

**ALL COPIES OF THIS FIRST REPORT MUST BE TYPED OR PRINTED**

Department of Labor  
Office of Workers' Compensation (OWC)  
4425 N. Market Street  
Wilmington, DE 19802  
Telephone 302-761-8200

**STATE OF DELAWARE  
FIRST REPORT  
OF OCCUPATIONAL INJURY OR DISEASE**

\_\_\_\_\_  
**OWC Case File No.**

**ALL INFORMATION IS REQUIRED, unless not applicable where "if applicable" is noted.**

<b>1. EMPLOYEE:</b> FIRST MIDDLE LAST			<b>2. EMPLOYEE SOCIAL SECURITY NO.</b>	
<b>3. ADDRESS – INCLUDE COUNTY AND ZIP CODE</b>			<b>4.</b> MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>	<b>5. EMPLOYEE PHONE NUMBER</b> (INCLUDING AREA CODE)
<b>6. DATE OF BIRTH</b> / /	<b>7. AGE</b>	<b>8. WAGE</b>	<b>9. WEEKLY HOURS WORKED</b>	
<b>10. OCCUPATION (REGULAR)</b>		<b>11. DEPARTMENT OR DIVISION REGULARLY EMPLOYED</b>		<b>12. HOW LONG EMPLOYED</b>
<b>13. EMPLOYER:</b>			<b>14. PERSON MAKING OUT THIS REPORT</b>	
<b>15. ADDRESS – INCLUDE COUNTY AND ZIP CODE</b>			<b>16. EMPLOYER PHONE # (INCLUDE AREA CODE)</b>	
<b>17. MAILING ADDRESS – IF DIFFERENT THAN ABOVE</b>			<b>18. NATURE OF BUSINESS – TYPE OF MFG., TRADE, CONSTRUCTION, SERVICE, ETC.</b>	
<b>19. WORKERS' COMPENSATION INSURANCE CARRIER</b>			<b>20. WORKERS' COMP. INS. CARRIER PHONE #, (INCLUDING AREA CODE)</b>	
<b>21. WORKERS' COMP. INSURANCE CARRIER ADDRESS</b>			<b>22. POLICY NUMBER / CARRIER CASE NUMBER:</b> /	
<b>23. THIRD PARTY ADMINISTRATOR (TPA), IF APPLICABLE</b>		<b>24. TPA ADDRESS – INCLUDE CITY STATE AND ZIPCODE</b>		
<b>DATES:</b>		<b>27. NORMAL STARTING TIME</b> <input type="checkbox"/> AM <input type="checkbox"/> PM		<b>28. IF EMPLOYEE BACK TO WORK GIVE DATE</b> / /
<b>25. DATE OF REPORT</b> / /	<b>26. DATE OF INJURY</b> / /			<b>29. AT SAME WAGE?</b> YES <input type="checkbox"/> NO <input type="checkbox"/>
<b>30. IF FATAL INJURY, GIVE DATE OF DEATH</b> / /	<b>31. DATE EMPLOYER KNEW OF INJURY</b> / /	<b>32. DATE DISABILITY BEGAN</b> / /	<b>33. LAST FULL DAY PAID-DATE</b> / /	
<b>INJURY OR DISEASE:</b>				
<b>34. DESCRIBE THE INJURY/ILLNESS AND PART OF BODY AFFECTED.</b>				
<b>35. SPECIFY THE DEPARTMENT WHERE INCIDENT OCCURRED AND THE WORK PROCESS INVOLVED.</b>				
<b>OCCURRENCE:</b>				
<b>36. LIST THE EQUIPMENT, MATERIALS, AND CHEMICALS EMPLOYEE USED WHEN THE INCIDENT OCCURRED, E.G. ACETYLENE.</b>				
<b>37. DESCRIBE THE EMPLOYEE'S ACTIVITY AT THE TIME OF INJURY OR ILLNESS, E.G. LIFTING A PATIENT.</b>				
<b>38. DESCRIBE HOW THE INJURY/ILLNESS OCCURRED.</b>				
<b>39. NAME OF PHYSICIAN (IF APPLICABLE)</b>			<b>40. PHYSICIAN'S ADDRESS</b>	
<b>41. HOSPITAL (IF APPLICABLE)</b>			<b>42. HOSPITAL ADDRESS</b>	

