

# Labor Law Compliance Center

**UTAH**

Labor Law Compliance Center  
[posters@laborlawcc.com](mailto:posters@laborlawcc.com)  
[www.laborlawcc.com](http://www.laborlawcc.com)  
(800) 801-0597

# Utah Labor Law Posters

English

Posting Name & ID	Posting Requirements	Published Date
Job Safety & Health UT01	Must be at least 8.5 x 14 inches with 10 point type Designed with the dimensions of 11 x 17 inches	01/19
Unemployment Insurance UT02	All employers	04/22
Workers' Compensation UT03	All employers	10/19
Pregnancy Accommodation UT04	All employers	07/24



# EMERGENCY

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**AMBULANCE:** \_\_\_\_\_

**FIRE - RESCUE:** \_\_\_\_\_

**HOSPITAL:** \_\_\_\_\_

**PHYSICIAN:** \_\_\_\_\_

**ALTERNATE:** \_\_\_\_\_

**POLICE:** \_\_\_\_\_

# Workplace Safety and Health in the State of Utah

## THIS NOTICE MUST BE POSTED IN THE WORKPLACE

The Utah Occupational Safety and Health Act of 1973 requires Utah employers to provide a safe and healthful workplace, free from recognized hazards that are likely to cause death or serious physical harm to employees. The Utah Occupational Safety and Health (UOSH) Division of the Utah Labor Commission, has the responsibility to administer the Utah Occupational Safety and Health Act.

## NOTICE TO EMPLOYEES

You have the **obligation to comply** with all workplace safety and health rules established by your employer.

You have the right to **notify your employer or UOSH about workplace hazards**. You may ask to keep your name confidential.

You have the right to **request and to participate in a UOSH inspection** if you believe that there are unsafe or unhealthful conditions in your workplace.

You have the right to **file a complaint with UOSH** if you feel that your employer has retaliated against you for making safety or health complaints, or for exercising your rights under the Utah Occupational Safety and Health Act. Such whistleblower complaints must be filed within 30 days of the retaliation.

You have a right to **see all UOSH citations issued to your employer**. Your employer must post the citations at or near the place of the alleged violation. You may request an informal review of the abatement period granted to the employer.

You have the right to **know your employer is obligated to correct workplace hazards** by the date indicated on the citation and must certify that these hazards have been reduced or eliminated.

You have the right to **copies of your medical records** or records of your exposure to toxic and harmful substances or conditions.

## NOTICE TO EMPLOYERS

### UTAH EMPLOYERS ARE REQUIRED TO PROVIDE EMPLOYEES A SAFE AND HEALTHFUL WORKPLACE

#### REPORTING REQUIREMENTS

Employers are required to notify UOSH at (801) 530-6901 **within 8 hours of occurrence of all fatalities, disabling, significant, and serious injuries or illnesses to workers**. You can call in your report 24 hours a day, 7 days a week. Tools, equipment, materials, or other evidence that might pertain to the cause of such accidents shall not be removed or destroyed until authorized by UOSH. You are also required to investigate all incidents of worker injuries and occupational illnesses.

#### REPORTING GUIDANCE

“Disabling and serious” includes, but is not limited to any injury or illness resulting in immediate admittance to the hospital, permanent or temporary impairment where part of the body is made functionally useless or is substantially reduced in efficiency and which would require treatment by a medical doctor, such as amputation, fracture, deep cuts, severe burns, electric shock, sight impairment, loss of consciousness, and concussions; illnesses that could shorten life or significantly reduce physical or mental efficiency inhibiting the normal function of a part of the body, such as cancer, silicosis, asbestosis, hearing impairment and visual impairment.

#### INSPECTIONS, CITATIONS, ASSESSED PENALTIES

UOSH may enter at reasonable times without delay any work place under its jurisdiction to conduct an inspection, investigation, or interview a reasonable number of employees to determine compliance with the Utah Act, rules and standards. If an employer is in violation of any of those rules or standards UOSH will promptly issue a Citation to notify them of the violation. A serious violation may be assessed a proposed penalty of up to \$7,000. Willful or Repeated violations may be assessed a proposed penalty up to \$70,000. Failure to correct or abate a violation may result in additional penalties not to exceed \$7,000 for each day each violation is not corrected.

