



Class Code Approval and Authorization Form

This form must be completed must be completed for all new class codes and/or new clients

ASAC Partner:	Date:	Person Completing Form:
Client Company Name:	Address:	
Client's Bureau #:	Website Address:	State for proposed assignment:
Client's Class Codes:	Requested Class Code:	Current XMod: effective:
Estimated Payroll for all Placements:	Number of Placements:	Is this for a bid only? <input type="checkbox"/> Yes <input type="checkbox"/> No
Client's Operations (please be very descriptive including products manufactured):		
Assignment Duties (please be very descriptive):		
Hazards (Check All That Apply): <input type="checkbox"/> Lifting Max ___lbs <input type="checkbox"/> Machine Operation <input type="checkbox"/> Hazardous Chemicals <input type="checkbox"/> Bloodborne Pathogens <input type="checkbox"/> Heights <input type="checkbox"/> Forklift Operation <input type="checkbox"/> Repetitive Work <input type="checkbox"/> Loud Environment <input type="checkbox"/> Confined Space Entry <input type="checkbox"/> Extreme Temperatures <input type="checkbox"/> Other: _____		
Describe the "Special Hazards" above:		
Personal Protective Equipment Used: <input type="checkbox"/> Back Belts <input type="checkbox"/> Safety Goggles <input type="checkbox"/> Respirators <input type="checkbox"/> Gloves <input type="checkbox"/> Safety Shoes/Boots <input type="checkbox"/> Harness <input type="checkbox"/> Other: _____		
Additional Comments:		
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Proper Class Code:	Class Code Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No	Rate: Base: Net:
Approved By:		
Comments:		

Please note: If approval of this code is given and a temporary placement is made, a separate request (no form required) including payroll estimates needs to be made asking for the class code to be endorsed on the current policy. Additionally, the approval only applies to the client and job presented in this form. Any new clients or job duties associated with this code must be pre-approved prior to making placements.

Email the completed form to your ASAC service representative.