Ownership (ERM-14)

Form Instructions

This application is intended for Businesses, Carriers, Agents, Brokers, and Insureds to view and edit their information. The purpose is to report changes in a business's ownership or legal status. It is used for transactions such as name changes, mergers, acquisitions, combinations of separate entities, reorganizations, or changes in legal entity status, enabling the PCRB/DCRB to correctly calculate the business's experience rating.

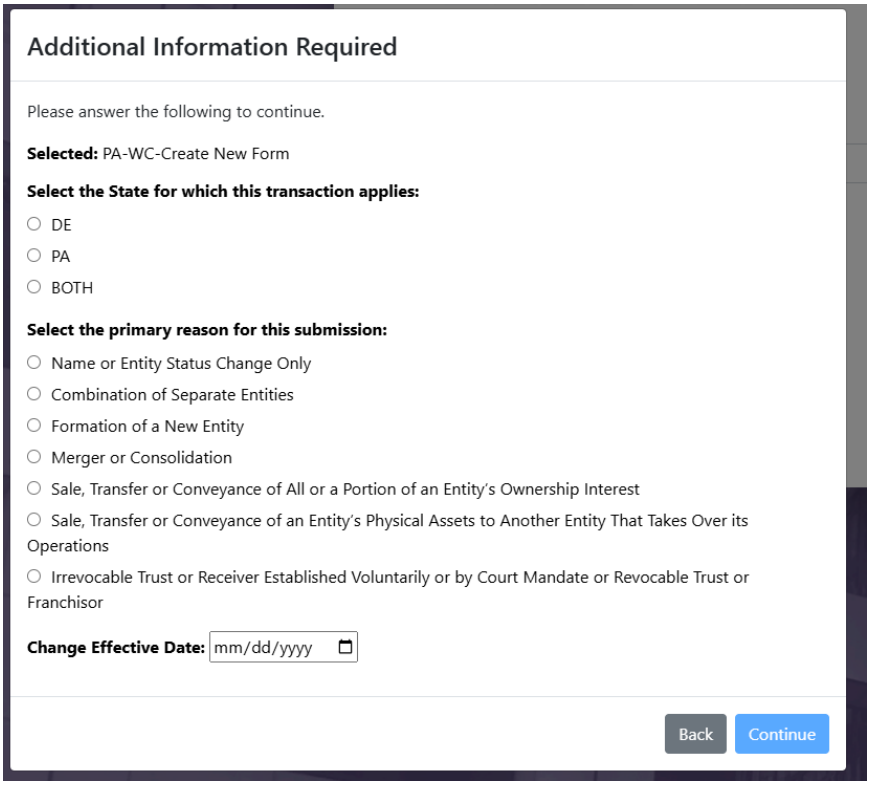
Additional questions can be sent to: underwritinginquiries@pcrb.com. 215-320-4422

To complete the process:

Visit PCRB.com or DCRB.com.
Navigate to the **"Forms"** top-center link on the homepage.
Select Ownership (ERM-14) and then click the **"Access Ownership (ERM-14) Form"**
A login prompt will appear, asking you to enter one of two access codes (Policy Number or Bureau File Number).



Additional information will need to be provided, as this will enable you to access our internal application. You will notice that once in the form, these fields will be pre-populated, so no additional work is required.
Please click **Continue**



Complete the reCAPTCHA verification by checking the **"I'm not a robot"** box, then click **"Open Form"** to proceed.

