LWP Claims Solutions, Inc

COVID-19 Occurrence Reporting Form

Reporting Requirements per SB 1159 (Employers subject to a civil penalty of up to $10,000 for failure to report)

Form must be submitted for each positive COVID-19 test result received.

Positive Test between 7/6/20 through 9/17/20 – Employer must report to LWP Claims by 10/29/2020.
Positive Test on or after 9/18/20 – Employer must report to LWP Claims within 3 days.

Please email this information to COVID@lwpclaims.com for LWP mandatory record keeping. Form may be submitted by fax to (408)725-0395.

<table>
<tr><td colspan="3">1. Employer Name:</td><td>2. Policy Number (if applicable):</td></tr>
<tr><td>3. Employee ID #</td><td>4. Occupation</td><td>5. COVID-19 Test Date</td><td>6. Date employee last worked at employer's work location:</td></tr>
<tr><td colspan="4">7. Location Name & Address
Full address of location(s) where the employee worked in the last 14 days priors to testing positive (continue below if additional space required)
Name:
Address:
City, State, Zip Code:
Name:
Address:
City, State, Zip Code:</td></tr>
<tr><td colspan="4">8. Number of Employees at Location
Provide the highest number of employees at the locations listed under #7 above or additional location below:
Testing completed on or prior to 9/17/20 Report for the period 7/6/10 – 9/17/20:
Testing completed on or after 9/18/20 -Report for the 45 days prior to employees last date worked:</td></tr>
<tr><td colspan="4">Were any of these locations ordered to close by a local public health department, the State Department of Public Health, the Division of Occupational Safety and Health, or a school superintendent due to risk of infection with COVID-19: Yes ◯ No ◉</td></tr>
<tr><td colspan="2">If so which location:</td><td>When:</td><td>By Whom:</td></tr>
<tr><td colspan="3">9. Has the employee claimed this as work related?
Yes ◯ No ◉</td><td>For questions, please call (916) 609-3600 and ask for your Account Manager</td></tr>
</table>

Completion of this form does not generate a claim, nor does a claim qualify as a report.
To submit a Workers' Compesation claim please follow your normal claim reporting procedures.

Please enter additional locations employee worked if required or any additional comments: