National Insurance Regulations

SAINT LUCIA

No. 22 of 2003

ARRANGEMENT OF REGULATIONS

PART I
PRELIMINARY

Regulation
1. Citation
2. Interpretation

PART II
REGISTRATION OF EMPLOYERS AND EMPLOYEES
3. Application for registration
4. Issue and security of registration cards

PART III
COLLECTION AND PAYMENT OF CONTRIBUTION
5. Manner of payment of contribution
6. Documents to accompany payment
7. Receipts
8. Monthly remittance statement
9. Monthly schedule
10. Duplicates to be kept
11. Payment of contributions
12. Self employed persons
12A. Voluntary contributors
13. Employees of the Crown
14. Time of deduction
15. Authority to deduct and match employees’ contributions
16. Error in deduction
17. Returns by employer
18. Inspection of employees’ records
19. Death of employer
20. Exemption from liability for contributions
21. Refund of contributions
22. Treatment of late payment for purpose of benefit
National Insurance Regulations

23. Treatment of late contributions for the purpose of sickness or maternity benefit
24. Treatment of late contributions for the purpose of retirement or invalidity benefits
25. Treatment of late contributions for the purpose of funeral benefit
26. Employment by two or more employers
27. Where an insured person works under control of someone not his immediate employer
28. Meaning of expression “husband”, “wife”, “cohabitation”

PART IV

A. Sickness Benefit

29. Entitlement
30. Day from which benefit is to commence
31. Manner of claiming and support of claim
32. Conditions which must be satisfied
33. Period of payment
34. Rate of sickness benefit

B. Invalidity Benefit

35. Conditions for entitlement
36. Rate of invalidity pension
37. Invalidity grant
38. Certificate of permanent incapacity for work

C. Maternity Benefit

39. Entitlement
40. Conditions to be satisfied
41. Duration
42. Rate of maternity benefits
43. Maternity grant
44. Support of claim
45. Certificate of confinement

D. Survivor’s Benefit

46. Entitlement to survivor’s pension: rate of survivor’s pension and amount of survivor’s grant
47. Entitlement to survivor’s pension
National Insurance Regulations

48. Widower or widow with dependent children
49. Entitlement of dependent children
50. Rate of survivor’s pension
51. Distribution of survivor’s grant
52. Persons to be treated as survivors

E. Retirement Pension
53. Entitlement to retirement pension
54. Rate of pension
55. Entitlement to an early pension
56. Entitlement to retirement grant
57. Amount of retirement grant
58. Claims

F. Funeral Benefit
59. Entitlement to grant
60. Person who may receive grant
61. Amount of grant

G. Employment Injury Benefit
62. Entitlement to benefit
63. Notice of accident by insured person
64. Employer to complete form for accident or disease
65. Day from which benefit is to commence
66. Manner of claiming and support of claim
67. Duration and rate of payment
68. Medical expenses payable for employment injury
69. Disqualification
70. Disablement pension
71. Entitlement to disablement benefit
72. Rate of disablement grant
73. Increase of disablement benefit during approved hospital treatment
74. Death benefit entitlement of dependants
75. Prior entitlement of widow, widower and child
76. Entitlement of parent to death benefit
77. Entitlement of other relatives to death benefit
78. Claim for death benefit
79. Period for which pension is payable
National Insurance Regulations

80. Rate of death benefits
81. Prescribed disease
82. Re-occurrence of prescribed disease

H. Miscellaneous Provisions Relating to Employment Injury

83. Obligations of claimants and beneficiaries in respect of employment injury benefit or disablement benefit
84. Credited contribution for weeks of employment injury benefit

I. Hospitalisation and Medical Treatment

85. Hospitalisation and medical benefit

PART V
PERSONS EMPLOYED ON SHIPS AND AIRCRAFT

86. Application to persons employed on ships and aircraft

PART VI
MISCELLANEOUS

87. Entitlement to more than one benefit
88. Benefits payable as grant or periodical payments
89. Refund of benefit improperly paid
90. Credited contribution
91. Persons abroad
92. Payment of benefit for which person is eligible under regulation 91
93. Persons under-going imprisonment or detention in legal custody

PART VII
MISCELLANEOUS PROVISIONS RELATING TO CLAIMS AND PAYMENTS CLAIMS

94. Claims to be in writing
95. Information to be given
96. Date of claim
97. Defective and incomplete claim
98. Time for claiming benefits
99. Claim in advance

Payments

100. Time and manner of payment of benefits other than pensions
101. Time and manner of payment of pensions
National Insurance Regulations

102. Other arrangements for payment of pension
103. Other times and methods of payment of pension
104. Extinguishment of rights to sum payable by way of benefit which is not obtained within the prescribed time
105. Information to be given when obtaining payment of benefit
106. Forfeiture or suspension of payment of benefit
107. Obligations of beneficiary to notify change of circumstances
108. Person unable to act
109. Payment of death benefit to person appointed by the Director

Medical Certificate

110. Evidence of incapacity to be given

PART VIII
EXEMPTED SCHEMES

111. Exempted Schemes

PART IX
APPEALS

112. Appeals

PART X
OFFENCES

113. Offences and penalties
114. Revocations
115. Validation of actions
116. Commencement

FIRST SCHEDULE
FORMS
TABLE I
TABLE II
TABLE III
TABLE IV
TABLE V
SECOND SCHEDULE
THIRD SCHEDULE
FOURTH SCHEDULE
National Insurance Regulations
The Minister responsible for National Insurance, in exercise of the power conferred under section 91 of the National Insurance Corporation Act 2000, makes these Regulations:

PART I
PRELIMINARY

Citation
1. These Regulations may be cited as the National Insurance Regulations 2003.