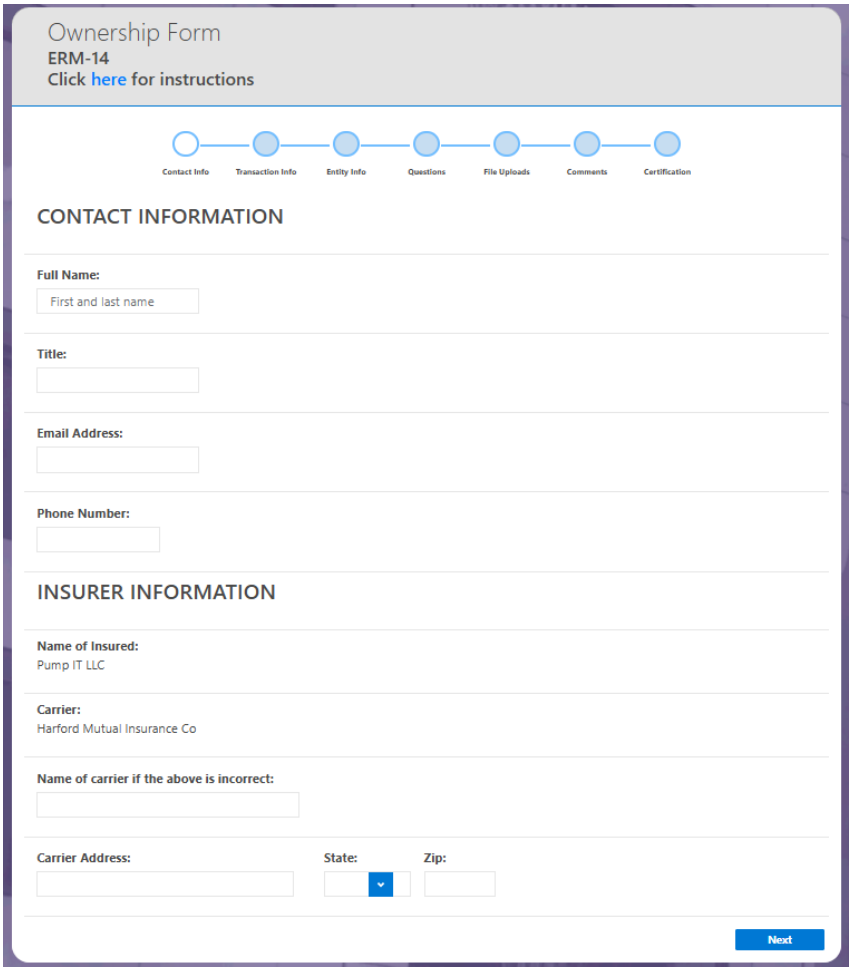
Once the form opens, each question will guide you down the desired path to expedite the process in a concise, thoughtful way.

Contact information:

Full Name
Title
Email Address
Phone Number

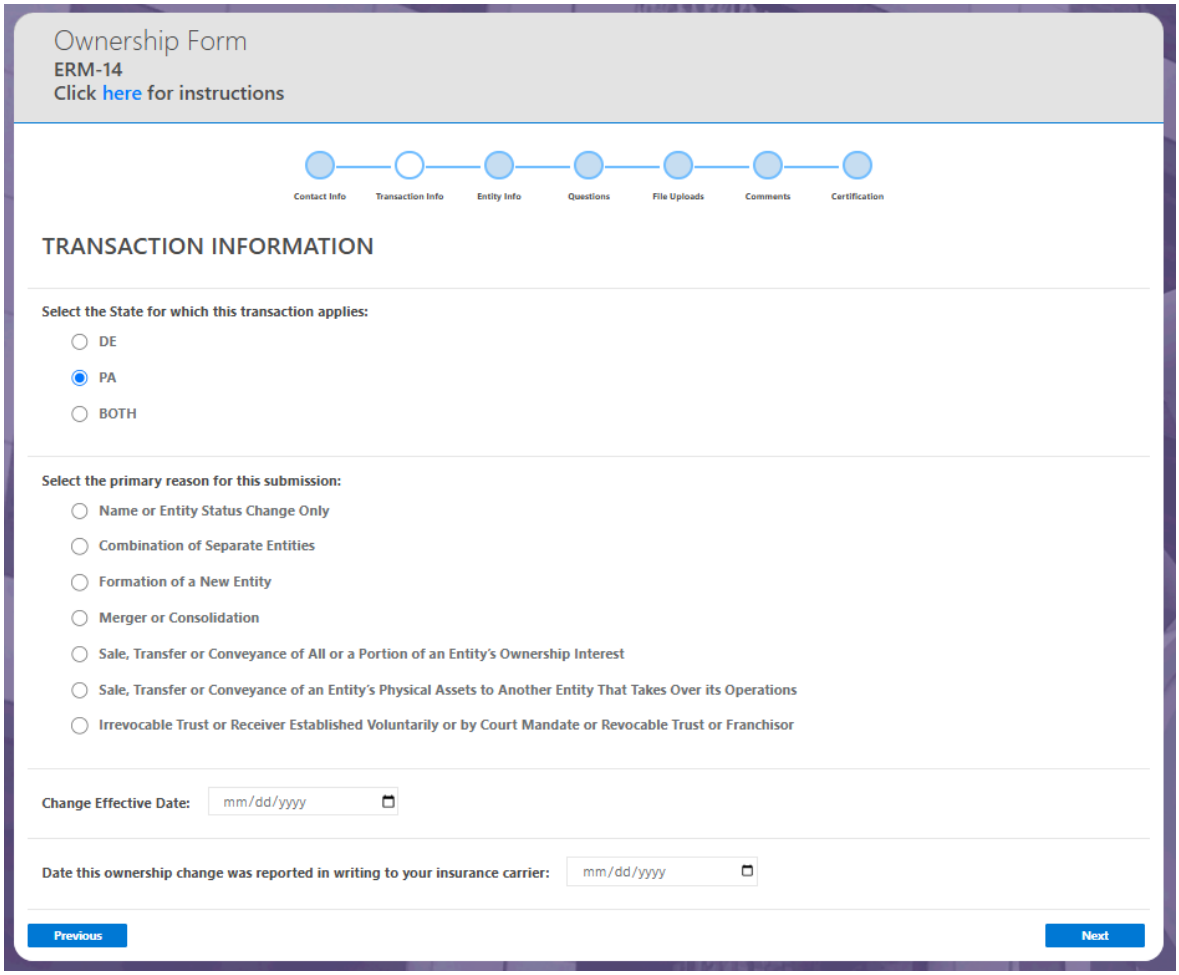
Insured information:

