

State of Nevada
Department of Business and Industry
Division of Industrial Relations
WORKERS' COMPENSATION SECTION

FY23 STATEMENT OF INACTIVITY

Submit in lieu of the *FY23 WCS Workers' Compensation Claims Activity Report*
(JULY 1, 2022 THROUGH JUNE 30, 2023)

Workers' Compensation Insurers (Active and Inactive)

- Private Carriers Licensed for Workers' Compensation in Nevada (writing and non-writing)
- Self-Insured Employer (current and inactive Certificates of Authority)
- Associations of Self-Insured Employers (current and inactive Certificates of Authority)

DUE DATE: JANUARY 12, 2024

Email: wcsra@dir.nv.gov
(Word or .pdf file)

*I certify that there was no claims activity during Fiscal Year 2023
for the workers' compensation insurer named below.*

Insurer Name:
Nevada Certificate of Authority Number:
NCCI Carrier Code (Private Carriers):
NCCI Group Code (Private Carriers):
Federal Employer Identification Number (FEIN):

Completed by:		
Title:		
INSURER <input type="checkbox"/>	TPA <input type="checkbox"/>	OTHER <input type="checkbox"/>
Company:		
Address:		
City:	State:	Zip:
Telephone:	Fax:	
Email Address:		

Signature

Date