Interpretation
2. In these Regulations —
   “Act” means the National Insurance Corporation Act, 2000;
   “Board” means the National Insurance Board established under section 5 of the Act;
   “dependant” means a member of an insured person’s family —
   (a) who was wholly or mainly maintained by the insured person at the time of his or her death;
   (b) who would as a result of the incapacity for work due to a relevant accident been dependent on the earnings of the insured person at the time of his or her death;
   (c) who is a child or grandchild of an insured person and who is under sixteen years of age, or is not above eighteen years of age if in full time education and was living with or wholly or mainly maintained by the insured at the time of his or her death; and
   (d) who is a parent or grandparent of an insured person who was wholly or mainly maintained by the insured person at the time of his or her death;
   but does not include a person who has not received any contribution towards the ordinary necessaries of life from an insured person during the insured person’s life;
National Insurance Regulations

“Corporation” means the National Insurance Corporation established under section 4 of the Act;

“Director” means the Director of the National Insurance Corporation;

“employee” includes any person who is engaged in employment under a contract of service or where not under a contract of service is subject to such terms and conditions as to make it similar to employment under a contract of service;

“Fund” means the National Insurance Fund established under section 3 of the Act;

“invalid” means a person incapable of work as a result of a specific disease or bodily or mental disablement which is likely to be permanent;

“medical authority” means a medical board or a registered medical practitioner nominated by the Director from a panel of registered medical practitioners approved by the Board;

“Minister” means the Minister responsible for National Insurance;

“relevant accident” means the particular accident or disease in respect of which injury is sustained and for which a claim may be made for payments or employment injury benefit under these Regulations.

PART II
REGISTRATION OF EMPLOYERS AND EMPLOYEES

Application for registration

3. — (1) Every employer shall within seven days of hiring his or her first employee apply to the Director in the form set out as Form R1 in the First Schedule for registration as an employer under the Act.

(2) Every employer shall within seven days of employing any person, present to the Director in the form set out as Form R3 in the First Schedule, an application for registration as an insured person in respect of each employee of whom he or she is the employer.

(3) Employers and employees registered under the National Provident Fund Act, 1970, (No. 21 of 1970) and the National Insurance Act 1978 (No. 10 of 1978) shall be treated for all requirements under these Regulations as having registered under the Act as from their respective dates of registration under the respective Acts and shall continue to carry the same registration number allotted to each of them.
National Insurance Regulations

(4)  (a) Every employer who changes his or her business address shall within two weeks of such change notify the Director accordingly in the form set out as Form CF1 in the First Schedule.

(b) Every employer who ceases to be an employer shall within two weeks of such cessation notify the Director accordingly in the form set out as Form CF2 in the First Schedule.

(5) Where an employer has failed to register in accordance with sub-regulation (1) but has made contribution deductions from the wages of employees, such employer shall upon registration remit to the Fund the full amount of such contributions together with surcharge for such period and shall also give a written undertaking to the Board to meet the cost of any short term benefit claim which arises within three months of such registration.

(6)  (a) Every employer who carries on business under a business name registered in accordance with the Registration of Business Names Ordinance, Chapter 247 shall at the time of making an application under sub-regulation 3(1) furnish the Director with a copy of the statement of particulars and certificate of registration, of his or her business name.

(b) Every employer who carries on business as a body corporate shall at the time of making an application under sub-regulation 3(1) furnish the Director with a copy of the following —

(i) Certificate of Incorporation

(ii) Notice of Directors, and

(iii) Notice of registered office

Issue and security of registration card

4. — (1) Where upon receipt of an application for registration of an employee under this Part, the Director is satisfied that the person concerned is required to be registered as an insured person under the Act, he or she shall cause a national insurance card to be issued to the employee in such form as may be approved by the Director.

(2) Every employee to whom a National Insurance card is issued must present himself or herself at an office of the National Insurance Corporation and present a copy of his or her birth certificate or passport in order to receive the National Insurance card.
National Insurance Regulations

(3) The national insurance card shall bear unamended, the full name and registration number of the insured person.

(4) Where the entries on the national insurance card are amended in any way the card shall be invalid and shall be returned to the Director immediately.

(5) A person who is issued a registration card in accordance with the provisions of regulation 4 shall be responsible for the card’s safe custody.

(6) If a registration card —

(a) is lost;

(b) is destroyed;

(c) becomes defaced so as to be illegible; or

(d) because of change of name of the holder the card ceases to represent the holder’s identity,

the holder of that card shall apply to the Director to have the card replaced at a cost to be determined by the Director.

(7) Upon making application under sub-regulation (6) a person shall deliver to the Director the card to be replaced if it is still in existence and furnish the Director with the required information in relation to this application.

PART III
Collection and Payment of Contribution

Manner of payment of contribution

5. All payments of contributions to the Fund shall be made at any of the Corporation’s offices and shall be paid —

(a) in cash, to an officer of the Corporation authorised by the Director to receive such payments; or

(b) by money order, postal order or crossed cheque drawn on any bank in the State or sent by post to an office of the Corporation;

(c) by bank draft; or

(d) in such other manner as the Director may from time to time authorise in any particular case or class of cases.

Documents to accompany payment

6. All payment of contributions to the Fund shall be accompanied by the appropriate forms duly completed, or by such other form as the Director may in any particular case or class of cases permit.
Receipts

7. — (1) The Director shall cause a receipt for the amount remitted to be sent to any employer who shall affix it in the appropriate place upon his or her duplicate copy of the remittance statement.