**DISTRIBUTION OF THIS REPORT (1 original and 3 copies)**

- 1. ORIGINAL MUST BE SENT IMMEDIATELY TO THE WORKERS' COMPENSATION INSURANCE CARRIER.**
- 2. COPY TO THE OFFICE OF WORKERS' COMPENSATION (use the address at the top left of this form)**
- 3. EMPLOYER'S COPY – RETAIN AS RECORD**
- 4. EMPLOYEE'S COPY**

# WORKERS' COMPENSATION

## IMPORTANT THINGS TO DO IN CASE OF INJURY

### ***THE EMPLOYER SHOULD:***

1. Provide all necessary medical, surgical and hospital treatment from the date of accident.
2. Every employer shall keep a record of all injuries received by employees and make a report within 10 days thereof in writing to the Office of Workers' Compensation
3. Ascertain the average weekly wages of the employee and provide compensation in accordance with the provisions of the law, for disability *beyond the third day* after the accident. All agreements as to compensation must be submitted to the Office of Workers' Compensation for approval.

### ***THE EMPLOYEE SHOULD:***

1. Immediately notify the employer in writing of accidental injury or occupational disease and request medical services. Failure to give notice or to accept medical services may deprive the employee of the right to compensation.
2. Give promptly to the employer, directly or through a supervisor, notice of any claim for compensation for the period of disability beyond the third day after the accident. In case of fatal injuries, notice must be given by one or more dependents of the deceased or by a person on their behalf.
3. In case of failure to reach an agreement with the employer in regard to compensation under the law, file application with the Industrial Accident Board for a hearing on the matters at issue within two years of the date of accidental injury or one year of knowledge of the diagnosis of an occupational disease or an ionizing radiation injury. All forms can be obtained from the Office of Workers' Compensation.



Georgetown American Job Center  
8 Georgetown Plaza, Suite 2  
Georgetown, DE 19947  
(302) 856-5230

Delaware Department of Labor  
Division of Industrial Affairs

## PAYMENT OF WAGES

### EMPLOYERS OF FOUR (4) OR MORE EMPLOYEES ARE REQUIRED TO:

- **Notify employees in writing at the time of hire:**
  1. Rate of Pay
  2. Day, hour and place of payment
  3. Employer's fringe benefits policies
- Notify employees in writing of any reductions in the rate of pay, and any changes in the day, hour or place of payment or benefits.
- **Furnish each employee with a pay statement showing:**
  1. Amount of wages due;
  2. Pay period covered by the payment;
  3. Amounts of deductions (separately specified) which have been made from the wages;
  4. Total number of hours worked in pay period (for employees who are paid at an hourly rate).

## PAYMENT OF WAGES

- Wages must be paid at least once each month.
- Employees must be paid all wages within seven (7) days from the close of each pay period [with some exceptions, see §1102(b)].
- If the payday falls on a non-work day, payment shall be made on the preceding work day.
- If an employee is not present on the regular payday, payment shall be made on the next regular workday that the employee is present or by mail (only if requested by the employee).
- Wages may be paid to a bank account designated by an employee (upon the employee's written request).
- Wages may be paid in cash or by check (provided that suitable arrangements are made by the employer for cashing at a bank or other business establishment convenient to the workplace).
- Whenever an employee quits, resigns, is discharged, suspended or laid off, the wages earned shall be paid on the next regularly scheduled payday(s) either through the usual pay channels or by mail (if requested by the employee) as if employment had not been suspended or terminated.

## UNLAWFUL DEDUCTIONS

### Employers are not permitted to deduct or withhold wages for:

1. Cash or inventory shortages;
2. Cash advances or charges for goods and services (unless there is a signed agreement specifying the amount owed and the repayment schedule);
3. Damaged Property
4. Failure to return employer's property.

## MINIMUM WAGE

### Regular Rate:

effective: 06-01-15 - \$8.25/hour  
effective: 01-01-19 - \$8.75/hour  
effective: 10-01-19 - \$9.25/hour

### Youth Rate: (Ages 14-17) and Training Rate: (adults, 1st 90 days on the job)

effective: 01-01-19 - \$8.25/hour  
effective: 10-01-19 - \$8.75/hour

## MINIMUM WAGE (continued)

### EMPLOYEES WHO RECEIVE TIPS

The minimum cash wage payable to employees who receive tips is \$2.23 per hour, effective 10/1/96.

