

EMPLOYER CONFIRMATION OF INTERJURISDICTIONAL ACCOUNTS

General Information on Right of Election Requirements

If it is determined that a worker may be entitled to workers' compensation benefits in more than one jurisdiction, there is a requirement under the Workers' Compensation Boards' Interjurisdictional Agreement to have a worker sign a right of election in order to elect benefits from the Alberta WCB. This may be the situation when a worker is injured in Alberta but resides in another province. However, if an employer does not have an account or is not expected to have an account in the worker's province of residency at the time of the accident, there is no requirement for a right of election from the worker.

By completing this form, the employer confirms that they did not perform any business and/or operations in the province of residency at the time of the worker's accident and as such, are not required to have an account with the other Board. However, it is important to note that the Alberta WCB has final authority to determine whether a right of election is required from the worker.

Date of Accident: _____

Name of your injured worker(s):	WCB claim number

_____, **Employer's Name**, _____, **Alberta WCB Account #**, hereby confirms that it did not perform any business and/or have any operations in the province of _____ at the time of the worker's date of accident. **Province where worker was a resident**

Dated this _____ day of _____, 20____, at _____

Employer/ Employer's Authorized Representative Signature _____

Contact Name _____

Contact Title _____

Contact Phone Number _____

Note: The individual signing this document acknowledges that they have the authority to represent and bind the employer.

