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- 1	Approved By:

## Worker Claim for Compensation

## Notes for workers

- You must complete each box on both pages of this form. Please print and use a ball point pen.
- Details of your qualifications and experience will assist your insurer and rehabilitation providers to help you return to normal productive life as soon as possible after your injury.
- Your employer must sign this form giving the date he/she received this form.
- You must complete and sign the declaration in the presence of a witness unrelated to you.
- . Give the completed form to your employer, retaining the fourth copy for yourself.
- If time off work is involved, you must supply a completed WorkCover Certificate of Capacity, signed by a doctor, to your employer.
- Your employer has ten days to give this form and the Certificate of Capacity (if applicable) to his/her WorkCover insurer.
- The insurer has 28 days, from the date it receives your claim, to advise you in writing of its decision to accept or reject your claim.

## Notes for employers

If your worker's claim is accepted, you are liable for the cost of the first ten days\* a worker is off work and the first \$389 of medical and like costs.

- you accept liability and expect the worker to be off work for more than ten days; and/or
- . you expect the medical and like costs to be more than \$389; or
- · you do not accept liability for the claim;

## then, you must forward:

- . the original copy of this form; and
- a completed Employer Claim Report form; and
- if time off work is involved, a completed Certificate of Capacity, signed by a doctor;

to your WorkCover insurer, within ten days of receiving the worker's claim form and Certificate of Capacity (if applicable). But if:

- you accept liability; and
- . the worker has no time off work or returns to work in ten days or less; and
- · you do not expect the medical and like costs to exceed \$389;

then, you must complete the extra information on the the minor claims copy, (second copy - pink) and send the copy to your WorkCover insurer

A further charge, as a penalty, may be imposed on your premium if you fail, without good cause, to forward a claim as required.

\* Employer liability for claims incurred prior to 1 July 1993 is still only five days (plus the first \$389 of medical and like costs).