Name of Insured: Prepopulated from PCRB/DCRB records
Carrier: Prepopulated from PCRB/DCRB records
Name of carrier if the above is incorrect:
Carrier Address:
State:
Zip:



Transaction information: This will be pre-populated

Select the State for which the transaction applies: PA, DE, or Both
Select the primary reason for the submission



Name or entity status change

Name of the entity before the change and the name of the entity after the change.

Combination of separate entities

Two or more entities share common majority ownership (more than 50% common ownership in each entity). Entities may be combined for experience rating if two or more entities share a common majority owner and wish to be written on one policy.

Note: Include the date interest was acquired in each entity.

Formation of a new entity

Creating a business structure, such as an LLC or corporation, by choosing a name, filing paperwork with the state, and complying with other federal and state regulations.

Merger or consolidation

Merger - When two or more entities are merged into one surviving entity.

Consolidation - When two or more entities are combined into an entirely new entity.

Note: Include the date the merger or consolidation occurred.

Sale, transfer, or conveyance of all or a portion of an entity's ownership interest

An entity's assets have been sold or transferred. The acquiring entity has taken over the operations, and the selling entity has retained its legal business name.

Sale, transfer, or conveyance of an entity's physical assets to another entity that takes over its operations

An entity's assets have been sold or transferred. The acquiring entity has taken over the operations, and the selling entity has retained its legal business name.

Irrevocable trust or receiver established voluntarily or by court mandate, or revocable trust or franchisor

A change has occurred to the business, either voluntarily or by court mandate, requiring the entity to be put in a trust or receivership.

Change effective date: The date the change occurred.

Date the ownership change was reported in writing to your insurance carrier.

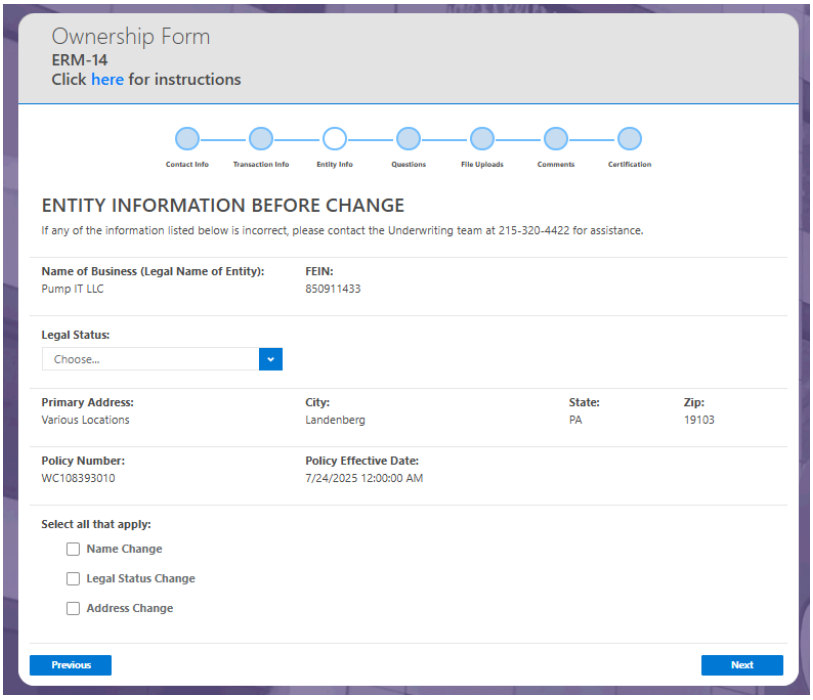
Entity information:

Pending on the purpose selected, entity information before change will prepopulate information based on the most recently submitted policy.

