Welcome to the new California Contractors Network portal!

How to Login for the First Time

You will receive a "Welcome to Trailblazer" email on Tuesday, June 24th which contains a link to access the CCN Member Portal and create your password.

If you don't receive the email:
1. Check your junk folder
2. You can reset your password by navigating to https://ccn.app.trailblazertech.com/forgot-password, using your email address as your user name.

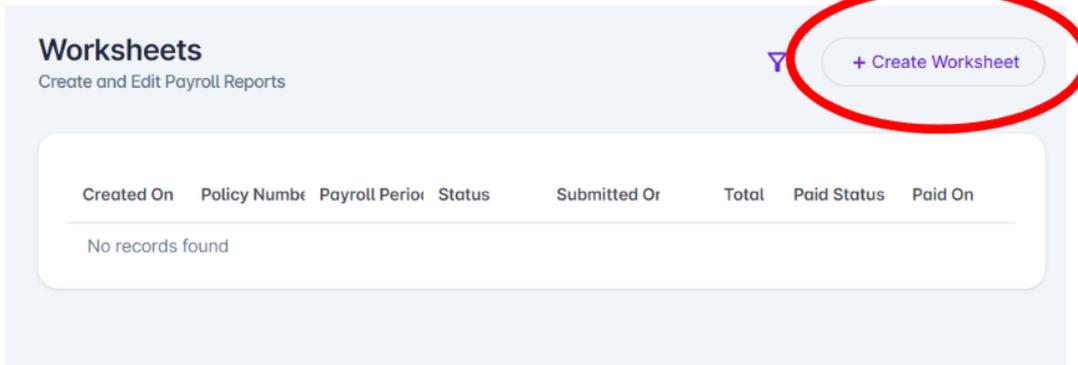If you have issues, please contact accounting@diligere.us.

To Enter Payroll Information

Upon logging into the system, you should see a menu of options on the left hand side of the screen.

- Click on "Billing & Payments" icon on left side of the screen (**circled**)
- Click "Worksheets" (**arrow**)
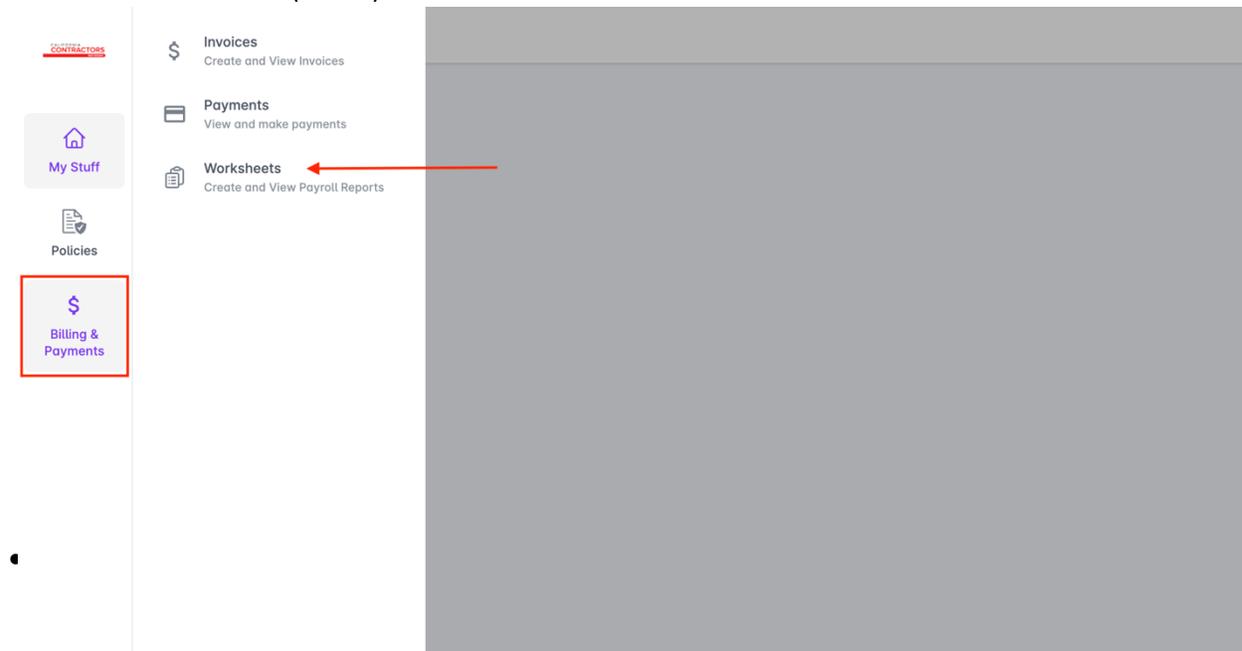
You should see the below screen. Click on "Create Worksheet" (circled) to start the process.

Complete Payroll Worksheet

- Select the correct "Reporting Month" **(1)**

- Click "No payroll" box if applicable **(2)**

- Update "Monthly Gross Payroll" and "Employee Count" for each class code **(3)**

- Click "Calculate Premium" **(4)**

Premium will automatically be calculated for you

- Click "Submit Worksheet" **(sample below)**

Add Payment Information and Submit Payment

- After submitting your worksheet, scroll down to bottom of the page and click "Make Payment" (circled).

Class Code	Class Description	Gross Payroll Amount ⓘ	Class Code Rate	Total
5606	Exec.Supervisors - NO LABOR	$ 10,000.00	1.69	$169.00
8601	Engineer or Architect	$ 200.00	0.65	$1.00
8742	Salesperson, Collectors	$ 1,000.00	0.36	$4.00
8810	Clerical Office Employee NOC	$ 1,000.00	0.15	$2.00
	Total Gross Payroll Amount	$ 12,200.00	Sub Total	$176.00
			Worksheet Factor See Details	0.9500
			Premium Amount ⓘ	$167.00
			Total Due	$167.00

Make changes   **Make Payment**

- Select payment method **(1)** and Add information in all fields and click "validate"

- To save this payment method, check the "Save card for future use" box **(2)**

- Click "Submit Payment" **(3)**

Worksheet Details

Insured Name		Policy ID	
Effective Date	1/1/23	Expiration Date	12/31/23
Premium	$167.00	Status	SUBMITTED

Payment Method   **1**   Credit   ACH

Saved Payment Methods

Name on Card *

Credit Card Number

Enter credit card number without spaces

Expiration   CVC   Postal
mm/yy

2 ☐ Save card for future use

Validate

Payment Details

AMOUNT	$167.00
FEE	$5.85
TOTAL	$172.85

3   Submit Payment