(2) No receipt other than the authorised receipt issued at the Board’s office shall be given for any payment on account of contributions or otherwise to the Fund and any receipt so made and endorsed shall be accepted as sufficient for all purposes.

Monthly remittance statement

8. — (1) In each month, every employer shall complete the remittance statement appropriate to that month in the form set out as Form C2 in the First Schedule and shall forward it together with a remittance for such total amount appearing on the statement so as to reach the Director not later than seven days after the end of the month.

(2) An employer shall keep a record of monthly remittance forwarded to the Director in the form set out as Form C2 in the First Schedule.

Monthly schedule

9. — (1) The Director shall dispatch at the appropriate time to every employer who is registered under these Regulations a monthly schedule of contributions in the form set out as Form C3 in the First Schedule in respect of the relevant contribution period for the recording of payments of contributions payable to the Corporation’s office under the Act.

(2) On receipt of the monthly schedule, the employer shall enter thereon, the name and registration number of every person employed by him or her, and thereafter in respect of the relevant weekly contribution periods, shall enter against the name of an employee the total amount of contributions payable to the office of the Corporation on behalf of each employee.

(3) Notwithstanding sub-regulation 9 (1), where an employer has not received the Form C3 by the last day of the month he or she shall take all reasonable steps to obtain this form from the offices of the Corporation.

(4) The employer shall dispatch or cause to be dispatched the monthly schedule to the Corporation within seven days after the end of the month for which the contribution is due.

(5) Where the employer’s payroll records are computerised he or she shall also submit the monthly schedule in an electronic format approved by the Director.
Duplicates to be kept

10. The employer shall keep duplicate copies of monthly schedules and of electronic files and of monthly remittance statements on copy sheets provided together with the relevant receipts and shall make them available on request for inspection by an inspector appointed under section 14 of the Act.

Payment of contributions

11.— (1) For each contribution period for which an insured person is paid wages, the employer’s contribution and the employee’s contribution shall each be five percent or such other rate as may be specified in accordance with section 30 (a) of the Act, or the amount paid up to the maximum wage specified in accordance with section 30 (d) of the Act.

(2) For the purpose of determining the wages of an employed person under this Regulation, there shall be included all the gross earnings received by or on behalf of the insured person including:

(a) overtime payments;
(b) all allowances;
(c) commission or profits on sales;
(d) payment on account of night or shift work;
(e) service charge; and
(f) holiday pay or other amounts set aside out of the employee’s remuneration throughout the year or part of the year to be paid to him or her periodically.

(3) Notwithstanding sub-regulation (2)

(a) in the case of holiday pay and other amounts set aside out of the insured person’s wages, the pay set aside shall be included in the related wages for the appropriate period for which contributions would have been payable had the wages not been set aside;

(b) in the case of the payments described in sub-regulation (2) (a) to (e), the amount of payments so received shall, if they are not paid with the wages for the period in which they are due; be included in the wages for the period in which they are paid;

(c) christmas bonuses, annual production bonuses, severance payments and terminal gratuities shall not be included in the gross earnings of an insured person.

(4) With a view to ensure that liability for the payment of contributions is not avoided or reduced by an employer using any pay
practice which is abnormal for a particular employment, the Director, whether or not an application has been made to him or her, may, if he or she thinks fit, determine any question in relation to the payment of contribution where any such practice has been or is being followed as if the employer concerned had not followed such abnormal practice for the employment in question.

**Self employed persons**

12.— (1) A person who carries on any trade or business enterprise, including professional services or any other lawful activity, which:

(a) generates an income in the form of sales or payment for services rendered or any other form of income; or

(b) generates pecuniary remuneration in the form of a salary, returns on investments, profits or any other form of pecuniary remuneration;

(c) is over sixteen years but below the pensionable age; and

(d) is ordinarily resident in Saint Lucia;

shall be entitled to register as a self employed insured person under these Regulations.

(2) An application to register as a self-employed person shall be in the form set out as Form SE1 in the First Schedule and every applicant shall furnish to the Director such personal particulars as the Director may require for the purpose of these Regulations, which particulars shall be true and correct to the best of the applicant’s knowledge.

(3) The Director shall, if upon receipt of an application for registration if satisfied that the person is entitled to be registered as a self employed person and that person has not been issued any registration card, cause a registration card to be issued to that person.

(4) Regulations 4 (3) to 4 (8) of these Regulations shall apply to a self employed person registered under these provisions.

(5) Notwithstanding sub-regulation (1) —

(a) where an insured person who is employed by another person subsequently becomes self-employed the insured person shall for the purposes of paying contribution as a self-employed person and other related matters register as a self-employed person;

(b) where a person who is self-employed is at the same time employed by someone, then that person may elect to pay personal contributions in addition to the contributions payable by his or her employer, except that the total contributions for a
contribution period shall not exceed the amount due on the maximum insurable earnings in force at the time.

(c) where a self employed person subsequently becomes employed by another person he or she will cease to be liable as a self-employed person and his or her employment status will take precedence in respect of payment of contribution.

(d) where a person who is employed by another person, simultaneously becomes self-employed, the employment as an employed person supersedes the employment as a self-employed person in respect of payment of contributions.

(6) A self employed person shall, except where these Regulations otherwise provide, pay a contribution in respect of each contribution period during which he or she is self-employed.

(7) A self-employed person shall, at the end of the month in which he or she is self-employed or within one month thereafter, pay, by a method determined by the Director, the contributions he or she is obliged to pay by virtue of these provisions.