Use the toggle to indicate if the entity information is before or after the change. (Before Change or After Change) Purpose affected: Name or Entity Status Change Only, Merge or Consolidation, Sale, Transfer or Conveyance of All or a Portion of an Entity's Ownership Interest, Irrevocable Trust or Receiver Established Voluntarily or by Court Mandate, or Revocable Trust or Franchisor.

Entity information before change

Name of business (legal name of entity)- furnish both name and location of each entity before and after the change.
FEIN: prefilled based on latest policy
Legal status: make a choice based on the type of change
Primary address: prefilled based on latest policy
City: prefilled based on latest policy
State: prefilled based on latest policy
Zip: prefilled based on latest policy
Policy number: prefilled based on latest policy
Policy effective date: prefilled based on latest policy
Select all that apply: make a choice based on the type of change



Entity information resulting from change:

Depending on the purpose, additional questions will be asked.

When listing ownership for each entity, remember:

List all names of owners and their individual shares held
If it is a **partnership**, list all general partners' names and their percentage of ownership.
If it is a **corporation**, list owners and their percentages of 5% or more voting stock.
If an **entity is other than a sole proprietor, partnership, limited liability company (LLC)**, or corporation, list the governing board of each entity. List the total shares of stock issued.
If it is a **non-profit coprporation**, select **Other** and list the governing board of each entity. Attach complete list if applicable.

If it is a **Combination**, enter each entity to be combined: List complete ownership for all entities. Include the date ownership was acquired for each entity. Answer the question regarding employee retention.

If combining more than two entities, toggle the Add another entity to Yes.

If it is a Change of Entity Status:

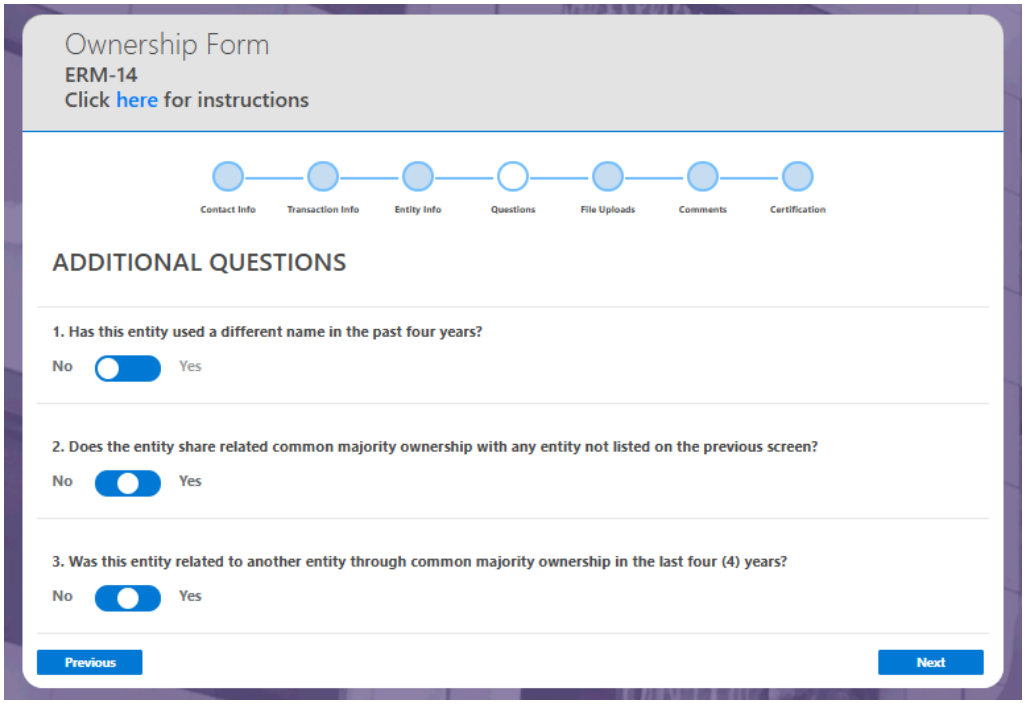
List the name/entity status and ownership before the change (prepopulated) and the name/entity status after the change.

