

# FORMS

## Government Insurance

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For property, motor vehicle and workers' compensation claims your agency may be able to process the claim via our online system (eClaims). Please contact your Client Service Manager should you require access.

We work to manage claims efficiently and effectively, and the completion of the appropriate claim form will assist in this process. Please complete the form as required and lodge with us shortly after an incident.

[Expand/Close All](#)

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### **Worker's Compensation Claims**



#### **Employer Forms**

- [Workers' Compensation Claim Form](#)

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- [Employer's Report Form](#)
  - [Claim Advice Slip](#) - Optional
  - [Compensation Reimbursement Invoice](#)

## Employee Forms

- [Consent Authority](#)
- [Declaration of Employment](#)
- [Electronic Funds Transfer \(EFT\) Form](#) - Application for Claimants
- [Recurrence of Injury Form](#)
- [Reimbursement of Travelling Expenses](#)
- [Travel Incident](#)

## WorkCover WA Forms

- [Claim Form for Dependants of Deceased Workers](#) (WorkCover WA Regulated Form)
- [Declaration of worker not residing in Western Australia](#) (WorkCover WA Form)
- [Worker not residing in Western Australia](#) (WorkCover WA Information Sheet)

## Witness Forms

- [Witness Statement Form](#)

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## Injury Management



- [Injury Management System Template](#)
- [Return to Work Template](#)

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## Property Claims



- [Property Claim Form](#) - Employer to complete
  - [Fire Protection Impairment Form](#)
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## Employee Property In Transit



- [Property in Transit Claim Form](#) - Employer to complete, employer to approve
  - [Application for Property in Transit](#) - Employee to complete
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## Motor Claims



- [Motor Vehicle Claim Form](#) - Driver to complete, employer to authorise
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## Liability Claims



- [Clinical Incident Notification Form](#) - Optional
  - [General Liability Claim Form](#) - Authorising person to complete
  - [Professional Liability Claim Form](#) - Authorising person to complete
  - [Damage to Underground Services Claim Form](#)
  - [Consent Authority](#) - Optional
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## Miscellaneous



- [Application for Events Cover Form](#) - Event organiser to complete
- [Electronic Funds Transfer \(EFT\) Form](#) - Application for Claimants
- [Electronic Funds Transfer \(EFT\) Form for Service Providers](#)
- [Fire Protection Impairment Form](#)
- [Industrial Disease Claim Form](#)
- [Personal Accident Claim Form](#) - Injured party to complete
- [Statutory Declaration Form](#)

- [Statutory Declaration Form](#)
- [Travel Claim Form](#)

[Contact us](#) if the above forms do not meet requirements.

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