

Job Safety and Health IT'S THE LAW!

All workers have the right to:

- A safe workplace.
- Raise a safety or health concern with your employer or OSHA, or report a workrelated injury or illness, without being retaliated against.
- Receive information and training on job hazards, including all hazardous substances in your workplace.
- Request a confidential OSHA inspection of your workplace if you believe there are unsafe or unhealthy conditions. You have the right to have a representative contact OSHA on your behalf.
- Participate (or have your representative participate) in an OSHA inspection and speak in private to the inspector.
- File a complaint with OSHA within 30 days (by phone, online or by mail) if you have been retaliated against for using your rights.
- See any OSHA citations issued to your employer.
- Request copies of your medical records, tests that measure hazards in the workplace, and the workplace injury and illness log.

Employers must:

- Provide employees a workplace free from recognized hazards. It is illegal to retaliate against an employee for using any of their rights under the law, including raising a health and safety concern with you or with OSHA, or reporting a work-related injury or illness.
- Comply with all applicable OSHA standards.
- Notify OSHA within 8 hours of a workplace fatality or within 24 hours of any work-related inpatient hospitalization, amputation, or loss of an eye.
- Provide required training to all workers in a language and vocabulary they can understand.
- Prominently display this poster in the workplace.
- Post OSHA citations at or near the place of the alleged violations.

On-Site Consultation services are available to small and medium-sized employers, without citation or penalty, through OSHA-supported consultation programs in every state.

This poster is available free from OSHA.

Contact OSHA. We can help.

NOTICE TO EMPLOYEES WORKERS' COMPENSATION

Employer Name: **STATE OF OREGON**

The above named employer, an employer within the meaning of the Workers' Compensation Law of the State of <u>Nebraska</u>, hereby gives notice to employees that the employer has secured the payment of Compensation to its employees and their dependents in accordance with the provision of said law, by insuring with:

Insurance Company: Zurich American Insurance Company 1299 Zurich Way Schaumburg, IL 60196-5870 800-987-3373

Policy Effective Dates: 7/1/2023 to 7/1/2024

Policy Number: <u>WC 9663435-10</u>

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

Claims Administered By: Zurich Claims Services PO Box 49547 Colorado Springs, CO 80949-9537 Telephone 800-987-3373

Collecting Workers' Compensation benefits by intentionally misrepresenting, misstating, or failing to disclose any material fact is <u>fraud</u>. Fraudulent claims are subject to prosecution. All suspected violations will be investigated. Anyone may report a potentially fraudulent claim by contacting the Workers' Compensation Division or Attorney General's office.

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