



INJURY REPORT FORMS

These are documents to be completed after a workplace injury. Contact Omaha National at 844-761-8400 to report the claim.

C-2F – Employers’ Report of Work-Related Injury/Illness:

New York law requires employers to keep records on all work injuries or illnesses sustained by employees. Send the completed C-2F form to Omaha National at the same time you report the claim to us. Any injuries involving medical treatment beyond first aid, more than two first aid treatments, or missed time from regular duties beyond the working day or shift on which the incident occurred are required to be reported to the State Board of Workers’ Compensation. Once the claim is reported, we will submit electronic reports to the Board on your behalf.

C-240 – Employer’s Statement of Wage Earnings:

This form may be used to provide information about an injured worker’s wages. Send a completed copy to Omaha National at the same time you report the injury to us.

Incident, Supervisor, and Witness Reports:

When a workplace injury occurs, these forms may be used to gather information about an incident or injury. Copies should be sent to Omaha National at the same time you report the injury to us.