

Please complete the below fields

Employer name

Trading name

Policy number

Under the *Workers Compensation Act 1987*, all employers in NSW are required to hold a workers compensation insurance policy. Accordingly, you are only able to cancel your policy in the circumstances described below. If you wish to cancel your policy you are required to complete, sign and send this form back to us. We must receive the form prior to 12 midnight on your policy expiry date. If we do not receive the cancellation request by then, your policy will be renewed as per legislative requirements.

Date from which policy is to be cancelled

Reason for cancellation (please tick one option)

Ceased trading in NSW

Business has been sold

Ceased to employ (applicable only to sole traders and partnerships)

Sold plates (applicable only to taxi plates)

* In order to process the cancellation, transfer and or sale documentation from the taxi base/operator is also required to be submitted

Finalising premium details for current policy period

In addition to this document, we also require you to include your Declaration of actual wages form. This will allow us to determine if there is any premium outstanding, or alternatively, if you are entitled to receive any premium refund from us.

Policy holder name

Position

Signature

Date

how to connect with us

Phone: 13 44 22 (7am to 7pm, Monday to Friday)
Email: underwriting.operations@icare.nsw.gov.au
Post: PO Box 6766, Silverwater NSW 1811