#### CONTESTS, APPEALS, INFORMAL REVIEW

The Utah Labor Commission will provide an adjudicative formal hearing with its Division of Adjudication, when an employer files a written notice of contest within 30 days of receipt of the citation. Upon expiration of that 30 day period, the citation and proposed penalties are final and not subject to review by any court or agency. Employers may also request an informal review of any citation, proposed penalty or abatement period. Informal reviews do not extend the 30 days in which an employer must file a written notice of contest for a formal hearing.

To report a workplace fatality or injury, file a workplace safety complaint, or for assistance please call (801) 530-6901 or (800) 530-5090. To file a safety complaint online or obtain more information about UOSH please visit our website at: [www.laborcommission.utah.gov](http://www.laborcommission.utah.gov). To obtain more information about safety and health in the workplace, please contact the Consultation Program at (801) 530-6855. Employers and employees may file a complaint about state program administration with the Occupational Safety and Health Administration (OSHA) at 1244 Speer Blvd., Suite 551 Denver, CO 80204.

**State of Utah Labor Commission**  
**Utah Occupational Safety and Health**  
160 East 300 South, Third Floor  
PO Box 146650  
Salt Lake City, Utah 84114-6650  
(801) 530-6901  
Fax (801) 530-7606  
Toll-Free 1-800-530-5090  
[www.laborcommission.utah.gov](http://www.laborcommission.utah.gov)

**Reporting Injuries (801) 530-6901**  
**Compliance Program (801) 530-6901**  
**Consultation Program (801) 530-6855**



“Helping to ensure a safe and healthy workplace for every worker in the State of Utah”

UT01E



Rev. 01.15.19

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# UNEMPLOYMENT INSURANCE NOTICE TO WORKERS

**Your work is covered under the provisions of the Utah Employment Security Act for unemployment insurance purposes, unless specifically exempted by the Act.**

Unemployment insurance specifically provides payments to qualified workers who are unemployed through no fault of their own and are able, available, and seeking full-time work. It is not public assistance, Social Security, or a disability payment. Benefits are based upon your previous earnings—not on economic need. The funds to pay unemployment benefits are paid by your employer. No deductions are made from your wages.

### FILING FOR UNEMPLOYMENT INSURANCE BENEFITS

To receive unemployment benefits, you may file your claim online at [jobs.utah.gov](http://jobs.utah.gov), select “Temporary Assistance,” then “Unemployment Benefits,” and then choose “File New or Reopen Claims.” You may also call the Claims Assistance and Re-Employment Team at: Salt Lake/South Davis Counties – (801) 526-4400; Weber/North Davis Counties – (801) 612-0877; Utah County – (801) 375-4067; elsewhere in Utah and out-of-state – (888) 848-0688. No benefits will be paid for weeks prior to the week in which you file your claim. You should, therefore, file immediately after becoming unemployed or when your work hours are reduced to less than full time.

### FILING AFTER RECEIVING WORKER’S COMPENSATION BENEFITS

If you are separated from employment due to a work-related illness or injury for which you have received Worker’s Compensation, your rights to unemployment benefits may be preserved for up to THREE YEARS from the date of your injury. In order to use wages earned prior to such an injury or illness, you must file a claim for unemployment benefits within 90 DAYS of your doctor’s release to full time work.

### SEPARATION INFORMATION

At the time you are separated from your job, you should request information as to the reasons for your separation. You do not need to have a separation notice to file a claim. Both you and your employer will be requested to provide statements explaining the reason for your separation.

### WAGES DETERMINE BENEFIT AMOUNT

The amount of your unemployment benefits will be determined from your wages in covered employment. “Wages” are all payments for personal services performed such as salaries, commissions, bonuses, tips, and the cash value of goods and services received for services performed. Tips received but not reported to your employer generally cannot be used to determine your unemployment benefits.

### SELF-EMPLOYMENT

If you are classified as “self-employed” (independent contractor), you may want to discuss this with your employer and have your status reviewed by DWS. Work performed in “self employment” cannot be used for unemployment benefits. You are “self-employed” if your work is performed without direction and control and you are in your own established business. This generally means you are properly licensed in business, perform similar services for others, maintain proper accounting records and business reports, pay self-employment taxes, and provide for insurance.

