

**EMPLOYER'S NOTICE OF  
 90 CONSECUTIVE DAYS OF TIME LOSS FOR INJURIES  
 OCCURRING ON OR AFTER NOVEMBER 7, 2005**

AWCB Case No.:				Date of Injury:			
Employee's Name (Last, First, Middle Initial)				Insurer/Adjusting Company			
Address:				Address:			
City	State	Zip Code	Telephone	City	State	Zip Code	Telephone

In accordance with 8 AAC 45.507(b)<sup>1</sup>, this serves as the employer's notification that the above employee has been totally unable<sup>2</sup> to return to the employee's employment at the time of injury<sup>3</sup> for 90 consecutive days as a result of the injury.

The 90 consecutive days began on \_\_/\_\_/\_\_.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Submit to:

Reemployment Benefits Section  
 3301 Eagle Street, Suite 301  
 Anchorage, Alaska 99503-4149

<sup>1</sup> 8 AAC 45.507(b) reads in part: "If the employee has been totally unable to return to the employee's employment at the time of injury for 90 consecutive days, as a result of the injury, the employer shall notify the administrator, in writing, on the 91st day."

<sup>2</sup> 8 AAC 45.900(i)(2) reads: "'totally unable' means the employee has not been released by the attending physician to return to the employee's employment at the time of injury on either a modified or unmodified basis"

<sup>3</sup> 8 AAC 45.900(i)(1) reads: "'employment at the time of injury' means the employee's essential job duties and tasks, including the physical requirements of the duties and tasks, that the employee performed at the time of injury"