

State of Nevada
DEPARTMENT OF BUSINESS & INDUSTRY
DIVISION OF INDUSTRIAL RELATIONS
Workers' Compensation Section

ASSIGNMENT TO DIVISION FOR WORKERS' COMPENSATION BENEFITS

KNOW ALL MEN BY THESE PRESENTS:

WHEREAS, I, the undersigned, sustained injuries by reason of an industrial accident; or incurred an occupational disease, arising out of and within the scope of my employment on the _____ day of _____, 20_____, while in the employ of _____; and

WHEREAS, said employer on said day had failed to provide mandatory industrial insurance coverage and was not certified as a self-insured employer or a member of an association of public or private employers by the **Nevada Division of Insurance**, as provided for under Chapters 616A to 616D, inclusive or chapter 617 of Nevada Revised Statutes (NRS); and

WHEREAS, I have elected to receive compensation from the **Uninsured Employer's Claim Account**, as provided for by Chapters 616A to 616D, inclusive, and chapter 617 of Nevada Revised Statutes;

NOW, THEREFORE, in consideration of the payment of compensation to me, to which I may be entitled, I do hereby irrevocably assign and transfer to the **Division of Industrial Relations** for its proper use and benefit, a right to be subrogated to my rights pursuant to NRS 616C.215, against the above-named uninsured employer, or other responsible third-party, arising out of; relating to; or connected with the injuries sustained; or occupational disease incurred, as hereinabove set forth.

AND I DO hereby irrevocably constitute and appoint the said **Division of Industrial Relations**, its successors and assigns, and in my name or otherwise, and for the sole use and benefit of the said **Division of Industrial Relations**, but at its own costs and expense, to demand; sue for; collect; receive or give acquittances for said claim or cause of action or any part thereof, against the said uninsured employer.

IN WITNESS WHEREOF, I have executed the within and foregoing instrument on this _____ day of _____, 20_____.

Injured Employee

Address

Signed in the Presence of:

Witness

Witness