Sample of acceptable WC/DB documentation – **ACORD FORMS are NOT ACCEPTABLE documentation for workers' compensation coverage**

Sample CE-200	Sample C-105.2	Sample SI-12
Sample U-26.3	Sample GSI-105.2	Sample DB-120.1
		OVER→

For more information regarding documentation of WC/DB compliance, please visit the Workers' Compensation Board at http://www.wcb.ny.gov/ or call (518) 486-6307

Sample of acceptable WC/DB documentation – **ACORD FORMS are NOT ACCEPTABLE documentation for workers' compensation coverage**

Sample DB-155

STATE OF NEW YORK
WORKERS' COMPENSATION BOARD
SELF-INSURANCE OFFICE
20 PARK STREET - ROOM 206
ALBANY, NY 12207

(518) 402-0247
FAX (518) 402-6199

COMPLIANCE WITH DISABILITY BENEFITS LAW

EMPLOYER	FEDERAL EMPLOYER IDENTIFICATION NUMBER
	LOCATION OF OPERATION
ADDRESS (HOME OR MAIN OFFICE)	OPERATIONS TO BEGIN ON OR ABOUT:

There are on file with the Workers' Compensation Board, documents indicating that the above-named employer has complied with the Disability Benefits Law with respect to all of his or her employees in the following manner:

☐ By approved self-insurance pursuant to Section 211, subdivision 3 of the Disability Benefits Law.

☐ By a combination of approved self-insurance pursuant to Section 211, subdivision 3 of the Disability Benefits Law and insurance with authorized insurance carrier(s).

Date:

By: ______________________
Gina Wagoner
WC Examiner

SAMPLE

A CE-200 – Certificate of Attestation of Exemption from NYS Workers' Compensation and/or Disability Benefits Coverage can be applied for online at http://www.wcb.ny.gov/content/ebiz/wc_db_exemptions/requestExemptionOverview.jsp

For more details regarding Workers Compensation and Disability compliance documentation, please see the document **Prove It to Move It**
http://www.wcb.ny.gov/content/main/Employers/ProveItToMoveIt.pdf

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