(8) A self-employed person shall, for the purpose of payment of contributions:

(a) select one of the categories of income listed in Table I of the First Schedule, which selection shall be binding for a minimum duration of six months, from the date of such selection;

(b) be entitled to change such selection after six months, except that he shall only be entitled to change to a category of income that is immediately lower or higher than the one selected for the period immediately preceding;

(c) not be entitled to change the selection to a higher category of income after attaining an age which is six years below the pensionable age.

(9) A person who, prior to attaining an age which is five years below the pensionable age and has never paid contributions as a self-employed person but is subsequently entitled under these Regulations to pay contributions as a self-employed person shall not select a category of income that exceeds category E in Table I of the First Schedule.

(10) Any selection of category of income made by a self-employed person shall be subject to the approval of the Director, and in making such determination he or she may make any inquiry, as he or she deems necessary.
(11) Regulations 5 to 11 of these Regulations shall, apply to a self-employed person who is required to pay contributions under these Regulations.

(12) Every self-employed person shall maintain records relating to his employment.

(13) A self-employed person is entitled to all benefits except employment injury benefit, at the same rate as other insured persons, and in order to qualify for any short term benefit must have paid contributions for twelve consecutive months immediately preceding the date of the claim, in addition to satisfying the other qualifying conditions for the particular benefit.

(14) Only paid contributions will be taken into account in calculating any benefit to be paid to a self employed person.

(15) If a self-employed person is not gainfully employed for any duration he or she shall notify the Director in writing and where such period exceeds twelve months, furnish the Director with evidence of not having been employed during such period, and any person designated by the Director may inspect the records of the self-employed person to verify such claim.

(16) Notwithstanding anything contained in the Act and these Regulations and for the purposes of this regulation any contribution paid later than the last day of the month following that month for which it is being paid shall not be accepted and the contribution for that month shall be treated as being unpaid for all intents and purposes.

Voluntary contributors

12A. — (1) A person who —

(a) is below pensionable age;
(b) is ordinarily resident in Saint Lucia;
(c) ceases to be eligible for payment of contributions in respect of insurable employment under the Act; and
(d) has paid sixty months of contributions including any contributions credited to him or her in accordance with these Regulations;

is entitled to become a voluntary contributor under these Regulations.

(2) The rate of contribution which a voluntary contributor shall pay shall be the same as that payable by an employed person during any contribution year in which a voluntary contributor is paying contributions and that rate shall be applied to the average annual wages paid to the
voluntary contributor during the two years immediately preceding the
date of the last termination of his or her employment, or to such other
period as the Director may, in the particular circumstances of the case,
determine.

(3) Only paid contribution will be taken into account in calculating
any benefit to be paid to a voluntary contributor.

(4) A voluntary contributor shall be entitled to hospitalization,
maternity and retirement benefit and must satisfy the prescribed condi-
tions for the particular benefit.

(5) An application to register as a voluntary contributor shall be
made within twelve months of the date of cessation of insurable
employment.

(6) An application to register as a voluntary contributor shall be in
the form set out as Form VC1 in the First Schedule.

Employees of the Crown

13. — (1) In every case where a person is employed by the Crown —

(a) on written terms of service or engagement for a specific
duration; or

(b) in a post which is not a pensionable post as defined in the
Pensions Act 1967 No. 9;

the employer shall cause deductions to be made from the salary or wages
of the employee and be matched by the employer and the composite sum
paid into the Fund, in accordance with the Act.

(2) All persons employed by the Crown after 31st January, 2003
shall be deemed to be in insurable employment and shall be treated in like
manner as insured persons under the Act and these Regulations.

Time of deduction

14. — (1) An employer liable to pay contributions in respect of or on
behalf of an insured person, shall, except as provided in this Regulation,
deduct these contributions from the insured person’s wages before paying
the wages in respect of the contribution period for which the contribution
is payable.

(2) Where wages are paid in advance for any period the employer
shall deduct contributions in advance for that period before payment of the
wages.

(3) In addition to any other requirements, the employer shall, where
the employment of an insured person is terminated, pay to the Corporation
all contributions due from him or her together with the contributions payable by such insured person notwithstanding that contributions are still outstanding from the insured person, within fourteen days of the termination of employment where the employment is terminated by the insured person without any notice or intimation to the employer, and forthwith on the termination of the employment where the employment is terminated in any other manner.

(4) The Director may, if he or she thinks fit, and subject to such terms and conditions as he or she may impose:

(a) approve any arrangement whereby contributions are paid at times or in a manner other than those prescribed by these Regulations and any such arrangement may include provision for the payment of such fees as may be determined by the Director, to represent the estimated additional expenses in the administration of the arrangement, to the Corporation; and

(b) as a condition for authorising the payment of any contribution at a date later than that upon which the contribution would, apart from any authorisation under paragraph (a) be due to be paid, the Director may require the making of such deposit of money by way of security as the Board may approve.

(5) These Regulations shall, subject to any such arrangements, apply to any person affected by the arrangements and any contravention of or failure to comply with any requirements of any such arrangement shall be deemed to be a contravention of or failure to comply with these Regulations.

Authority to deduct and match employees’ contributions

15.—(1) It shall be the responsibility of every employer, on making payment of wages during any contribution period to any employee, to make the appropriate deduction from such wages and pay the same together with his or her matching contributions to the Corporation.

(2) An employer is not entitled to recover any contribution paid by the employer or to be paid by the employer on behalf of an employee otherwise than by deduction in accordance with these Regulations.

(3) The surcharge payable in accordance with section 34 of the Act on late payments of contributions, shall begin to accrue as from the eighth day of the month following that in which such contributions become due and payable.

