

# Association Plans are **DIFFERENT**

(the difference between ordinary & extraordinary)

## **Benefits Connection**

*Health insurance solutions...and more...for small business.*

The **Benefits Connection** proudly sponsors Meadowbrook Insurance Group for your workers' compensation insurance needs.

For information about this program, contact **Beth Fisher** at **Benefits Connection**:

**302.294.2059**

Or, contact **Allen Insurance Group**:

**302.654.8823**

**800.486.1244**

## **Experience the difference with us...**

- ▶ Chosen by your association
- ▶ AM Best "A-" Rating (Excellent)
- ▶ Dividend plans for members\*
- ▶ Superior claims handling
- ▶ Personal customer service representative
- ▶ Free Safety Gear Package
- ▶ Free Safety Meeting Library CD
- ▶ Access to Loss Control services and much more!

## **Put our expertise to work for you!**

\*Members must meet eligibility requirements



**MEADOWBROOK**<sup>SM</sup>  
INSURANCE GROUP

**Workers' Compensation  
Quick Quote Information\***



Please complete and fax to  
**302.654.8836**

Which chamber holds your membership? (select one)

- New Castle County    Middletown    Central Delaware    Bethany Fenwick

Company name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Primary contact: \_\_\_\_\_ Email: \_\_\_\_\_

Best time to contact you: \_\_\_\_\_ Years in business: \_\_\_\_\_

Web address: \_\_\_\_\_

Describe your normal business operation: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Current classification number	State	Class code	Annual payroll
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If you know the Experience modification factor - please advise: \_\_\_\_\_

Do you have a safety credit, merit credit or construction credit?    no    yes  
If yes, please advise: \_\_\_\_\_

Current insurance carrier: \_\_\_\_\_

When does your current policy renew? \_\_\_\_\_

*Thank you for your interest in our plan through Benefits Connection.  
As soon as all information is received, we will respond to you within 48 hours.*

\*For premium indication only - this form does not constitute an application for insurance.