

Workers' compensation and occupational diseases insurance

Policyholder	Name					Personal identification code/Business ID			
	Street address Postal code				City or town				
	Customer number Insurance number/Contract number			ber	The insurance is Fixed-period Continuous				
	Business						Continuous		
	Place of work								
Paid salaries	Period				Salaries and hours				
	Occupational and employee groups per type of work (e.g. office work, drivers, construction)				Gross salaries		Working hours		
	Total salaries of guest labour (does not include salaries of partners working in limited companies)								
Salaries of partners in limited company	Name of partner and personal identificat code/business ID	Number of tion shares, %	Number of working days	Mana posit	agerial tion	Type of performed work	Salary during insurance period		
				Ye	es				
				Ne Ye					
				N Ye					
				Ye	es				
	Family ties of the partners (e.g. spouse, c	ommon-law partne	r child) and liv	Ning in t		ne housebold			
Students of	Family ties of the partners (e.g. spouse, common-law partner, child) and living in the same household Vocational schools and courses								
schools and courses	Number of studentsTotal number of school days/course days (= number of students x school days)								
	Labour education (please continue the list in separate appendix if required)								
	Courses itemized (field of business the course relates to, occupation the			Numbe course particij	2	Total number of theory days*)	Total number of practical training days*)		
	*)= number of course participants x number of course days								

Expiry of fixed-period insurance Is insured labou Yes Bank account nu		The work continues, estir Estimated salary for the	
Signature Place and date Signature and n	ame in block letters		Telephone



COMPLETING INSTRUCTIONS Payroll report

INSTRUCTIONS FOR COMPLETING THE PAYROLL REPORT

The policyholder is obliged to report salaries paid to the employees per insurance period. The payroll report shall be sent even if no employed labour has existed.

SALARIES OF GUEST LABOUR

Salaries paid to all employees with employment contract shall be reported under "Paid salaries" with the exceptions mentioned below.

Mainly income subject to withholding tax shall be reported in the payroll report. Salary from employment and service, performance-based bonus or other compensation paid for work is considered the basis of premium.

For example, payments relating to damages, compensations for expenses and staff benefits etc. are not considered notifiable salaries.

The type of work shall always be reported according to the most hazardous work should the person have many different duties.

LABOUR EDUCATION

The organizer of the education have an obligation to insure. The following data shall be reported for the calculation of the insurance premium for the course participants:

- Number of course days itemized per course
- Number of course participants itemized per course
- Type of work performed during practical training.

PARTNERS

Salaries of working partners included in the workers' compensation insurance shall be reported separately on the first page. The insurance does not include partners holding a managerial position owning personally over 30% of the shares or having a corresponding control or owning together with family members over 50% of the shares or having a corresponding control.

Partners of general partnership and active partners of limited partnership are not included in the obligatory insurance. A silent partner of a limited partnership is included in the insurance if he or she is working and receives salary.

Managerial position

A partner of a limited company holds a managerial position if he or she exercises daily power of decision and have managerial duties. A board member is considered to hold a managerial position.

Private employer

A self-employed person, business proprietor or private employer is not included in the insurance. Family members of a business proprietor are included in the insurance if they have an employment and receive salary.

CONTINUING FIXED-PERIOD INSURANCE

Fixed-period insurance expires the date the insurance periods ends. If the work continues after this date, the fixed-period insurance can be continued. A new payroll report form shall be sent when the continued insurance period ends.

The postal address for the payroll report is overleaf. Please fold the sheet in half into an envelope and fasten with tape.

LähiTapiola maksaa postimaksun

LähiTapiola Keskinäinen Vakuutusyhtiö **Työtapaturmavakuutus** Tunnus 5017783 00006 VASTAUSLÄHETYS

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