Error in deduction

16. If by reason of any error made in good faith, the employer, on making any payment of wages to an employee fails to deduct from the
wages the full amount of contribution which he or she should deduct, he or she may, after prior notification to the employee recover the amount so under-deducted by deduction from any subsequent payment of emoluments to that employee within six months thereafter.

Returns by employer

17.— (1) Not later than the last day of February in each year the employer shall render to the Director in such form as the Director may approve, a return, in respect of each employee, containing such particulars as the Director may require for the identification of the employee and the contributions paid by and receivable for him or her, for the preceding year.

(2) Where the employer is a body corporate, the return referred to in sub-regulation (1), shall be signed either by the Secretary or a Director of the said body corporate.

(3) A return shall be made under this Regulation regarding every employee in respect of whom a registration card has been issued and to whom the employer has at any time during the year made a payment of wages from which contributions were payable.

Inspection of employees’ records

18.— (1) Every employer, whenever called upon to do so by an Inspector appointed or designated under section 14 of the Act, shall produce to such Inspector for inspection either at the employer’s premises or at any office of the Corporation all wage sheets, and other documents and records whatsoever relating to the wages of his or her employees, the deduction of contributions from such wages and payment of the employer’s contribution in respect of such wages for any contribution period specified by that Inspector.

(2) The Director, by reference to the information obtained from inspection of the documents and records produced under sub-regulation (1), may on the occasion of each inspection prepare a certificate setting out:

(a) the amount of contributions which the employer is liable to pay to the Fund for the relevant years or months in accordance with the documents so produced; and

(b) any amount of contributions which have not been paid to the Fund.

(3) The production of the certificate specified in sub-regulation (2) shall be sufficient evidence in any court that the employer is liable to pay to the Fund in respect of any contribution period mentioned in the
National Insurance Regulations

certificate the amount shown therein pursuant to sub-regulation (2) and any document purporting to be such a certificate shall be deemed in any court to be such a certificate until the contrary is proved.

Death of employer

19. —(1) If an employer dies during any contribution period, any function which he or she would have been liable to perform under these Regulations shall be performed by his or her personal representative; and in the event of the death of an employer who paid wages on behalf of another person the said functions shall be performed by the person succeeding him or her and if no person succeeds him or her, by the person on whose behalf he or she had paid the wages.

(2) Where an employer is a body corporate and changes ownership or ceases operations, its directors at the time of such change or cessation shall be responsible for performing any function which it would have been liable to perform under these Regulations.

Exemption from liability for contributions

20. — (1) An employee and his or her employer shall be exempt from liability to pay contributions for any contribution period:

(a) in which no work is done by the employee and the employee received no wages in respect of the period;

(b) during which an employee is in full-time unpaid apprenticeship.

(2) Nothing in this Regulation shall be deemed to affect the liability of an employee, for any contribution period in which the employee is on leave if subject to paragraph (a) of sub-regulation (1) contributions are normally payable with respect to the employment of such person.

Refund of contributions

21. — (1) Where the Director is satisfied that any contribution was paid to the Fund by error in respect of any employee either wholly or partly in excess of the amount that was due to be paid, the Director may, subject to sub-regulation (2) refund the amount so paid in excess, to the person by whom it was paid.

(2) Notwithstanding sub-regulation (1)

(a) if any amount is due to the Fund from the person to whom refund of the amount paid in excess would otherwise be made, the Director may retain the whole or any part of such excess payment and set it off against any such amount due;

(b) no refund shall be made without a written application to the Director, who may require the applicant to furnish such
information as may be necessary to enable the Director to determine the amount of the excess payment and no amount shall be set off without the consent of the Director;

(c) no interest shall be paid on any excess payment.

**Treatment of late payment for purpose of benefit**

22. Subject to these Regulations, where a contribution payable by any employer in respect of or on behalf of an employee is paid after the due date or is not paid, and the delay or failure in making payment thereof is shown to the satisfaction of the Director not to have been with the consent or connivance of or attributable to any negligence on the part of the employee, the contribution shall, for the purpose of any right to benefit, be treated as having been paid on the due date.

**Treatment of late contributions for the purpose of sickness or maternity benefit.**

23.— (1) For the purpose of any right to sickness benefit or maternity benefit, a contribution paid after the due date shall, in determining whether the relevant contribution conditions are satisfied with respect to the number of contributions paid between the commencement of payment and the day for which the benefit is claimed, be treated —

(a) for the purpose of the right to any such benefit in respect of any day before the date on which payment of the contribution is made, as not paid; and

(b) for the purpose of the right to any such benefit in respect of any other day, as paid on the date on which payment of the contribution is made.

(2) For the purposes of sub-regulation (1), in determining whether the relevant contribution conditions are satisfied in whole or in part with regard to the number of contributions paid or credited in respect of the last prescribed contribution period before the day for which sickness benefit or maternity is claimed, a contribution paid after the due date shall be treated —

(a) if after the commencement of incapacity for work and whilst the incapacity continues or during the period for which maternity benefit would otherwise be payable, as the case may be, as not paid in respect of any day before the expiry of a period of forty-two days including Sundays from and including the date on which payment of that contribution is made and as paid at the expiry of that period in relation to the right to such benefit in respect of any other day;

(b) if paid after the cessation of incapacity for work for the said
National Insurance Regulations

period referred to in paragraph (a) as the case may be, as not paid.

Treatment of late contributions for the purpose of retirement or invalidity benefits

24. For the purpose of any right to retirement or invalidity benefit, a contribution paid after the due date shall be treated:

(a) if paid before the expiration of six months next following the end of the year in which it became payable, as paid on the due date;

(b) if paid at any other time, as not paid.

