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Name: \_\_\_\_\_

**This form must be completed annually.**

Your insurance premium may be subject to a license fee or tax imposed by your local government(s). KRS 91A.080 authorizes local governments to impose taxes for insurance risks located within the corporate limits of that local government. The amount of the fee or tax is determined by the local government where the insured risk is located.

To assist OMIC in determining your tax liability, please list the physical address of each office location in Kentucky at which you practice:

**1** \_\_\_\_\_  
*Street address*

*City* *County* *Zip code* *Percentage of Practice*

**2** \_\_\_\_\_  
*Street address*

*City* *County* *Zip code* *Percentage of Practice*

**3** \_\_\_\_\_  
*Street address*

*City* *County* *Zip code* *Percentage of Practice*

*Continue on a separate page, if needed.*

You must notify OMIC promptly of any changes in your practice locations. Changes in your practice location, practice activity, or other coverage changes may result in modification to your premium and/or your tax liability as of the effective date the change takes place.

The tax amount(s) charged, if any, will be shown on all future Declarations or premium billings for your policy. If you believe that you have been erroneously charged or have been overcharged the tax, you may contact your underwriting representative at (800) 562-6642, ext. 639, or by email to underwriting@omic.com for information on how to request a refund or credit for the tax paid.

\_\_\_\_\_  
*Applicant's Signature*

\_\_\_\_\_  
*Date*