If it is a Merger/ Consolidation:

List the names of the entities and the ownership of each entity involved.
List the name and ownership of the remaining entity.
List of the amount regarding employee retention.

Additional questions

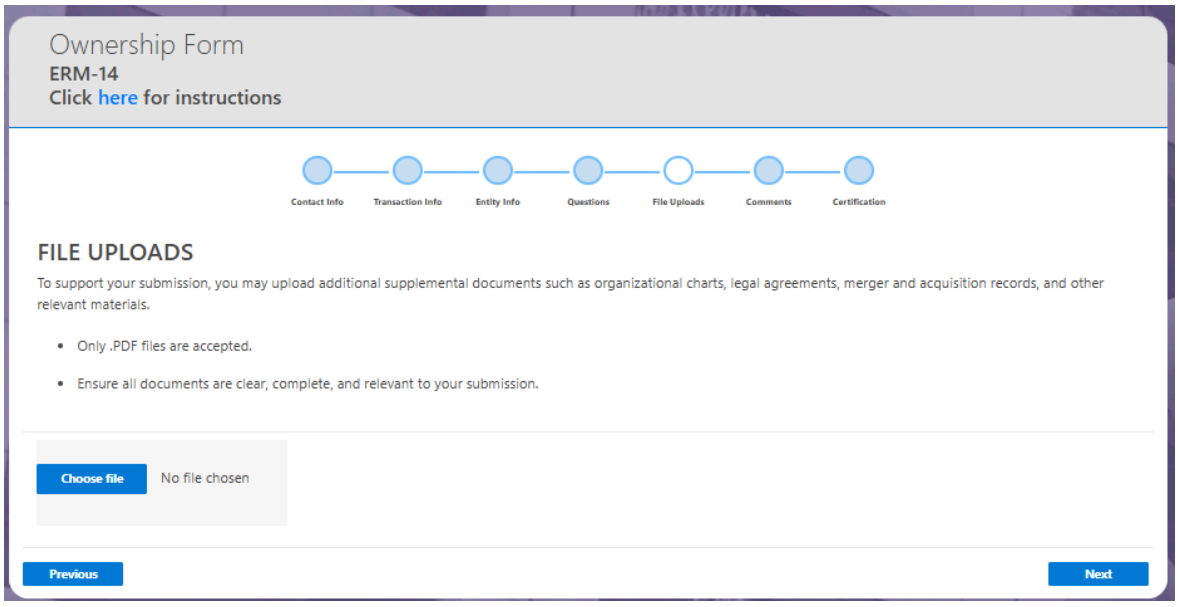
Depending on the purpose you have selected, specific questions will populate, requiring further explanation.



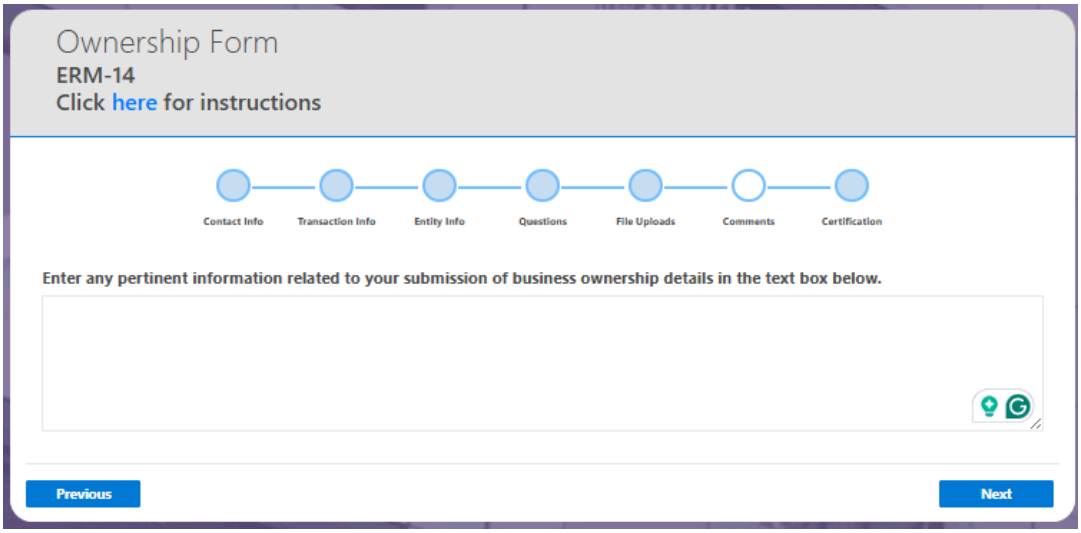
Supporting documentation

File Uploads: To support your submission, you may upload additional supplemental documents such as organizational charts, legal agreements, merger and acquisition records, and other relevant materials.