Treatment of late contributions for the purpose of funeral benefit

25. For the purpose of any right to funeral benefit, a contribution paid after the due date shall be treated as not paid if the contribution is paid after the date of death of the person in respect of whom the grant is claimed.

Employment by two or more employers

26.— (1) Where an employee is employed by two or more employers in any contribution period, each employer shall pay contributions on the respective wages paid to the employee in accordance with the Act.

(2) Any contribution paid on amounts in excess of the maximum wage limit shall be refunded in accordance with regulation 21.

Principal and sub-contractors

27.— (1) Where a principal contractor issues a contract for service to a sub-contractor, the principal contractor shall furnish the Corporation in writing with the correct name, address and telephone number of every sub-contractor, so engaged and the date and duration of such engagement.

(2) The failure of a principal contractor to provide the information required under Sub-regulation (1) above shall constitute an offence and on summary conviction shall be liable to a fine not exceeding $5,000.00 or twelve months imprisonment or both.

(3) Every sub-contractor who employs persons for the purpose of any engagement under Sub-regulation (1) above shall if not already registered under Regulation 3(1), register as an employer and deduct and match contributions from the wages of employees and cause the composite sum to be paid into the fund in accordance with these Regulations.
Meaning of expression “husband”; “wife”; “cohabitation”

28. For the purpose of the Act and these Regulations and concerning any benefit, the expression —

(a) “husband” or “wife” in relation to a person who has been married more than once, refers to the last husband or wife respectively;

(b) “cohabitation” means a relationship between one man and one woman, where, although not married, they lived together as husband and wife in the same dwelling house for a continuous period of at least five years;

(c) “marriage” is extended to include the cohabitation of one woman with one man and the words wife, husband, widow, widower and spouse shall be construed accordingly.

PART IV
BENEFITS

A. Sickness Benefit

Entitlement

29. Subject to these Regulations, sickness benefit shall be payable to an insured person who is rendered temporarily incapable of work as a result of a specific disease, or physical or mental disablement which is not an employment injury, nor caused by habitual use of alcoholic liquor, narcotics, or drugs other than those taken under the prescription of a registered medical practitioner, and for this purpose —

(a) an insured person shall be treated as incapable of work for any day during which he or she is required to abstain from work because he or she is under observation by reason of being a carrier or having been in contact with a person suffering from an infectious disease;

(b) one day in each week as may be determined by the Director in any particular case or class of cases shall not be treated as a day of incapacity for work and shall be disregarded in computing any period of consecutive days.

Day from which benefit is to commence

30. — (1) An insured person who is eligible for sickness benefit shall not be entitled to receive such benefit for the first three days of any continuous period of incapacity for work.
National Insurance Regulations

(2) For the purpose of computing the first three days of any continuous period of incapacity for work under sub-regulation (1) —
   (a) public holidays shall be included;
   (b) one day per week shall be disregarded.
   (c) such computation shall commence from the first day of absence from work.

(3) An insured person shall not be entitled to sickness benefit on or after attaining pensionable age but this sub-regulation shall not apply to any person who has continued to make the appropriate contributions after pensionable age.

(4) Notwithstanding the above sickness benefit shall only be payable for certificated sick leave

Manner of claiming and support of claim

31. A claim for sickness benefit shall be made in the form set out as Form SB2 in the First Schedule and shall be supported by —
   (a) a certificate of a registered medical practitioner; and
   (b) such other evidence as the Director may require for the purpose of establishing the insured person’s incapacity for work.

Conditions which must be satisfied

32. Sickness benefit shall be payable only if the insured person —
   (a) was engaged in insurable employment immediately prior to the day on which incapacity commenced; or
   (b) was engaged in insurable employment and has paid at least two months contributions in the period of four months immediately preceding the contribution period in which the first day of the continuous period of incapacity for work occurred; and
   (c) had paid contributions for not less than six months since his or her registration under the Act.

Period of payment

33. — (1) Sickness benefit shall be paid for each day, excluding one day in each week as determined in accordance with these Regulations as long as the incapacity for work continues, subject to a maximum of six months in any continuous period of incapacity for work.

   (2) In determining any period of incapacity, any period separated by not more than eight weeks shall be treated as one continuous period of incapacity for work starting on the first day of the first such period.
(3) Where a claimant is entitled to receive from his or her employer full pay during any period of incapacity for work, the Director shall suspend payment of sickness benefit to such claimant during that period.

**Rate of sickness benefit**

34. The rate of sickness benefit shall be sixty five percent of the average insurable earnings in the last four months before the beginning of the period of incapacity.

**B. Invalidity Benefit**

**Conditions for entitlement**

35. Subject to these Regulations an insured person who:

(a) is an invalid otherwise than as a result of employment injury;

(b) has paid contributions for not less than sixty months with payments for thirty six consecutive months immediately preceding the month of invalidity, or has paid not less than the qualifying number of months of contributions for a pension as outlined in Table II of the First Schedule.

(c) is under pensionable age; and

(d) is not in receipt of sickness benefit,

is entitled to an invalidity pension for so long as the invalidity continues.

**Rate of invalidity pension**

36.— (1) Where a claimant has contributed to the Fund for over fifty nine months but less than the qualifying number of months of contribution for the years outlined in Table II of the First Schedule, the rate of invalidity pension shall be equal to thirty-five per centum of his or her average insurable earnings.

