



RMWCP PREMIUM REDUCTION PROGRAM APPLICATION

OFFICE OF MANAGEMENT AND BUDGET

RISK MANAGEMENT DIVISION

SFN 53425 (03-2022)

State agencies must submit the application within 60 days after the beginning of the premium period to participate in the Risk Management Workers Compensation Program (RMWCP) premium reduction programs. Agencies that successfully implement and maintain the selected premium reduction program(s) will receive up to a maximum fifteen (15) percent discount for the premium year of participation.

Contact Information

State Agency	Name of RMWCP Contact	
Title	Telephone Number	Email Address
Premium Period	Policy Number	

Discount Options

Ergonomics Program	<input type="checkbox"/>	Application for 3% discount
Designated Medical Provider/Return to Work Program	<input type="checkbox"/>	Application for 3% discount
Incident Investigation Program	<input type="checkbox"/>	Application for 3% discount
Safe Lift Program	<input type="checkbox"/>	Application for 3% discount
Hazard Identification and Control Program	<input type="checkbox"/>	Application for 3% discount
Slips, Trips and Falls Program	<input type="checkbox"/>	Application for 3% discount

By my signature, I acknowledge and understand the outlined requirements of the program. Risk Management may audit each program annually to determine if requirements have been met. Audits may be performed at the discretion of Risk Management by telephone, mail, internet or on-site visit.

Signature	Date
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The application and necessary documentation may be emailed to: rminfo@nd.gov

If you have any questions, please contact:

Workers Compensation Manager
701-328-7583