorsed back to the original employee assigned class codes before my next Hanover renewal.

All wages will be accounted for in my gross payroll computations in my annual workers' compensation premium audit and will be tracked back to each employee affected by this rule change due to COVID-19.

Signed: _____

Policyholder signature

Policyholders need to identify payroll in an accurate and verifiable manner to qualify for the use of furlough class codes. Without proper record keeping the use of furlough codes is not permitted and payroll will be applied at the proper assigned class code for all employees.

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