The employer must be able to prove that the employee received the balance of the full minimum rate in tips.

**NOTE:** Delaware's minimum cash wage for tipped employees is greater than the cash wage required by federal law. Employers must pay Delaware's higher rate.

Tips may not be taken or retained by an employer except as required by law. Tip-pooling is permitted (under certain conditions) in an amount not to exceed 15% of the actual tips received by the employee.

### MINIMUM WAGE EXEMPTIONS:

- Employees in agriculture.
- Employees in domestic service in or about private homes.
- Employees of the United States Government.
- Outside commission paid salespeople.
- Bona fide executives, administrators, and professionals.
- Employees engaged in fishing and fish processing at sea.
- Volunteer workers (for educational, religious or non-profit organizations).
- Junior camp counselors employed by non-profit summer camp programs.

### RECORD KEEPING REQUIREMENTS:

*Employers must keep records (including rate of pay, hours worked, and amount paid for each employee for three (3) years.*

## BREAKS

**All employees must be offered a meal break of at least 30 consecutive minutes if the employee is scheduled to work 7.5 or more hours per day.**

Must be after the first 2 hours of work and before the last 2 hours of work.

### This rule does not apply when:

- The employee is a professional employee certified by the State Board of Education and employed by a local school board to work directly with children.
- There is a collective bargaining agreement or other employer-employee written agreement which provides otherwise.

### Rules have been issued granting exemptions when:

- Compliance would adversely affect public safety.
- Only one (1) employee may perform the duties of a position.
- An employer has fewer than five (5) employees on a shift at one location (the exception would only apply to that shift).
- The continuous nature of an employer's operations, such as chemical production or research experiments, requires employees to respond to urgent or unusual conditions at all times and the employees are compensated for their meal breaks.

**Where exemptions are allowed, employees must be allowed to eat meals at their work stations or other authorized locations and use restroom facilities as reasonably necessary.**

## DISCRIMINATION

Employers are prohibited by state law from discriminating against employees because of their RACE; COLOR; NATIONAL ORIGIN; SEX (INCLUDING PREGNANCY); RELIGION; DISABILITY; AGE (40+); GENETIC INFORMATION; SEXUAL ORIENTATION; GENDER IDENTITY; MARITAL STATUS; MEMBERSHIP IN VOLUNTEER EMERGENCY RESPONDER ORGANIZATION (VOLUNTEER FIREFIGHTERS, AMBULANCE PERSONNEL, LADIES AUXILIARY); VICTIM OF DOMESTIC VIOLENCE, SEXUAL ASSAULT, OR STALKING; FAMILY CARE RESPONSIBILITIES; REPRODUCTIVE HEALTH DECISIONS; and RETALIATION FOR INITIATING A COMPLAINT OF EMPLOYMENT DISCRIMINATION, OR OPPOSING OR PARTICIPATING IN THE INVESTIGATION OF A DISCRIMINATORY EMPLOYMENT PRACTICE. Employers of four (4) or more employees, labor organizations, employment agencies and joint labor management committees for apprenticeship or training are covered by this law.

**SEXUAL HARASSMENT:** Sexual harassment of employees, applicants, apprentices, staffing agency workers, unpaid interns, and independent contractors is unlawful. Sexual harassment can be unwelcome sexual advances, requests for sexual favor, or other verbal or physical conduct of a sexual nature when (1) the employee is expected to submit to such conduct; or (2) the employee's submission to or rejection of such conduct is used as the basis for employment decisions; or (3) such conduct has the effect of unreasonably interfering with the employee's work performance or creating an intimidating, hostile, or offensive working environment. If the harassment is by a supervisor, the employer may be responsible even if the employee has not complained. If the harassment is by a fellow worker or non-employee, employers are responsible if the employee complained to the employer and the employer has taken no action to stop or correct the sexual harassment. Effective January 1, 2019, employers must distribute the Department of Labor Sexual Harassment Informational worksheet to all employees. Employers with 50 or more employees must provide interactive sexual harassment training to all new employees, and every two years after.