### ONLINE SERVICES

Access our web site [jobs.utah.gov](http://jobs.utah.gov) to search for jobs, find out about available programs, and obtain economic information.

### NO FEE EMPLOYMENT SERVICES

DWS services are available on our web site at [jobs.utah.gov](http://jobs.utah.gov) or by going to any of our Employment Centers listed below. Employment services include job referrals, career counseling, workshops, employer recruitment, Veterans’ services, labor market information, and job training/internships. Supportive services include food stamps, financial assistance, medical assistance, childcare assistance, unemployment assistance, emergency assistance, referrals to community, and other resources. Our Job Connection Rooms provide Internet access along with Information Specialists to assist you in accessing services and resources. Fax and copy machines are also available.

### STATE EMPLOYMENT CENTERS

Beaver .....875 North Main.....(435) 438-3581	Ogden .....480 27th Street.....(801) 626-0300
Blanding .....544 North 100 East.....(435) 678-1420	Panguitch.....665 North Main.....(435) 676-1406
Brigham City.....138 West 990 South.....(435) 695-2625	Park City .....1910 Prospector Ave. Ste. 100.....(877) 313-4717
Cedar City .....176 East 200 North.....(435) 865-6531	Price .....475 West Price River Dr. #300.....(435) 636-2300
Clearfield.....1290 East 1450 South.....(801) 776-7800	Provo .....1550 North 200 West.....(801) 342-2600
Delta .....44 South 350 East.....(435) 864-3525	Richfield.....115 East 100 South.....(435) 893-0005
Emery County .....550 West Hwy 29.....(435) 381-6120	Roosevelt.....140 West 425 South 330-13.....(435) 722-6499
Heber City .....69 North 600 West, Ste. C.....(435) 654-6500	Salt Lake Metro .....720 South 200 East.....(801) 526-0950
Junction .....550 North Main.....(435) 893-0005	Salt Lake So County .....5735 South Redwood Rd.....(801) 269-4700
Kanab .....468 East 300 South.....(435) 644-8911	South Davis.....763 West 700 South W. Cross.....(801) 298-6600
Lehi .....557 W. State Street.....(801) 753-4500	Spanish Fork .....1185 North Canyon Creek Parkway ....(801) 794-6600
Loa .....18 South Main.....(435) 893-0005	St. George .....162 North 400 East Bldg. B.....(435) 986-3500
Logan .....180 North 100 West.....(435) 792-0599	Tooele .....305 North Main, Ste. 100.....(435) 833-7300
Manti .....55 South Main #3.....(435) 835-0771	Vernal .....1050 West Market Dr.....(435) 781-4100
Moab .....457 Kane Creek Blvd.....(435) 719-2600	Eligibility Services Center...(Salt Lake Area).....(801) 526-0950
Nephi .....625 North Main.....(435) 623-0361	.....(Outside Salt Lake).....(866) 435-7414

### INFORMATION FOR EMPLOYERS

Utah law requires that each employee’s wages must be reported each quarter with the regular quarterly contribution (tax) report. All wage and separation information and correspondence must include your unemployment insurance registration number. You must also maintain and make available records of wages and separation information on all workers for at least four (4) calendar years.

When an unemployment claim is filed by a former employee, the Department of Workforce Services will send Form 606 “Notice of Claim Filed.” This notice will provide an opportunity for you to report details of the reason for the claimant’s separation and, in some cases, to request relief of potential charges. You will also receive a Form 65 “Employer Notice of Potential Liability” showing any wages from your firm being used on the claim and your firm’s potential benefit costs.