Only PDF files are accepted.
Ensure all documents are clear, complete, and relevant to your submission.



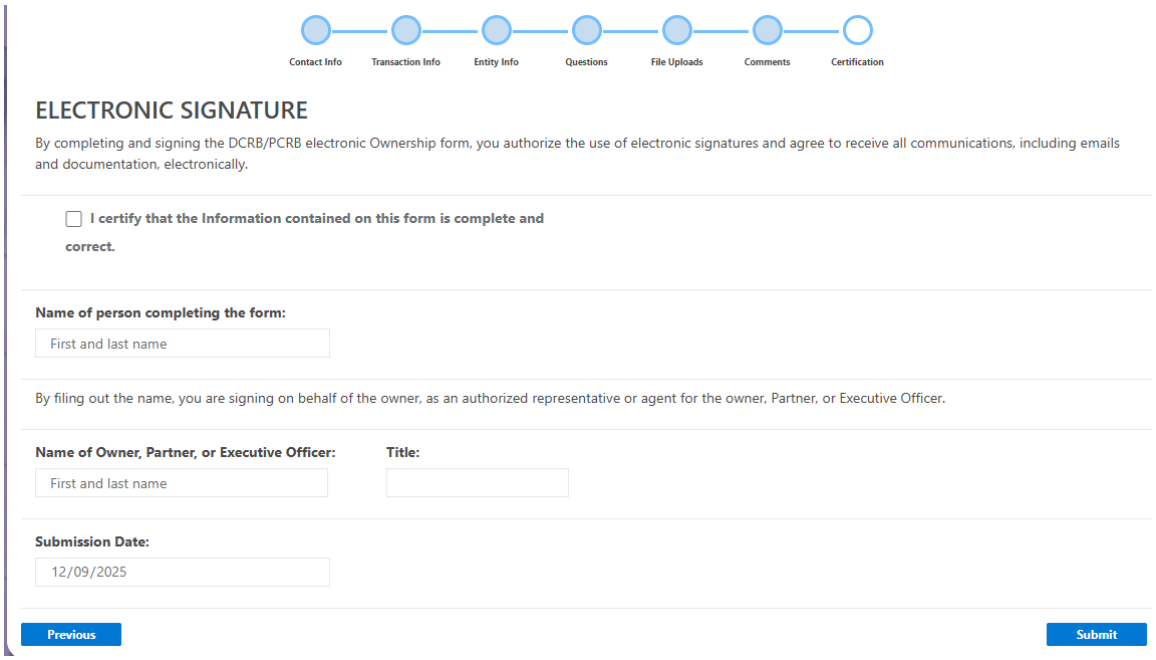
Comments: Enter any pertinent information related to your submission of business ownership details in the text box below.



Electronic signature

Please check the box to certify that the information contained on this form is complete and accurate.

Name of person completing the form.
Name of the Owner, Partner, or Executive Officer must be included on the form.
Submission Date.

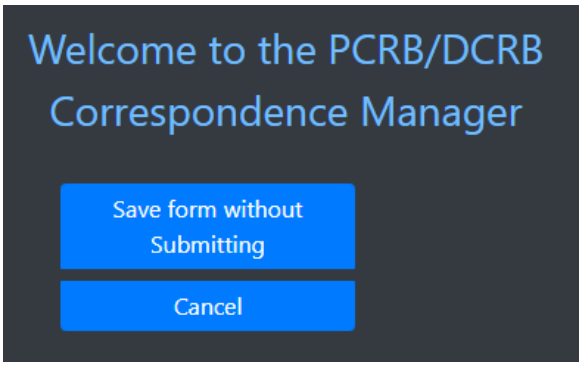


Submit

Once the information is filled out, click the **Submit** button. Information will be sent to our internal application, where the analyst will review and validate all requests, changes, or updates in our system.

Save Without Submitting

At any time, during your submission, you can elect to **Save the form without Submitting** or **Cancel** to start over. If you elect to save, you have up to one week to return and complete the process. This allows the submitter to enter the Policy # or the Bureau # on the Intermediary page, return where they left off, and complete the form.



If you do not return, the information you submitted will be deleted and cleared, and you can start over.