**DISABILITY:** Employers are prohibited by state law from discriminating against any employee because of disability. State law requires the employment and advancement of qualified individuals with a disability who, with or without reasonable accommodation, can perform the essential functions of a job.

**PREGNANCY:** Employers must provide reasonable accommodations to employees with respect to pregnancy, childbirth, lactation and related conditions. Employers may not deny job applicants a position based on the need for a pregnancy-related workplace accommodation, make unnecessary changes to a pregnant employee's job functions or require a pregnant employee to take paid or unpaid leave when a reasonable accommodation would permit the employee to continue working.

**ANY PERSON:** who believes he or she has been discriminated against should contact the Delaware Department of Labor, Office of Anti-Discrimination at (302) 761-8200.

**A Charge of Discrimination must be filed within 300 days of the alleged unlawful employment practice.**

## CHILD LABOR

### General Provisions:

- The minimum age for employment is 14.
- Work Permits are required for all employed minors under the age of 18.
- Employers are required to keep Work Permits on file for each employed minor.
- A new Work Permit is required when a minor changes employers.

It is unlawful to retaliate against an employee because (s)he has made a complaint or given information to the Dept of Labor about possible labor law violations.

EMPLOYERS ARE REQUIRED BY LAW TO DISPLAY THIS OFFICIAL POSTER IN A PLACE ACCESSIBLE TO EMPLOYEES AND WHERE THEY REGULARLY PASS.

Violations of Delaware Labor Laws could result in fines of up to \$10,000 per violation.

## CHILD LABOR (continued)

### Provisions for Individuals 14 and 15 Years of Age:

#### MINORS 14-15 YEARS OF AGE SHALL NOT WORK:

- Before 7:00 a.m. or after 7:00 p.m. - except from June 1st through Labor Day when the evening hour shall be extended to 9:00 p.m.
- More than four (4) hours per day on school days
- More than eight (8) hours per day on non-school days
- More than eighteen (18) hours in any week when school is in session for five (5) days
- More than six (6) days in any week
- More than forty (40) hours per week; and
- More than five (5) hours continuously without a non-work period of at least thirty (30) consecutive minutes.

### Specific Provisions for Individuals 16 and 17 Years of Age:

- Not more than twelve (12) hours in a combination of school and work hours per day
- Must have at least eight (8) consecutive hours of non-work, non-school time in each twenty-four (24) hour period
- May not work more than five (5) hours continuously without a non-work period of at least thirty (30) consecutive minutes.

For a list of Prohibited Occupations, contact:

**The Delaware Department of Labor, Division of Industrial Affairs, Office of Labor Law Enforcement at any of the addresses listed.**

This poster provides only general information regarding the provisions of Delaware's Child Labor Laws. The requirements of state law do not affect an employer's obligation to comply with any provisions of federal law.

## WORKERS COMPENSATION

### IMPORTANT THINGS TO DO IN CASE OF INJURY

#### THE EMPLOYER SHOULD:

Carry Workers' Compensation insurance coverage. Provide all necessary medical, surgical, and hospital treatment from the accident date. Every employer shall keep a record of all injuries received by employees and make a report within ten (10) days thereof in writing to the Office of Workers' Compensation. Ascertain the average weekly wages of the employee and provide compensation in accordance with the provisions of the law, for disability beyond the third day after the accident. All agreements as to compensation must be submitted to the Office of Workers' Compensation for approval.

#### THE EMPLOYEE SHOULD:

Immediately notify the employer in writing of accidental injury or occupational disease and request medical services. Failure to give notice or to accept medical services may deprive the employee of the right to compensation. Give promptly to the employer, directly or through a supervisor, notice of any claim for compensation for the period of disability beyond the third day after the accident. In case of fatal injuries, notice must be given by one or more dependents of the deceased or by a person on their behalf. In case of failure to reach an agreement with the employer in regard to compensation under the law, file an application with the Industrial Accident Board for a hearing on the matters at issue within two (2) years of the date of accidental injury or one (1) year of knowledge of a diagnosis of an occupational disease or an ionizing radiation injury. All forms can be obtained from the Office of Workers' Compensation.