



ACCIDENT PROCEDURE

IF YOU ARE INJURED ON THE JOB

YOU MUST:

- 1 Notify your supervisor immediately.** Your employer is required to file an Employer's-Report-of-Injury-or-Illness form within 24 hours of accident occurring.
- 2 Seek medical treatment.** Use your workers' compensation insurance and preferred providers for all non-emergency injuries as soon as possible. Please give your below contact information to your medical provider.
- 3 Keep in contact with your employer.** Continually inform your employer of your condition and work capabilities.

YOU SHOULD:

- 1 Refer to Preferred Providers Listing.** For non-emergency injuries please receive treatment at one of the preferred workers' compensation providers. (List Provided)

COMPANY INSURANCE: WCF INSURANCE
COMPANY POLICY NUMBER: 4001992 (Utah Claims)
4014575 (AZ, MT, TX Claims)

WORKERS COMPENSATION CONTACT: **BRENDA AUSTIN**
Ingram & Co, Inc
2151 E Broadway Rd #206
Tempe, AZ 85252
(480) 967-6466