

State of Connecticut Workers' Compensation Commission

Notice to Employees

Workers' Compensation Act

Chapter 568 of the Connecticut General Statutes (the Workers' Compensation Act) requires your employer,

to provide benefits to you in case of injury or occupational disease in the course of employment.

Section 31-294b of the Workers' Compensation Act states: "Any employee who has sustained an injury in the course of his employment shall immediately report the injury to his employer, or some person representing his employer. If the employee fails to report the injury immediately, the commissioner may reduce the award of compensation proportionately to any prejudice that he finds the employer has sustained by reason of the failure, provided the burden of proof with respect to such prejudice shall rest upon the employer." Such an injury report by the employee is NOT an official written notice of claim for workers' compensation benefits. (The Form 30C is necessary to satisfy this requirement.)

The INSURANCE COMPANY or SELF-INSURANCE ADMINISTRATOR is:

Address		Telephone
City/Town	State	Zip Code
Арј	proved Medical Care Plan 🛛 Ye	es 🔲 No
The State of Connecticut Work	kers' Compensation Commission o	ffice for this workplace is located at:
Address		Telephone
City/Town	State	Zip Code
	ts under the law or the obligations	of the employer or insurance compan e Workers' Compensation Commission
should be addressed to the em (1-800-223-9675). THIS NOTICE MUST BE IN T CONSPICUOUS PLACE IN EA	ts under the law or the obligations ployer, the insurance company or th YPE OF NOT LESS THAN TEN P	of the employer or insurance company he Workers' Compensation Commission OINT BOLD-FACE AND POSTED IN A AILURE TO POST THIS NOTICE WILL