If you have classified or contemplate classifying any of your workers as “self-employed” (independent contractors), notify the Department in order that a proper determination of status can be made. By doing this, you may avoid unpaid contributions (tax) liabilities, interest, and penalties. Additional information is available in the “Employer Handbook” which you can access on the Internet at:

[jobs.utah.gov/ui/employer/public/handbook/employerhandbook.aspx](http://jobs.utah.gov/ui/employer/public/handbook/employerhandbook.aspx)

*In accordance with Section 35A-4-406(1)(b) of the Utah Employment Security Act, this notice must be permanently posted by each employer at suitable points (on bulletin boards, near time clocks, etc.) in each work place and establishment.*



# WORKERS' COMPENSATION NOTICE

Employer: \_\_\_\_\_

has complied with the provisions of the Workers' Compensation Act (§34A-2-101, Utah Code Annotated), the Utah Occupational Disease Act (§34A-3-101, Utah Code Annotated), and the rules of the Labor Commission by insuring the liability to pay the compensation and other benefits provided by said Acts through:

Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Address for the above insurance company: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Check here if the employer has been authorized by the Division of Industrial Accidents to self-insure and directly pay workers' compensation benefits.

## WORKERS' COMPENSATION

Workers' Compensation is insurance which pays medical expenses and helps offset lost wages for employees with work-related injuries or illnesses. If you have an on-the-job injury or occupational disease, it may pay for: hospital and medical bills, time lost from work, permanent loss of body function, prosthetic devices, and burial and dependent benefits in case of death.

### HOW TO REPORT AN ACCIDENT

1. Report the injury, no matter how slight, immediately to your supervisor. You may lose your rights if your injury is not reported within 180 days of the injury or work-related illness.
2. Ask your employer where you should go for treatment. If your employer has a first-aid room or company designated doctor, go there promptly for treatment. If not, go to a doctor of your choice.
3. Tell the doctor **HOW, WHEN and WHERE** the accident happened. The doctor will fill out a physician's initial report form. A copy of the report is given to you and copies of the report are sent to the insurance company and the Labor Commission within seven (7) days of your doctor visit.
4. Your employer shall fill out the employer's first report of injury form. A copy of this report is sent to the insurance company within seven (7) days of the accident. The insurance company will report the injury to the Labor Commission.

### HOW TO START COMPENSATION

1. Ask your employer which insurance company pays workers' compensation benefits for the company.
2. Ask your employer to report the accident to the insurance company and give you the claim number.
3. Call the insurance company and ask them to start your workers' compensation benefits. The insurance company will require the employer's report, the physician's report, and may ask you to fill out a request for compensation. Cooperate with the adjuster's investigation of the injury.
4. Ask your doctor to send medical reports to the insurance company, including the work status statement.

### REHABILITATION

If you cannot return to work, you may be eligible for a rehabilitation program. Contact the insurance company listed above or the Utah State Office of Rehabilitation.

**FRAUD STATEMENT:** "Any person who knowingly presents false or fraudulent underwriting information, files or causes to be filed a false or fraudulent claim for disability compensation or medical benefits, or submits a false or fraudulent report or billing for health care fees or other professional services is guilty of a crime and may be subject to fines and confinement in state prison."



160 East 300 South 3<sup>rd</sup> Floor P.O. Box 146610 Salt Lake City, Utah 84114-6610

Office: (801)-530-6800 Fax: (801)-530-6804 Toll Free: (800)-530-5090 [www.laborcommission.utah.gov](http://www.laborcommission.utah.gov)

If you want copy of an *Employee's Guide to Workers' Compensation* booklet or have questions, contact the Labor Commission or go to the webpage at [www.laborcommission.utah.gov](http://www.laborcommission.utah.gov).

Note: This notice must be posted and kept continuously in public and conspicuous places in the office, shop or place of business of the employer as per §34A-2-204 and §34A-2-104.5, Utah Code Annotated.



# Pregnancy and Related Conditions under the Utah Antidiscrimination Act

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The Utah Antidiscrimination Act **requires** employers to provide **reasonable accommodations** for employees related to **pregnancy, childbirth, breastfeeding, or related conditions**, upon an employee's request.

Further, the Act **prohibits** an employer from **terminating an employee, or denying an employment opportunity**, instead of providing reasonable accommodation.

However, an employer is not required to provide reasonable accommodation if it can demonstrate that doing so would create an **undue hardship on its operations**.

UTAH CODE § 34A-5-106(1)(g) (2016)

To learn more about your rights, please visit:

<https://laborcommission.utah.gov/divisions/utah-antidiscrimination-and-labor-uald/employment-discrimination/>

or email the Utah Antidiscrimination & Labor Division  
at [discrimination@utah.gov](mailto:discrimination@utah.gov)



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