(2) Where a claimant has contributed to the Fund for the qualifying number of months of contribution for the years outlined in Table II of the First Schedule or more the rate of invalidity pension shall be —

(a) equal to forty per centum of his or her average insurable earnings for the qualifying number of months of contribution for the years outlined in Table II of the First Schedule; plus

(b) one tenth of one per centum for every additional month in excess of the qualifying number of months of contribution for the years outlined in Table II of the First Schedule that he or she has contributed to the Fund.
For the purpose of an invalidity benefit the average insurable earnings shall be, the average of the best five years of insurable earnings before the commencement of the pension, and for the purposes of this regulation where the insurable earnings is in excess of thirty-six thousand dollars per annum then the average insurable earnings shall be computed in accordance with Table III of the First Schedule for the years outlined in the first Column of Table III.

(4) The rate of an invalidity pension shall be increased to two hundred dollars per month, if otherwise it would have been lower.

(5) A full pension shall not exceed sixty percent of average insurable earnings.

Invalidity grant

37. Subject to this Regulation, an insured person who does not satisfy Regulation 35 but who —

(a) is an invalid;

(b) has contributed to the fund for less than sixty months; and

(c) is under pensionable age,

is entitled to an invalidity grant based on the insured person’s balance, if any, in the National Provident Fund at the date of commencement of the Act with interest on it, together with one hundred per centum of the employee’s portion of the contributions paid to the Fund under his or her account without interest.

Certificate of permanent incapacity for work

38. All claims for invalidity benefit shall be made in the form set out as Form Inv. B1 in the First Schedule, accompanied by a certificate of permanent incapacity for work setting out the nature of the incapacity by a registered medical practitioner.

C. Maternity Benefit

Entitlement

39. — (1) Subject to these Regulations, a maternity allowance shall be payable in case of pregnancy and confinement of a woman in insurable employment.

(2) The Director shall have access to all the relevant evidence before any payment of maternity benefit is made under sub-regulation (1).

Conditions to be satisfied

40. Maternity benefits shall be payable only if a woman —
National Insurance Regulations

(a) has been in insurable employment prior to her claim for maternity allowance; and

(b) has paid contributions for seven months in the ten months immediately preceding the month of expected confinement.

Duration

41. Maternity allowance shall be paid for a period of three months starting with the month preceding the month of expected confinement, or if later, starting with the month in which the benefit is claimed, but starting not later than the month of actual confinement.

Rate of maternity benefits

42.— (1) The rate of maternity benefits shall be sixty five percent of the average insurable earnings of the ten months immediately preceding the month before the month of expected confinement.

(2) Where a claimant is entitled to receive from an employer full pay during any period of absence from work due to pregnancy, the Director shall suspend payment of maternity benefit to such claimant during that period.

Maternity grant

43.— (1) A woman is entitled to a grant of six hundred dollars if:

(a) she has given birth to a child; and

(b) she or her husband has contributed to the Fund for seven months in the ten months immediately preceding the month before the month of expected confinement.

(2) For the purpose of this Regulation the expression “husband” includes a man cohabiting with a woman in the same dwelling house for a continuous period of at least five years.

(3) Any payment made by virtue of this Regulation shall in respect of the husband’s contribution be made only to one such woman.

(4) Where a woman who qualifies for a maternity grant under subregulation (1) dies during childbirth, leaving a surviving child or children from this confinement, the maternity grant shall be paid in respect of such child or children, to such person having custody or guardianship of such child or children.

Support of claim

44.— (1) A claim for maternity benefits shall be made in the Form set out as Form MB 1 in the First Schedule and shall be accompanied —
National Insurance Regulations

(a) in the case of a claim made prior to the date of confinement; by a certificate duly certified by a registered medical practitioner or a registered midwife, as to the expected date of confinement; or

(b) in the case of a claim made subsequent to the date of confinement, by a certificate duly certified by a registered medical practitioner or a registered midwife, as to the actual date of confinement.

(2) A claim for maternity grant on the basis of a husband’s contribution shall be made in the form set out as Form MB 2 in the First Schedule.

Certificate of confinement

45.— (1) An insured woman who has been granted maternity benefit shall as soon as possible after her confinement, obtain a certificate of her confinement from the registered medical practitioner or registered midwife in attendance and forward it to an office of the Corporation within three months after obtaining such certificate.

(2) The Director may accept other evidence in lieu of the certificate referred to in sub-regulation (1) if, in his or her opinion, the special circumstances of any particular case so justify.

D. Survivor’s Benefit

Entitlement to survivor’s pension: rate of survivor’s pension and amount of survivor’s grant

46.— (1) Subject to regulation 47, 48 and 49, survivor’s benefit shall be payable to the widow or widower, as the case may be, or children or parents or grand parents of an insured person if, at the time of death, the insured person —

(a) was in receipt of a retirement or invalidity pension; or

(b) could have satisfied the prescribed condition for an invalidity pension or grant had he or she been deemed to be an invalid at the time of his or her death; or

(c) was of pensionable age and would have been entitled to a retirement pension or grant had he or she made a claim for such benefit; or

(d) was below the pensionable age and would have been entitled to a retirement benefit, save for his or her age, or an invalidity benefit had he or she made a claim for such benefit.
(2) Where at the date of his or her death a deceased insured person was in receipt of an invalidity or retirement pension or would have been entitled to an invalidity or retirement pension had he or she been an invalid, the benefit payable shall be a pension, in these Regulations referred to as a “survivor’s pension”.

(3) Where at the date of his or her death the deceased insured person would have been entitled to an invalidity or retirement grant had he or she been deemed to be an invalid, the benefit payable shall be a grant, in these Regulations referred to as a “survivor’s grant”.

(4) Survivor’s benefit shall not be payable in respect of a marriage contracted after the insured person had been granted an invalidity pension or retirement pension, except where the parties had lived together for a continuous period of at least five years prior to the date of such marriage.

