



STATE-SPECIFIC FORMS & DOCUMENTS

Keep blank copies of these forms to be provided to employees upon their request. Send copies of the completed forms to Omaha National.

ICA 0113 - Employee's Notice of Rejection of Terms of the Arizona Workers' Compensation Law:

Employees may use this form to reject the provisions of Arizona's workers compensation laws. The form must be filled out in duplicate and filed with the employer prior to the occurrence of a workplace injury. The employer must send a copy of the completed form to Omaha National within five days.

ICA 0114 - Employee's Notice to Revoke Rejection of Terms of the Arizona Workers' Compensation Law:

This form may be used to reverse an employee's rejection of workers compensation coverage. The form must be filled out in duplicate and filed with the employer prior to the occurrence of a workplace injury. The employer must send a copy of the completed form to Omaha National within five days.