STATE OF ALABAMA
WORKERS' COMPENSATION
INFORMATION

If you are injured on the job, or contract an occupational disease, notify your employer immediately.

Your employer will advise you of the physician to see for authorized medical treatment.

WORKERS' COMP INSURANCE CARRIER

SUNZ Insurance Company

TELEPHONE NUMBER

877-306-6398

ASSISTANCE IS AVAILABLE UNDER THE ALABAMA WORKERS' COMPENSATION LAW INCLUDING MEDIATION SERVICE.
FOR INFORMATION CALL:
1-800-528-5166
Alabama Department of Labor
Workers' Compensation Division
649 Monroe Street
Montgomery, AL 36131
CODE OF ALABAMA, 1975, § 25-5-290(d), REQUIRES THAT THIS NOTICE BE POSTED
IN ONE OR MORE CONSPICUOUS PLACES IN YOUR BUSINESS.

FORM WCC#1 10/12

Estado de Alabama

Información de Compensación de Trabajadores

Si se lesiona en el trabajo, o tiene una enfermedad ocupacional, notifique a su empleador inmediatamente.
If you are injured on the job, or contract an occupational disease, notify your employer immediately.

Su empleador le aconsejará a que médico tiene que consultar para tratamiento médico autorizado.
Your employer will advise you of the physician to see for authorized medical treatment.

Portador de Seguro de Compensación al Trabajador:
Workers' Compensation Insurance Carrier

SUNZ Insurance Company

Número de Teléfono:
Telephone number

877-306-6398

La asistencia está disponible bajo la Ley de Compensación de Trabajadores de Alabama, incluyendo el servicio de mediación.
Assistance is available under the Alabama Workers' Compensation Law including mediation service.

Para más información llame al:
For information call:

1-800-528-5166

Alabama Department of Labor
Workers' Compensation Division
649 Monroe Street
Montgomery, AL 36131

Código de Alabama, 1975, 25-5-290(d), requiere que este aviso se publique en uno o más lugares visibles en su negocio.
Code of Alabama, 1975, 25-5-290(d), requires that this notice be posted in one or more conspicuous places in your business.