

Sample Notice of Cancellation Letter

(Should be placed on letterhead and sent registered mail, requesting receipt of delivery)

TO: Present Insurance Carrier

RE: Name of Public Entity

Policy No.

Policy No. - *for Volunteer Fire Fighters (if different from above & if applicable)*

Policy No. - *for Volunteer Ambulance Corps (if different from above & if applicable)*

To Whom it May Concern:

This letter is to advise you that the *(Name of Public Entity)* has elected to become self-insured, effective *(Effective Date)*, in accordance with Subdivision 3-a of Section 50 of the Workers' Compensation Law.

Notice is hereby given of this Municipality's intention to cancel the subject policy with *(Name of Insurance Carrier)* as of *(Effective Date)*. This notice is timely in accordance with the notice of cancellation requirement.

We wish to thank you for your efforts and services during the term of this policy.

Very truly yours,

**Please provide us with a copy of this letter when mailed.*

Sample Letter of Intent to Join the Comp Alliance

Should be placed on public entity letterhead and sent to your Comp Alliance Marketing Representative

Ms. Tricia Murphy
Wright Risk Management
900 Stewart Avenue, Suite 600
Garden City, NY 11530

RE: New York State Municipal Workers' Compensation Alliance – Membership (name & tax ID)

Dear Ms. Murphy:

Please be advised of our intent to join the New York State Municipal Workers' Compensation Alliance effective (insert join date here). Signed and sealed resolutions will be forwarded to you after (insert join date here).

Sincerely,