(5) The rate of survivor’s pension shall not exceed the rate of invalidity or retirement pension which would have been payable to the deceased insured person at the time of his or her death.

(6) The amount of survivor’s grant shall not exceed the amount of invalidity or retirement grant which would have been payable to the deceased person at the time of his or her death.

(7) A claim for survivor’s benefit shall be made in the form set out as Form Sur B1 in the First Schedule.

Entitlement to survivor’s pension

47.— (1) A widow or widower who at the date of his or her spouse’s death:

(a) had no dependent children;

(b) had been married to his or her spouse for at least three years; and

(c) was of pensionable age or over;

is entitled to a survivor’s pension for life or until his or her re-marriage or cohabitation with a person of the opposite sex as husband or wife.

(2) A widow or widower who at the date of his or her spouse’s death was not under pensionable age, had been married to the deceased spouse for not less than three years; and was at the date of the death of the spouse an invalid, is entitled to a survivor’s pension for life.
National Insurance Regulations

(3) A widow or widower who at the date of his or her spouse’s death was under pensionable age and was an invalid is entitled to a survivor’s pension during his or her invalidity.

(4) The benefit under sub-regulation (3) shall continue in the event the invalidity ceases when he or she is over the pensionable age.

(5) A widow or widower who was under pensionable age at the date of his or her spouse’s death is entitled to survivor’s pension for one year only.

(6) A survivor’s pension payable to a widow or widower shall cease on his or her remarriage or cohabitation with a person as his or her spouse.

Widower or widow with dependent children

48.—(1) A widower or widow who has dependent children is entitled to a survivor’s pension irrespective of his or her age at the date of his wife or her husband’s death and such pension shall be payable until the children of their marriage cease to be dependent; but if he or she remarries or cohabits with a woman or a man as his wife or her husband respectively, the rate of pension set out in regulation 50 shall be payable to the dependent children, only.

(2) Where a widower or widow during the time he or she is in receipt of a pension under this Regulation attains the pensionable age, the widower’s or widow’s pension shall be continued for his or her lifetime or until he or she re-marry or cohabits with a person of the opposite sex as his or her spouse.

Entitlement of dependents

49.—(1) A survivor’s pension shall be payable in respect of a dependent child until he or she attains his or her sixteenth birthday or his or her eighteenth birthday if he or she is in full time education.

(2) Notwithstanding sub-regulation (1), in the case of an invalid child, the pension shall be payable for the period during which the invalidity continues.

(3) In any case where a deceased has left a surviving child or children the entitlement will be shared in such proportion as the insured has determined and in the absence of such determination, then as the Director deems fit.
National Insurance Regulations

(4) Where no other survivor is entitled, a survivor’s pension is payable to a parent or grand parent, who at the death of an insured person —

(a) was of pensionable age or older; and

(b) was wholly or mainly maintained by the insured person immediately prior to his or her death.

Rate of survivor’s pension

50.— (1) Where there are no other survivor’s or dependants the rate of survivor’s pension payable to a widow or widower shall be seventy five percent of a deceased spouse’s pension entitlement, if such spouse were a pensioner at the date of death or seventy five percent of the invalidity pension such spouse would have received had he or she become entitled to such pension at that date.

(2) If there exists any other survivor’s or dependants then the rate of survivor’s pension shall be fifty percent of the entitlement outlined in sub-regulation (1).

(3) The rate of pension payable to dependent children shall be fifty percent of the insured parent’s entitlement at the date of his or her death, if the deceased parent were a pensioner at the date of death, or fifty percent of the invalidity pension the deceased parent would have received had he or she become entitled to such pension at that date, or fifty percent of each parent’s entitlement if both are dead.

(4) The rate of survivor’s pension to a parent or grand parent shall be equal to fifty percent of the insured person’s pension entitlement if he or she were a pensioner at the time of his or her death, or the invalidity pension he or she would have received had he or she become entitled to such pension at that date.

(5) The total aggregate pension payable to survivors shall be limited to one hundred percent of the insured person’s entitlement at the time of death, or of the invalidity pension he or she would have received had he or she become entitled to such pension at that date.

Distribution of survivor’s grant

51. A survivor’s grant shall be distributed on the same basis as provided in regulation 50 for a survivor’s pension.
National Insurance Regulations

Persons to be treated as survivors

52. — (1) For the purpose of the regulations concerning survivor’s benefit where it is a condition of entitlement to the benefit that a person shall be the widow or widower of an insured person, the following provisions shall apply —

(a) in the case of an insured man, the survivor shall be a person whom the Director is satisfied is his wife or a woman with whom he cohabited as his wife;

(b) in the case of an insured woman, the survivor shall be a person whom the Director is satisfied is her husband or a man with whom she cohabited as her husband.

(2) Where the question of marriage or re-marriage or the date of marriage or re-marriage, arises in regard to title to benefit, the Director shall, in the absence of evidence of a lawful marriage decide whether or not the person concerned should be treated as if he, she or they were married or had re-married as the case may be, and if so from what date; and in determining the question, the Director shall have regard to paragraphs (a) and (b) of sub-regulation (1).

(3) The decision of the Director under sub-regulation (2) shall, unless the context otherwise requires, have the effect of extending, as regards title to survivor’s benefit, the meaning of the word “marriage” to include the cohabitation of one woman and one man as aforesaid and the word “wife”, “husband”, “widow”, “widower”, and “spouse” shall be construed accordingly.

E. Retirement Pension

Entitlement to retirement pension

53. — (1) Retirement pension shall be payable for life to an insured person who has attained pensionable age, is no longer employed in gainful employment and has contributed to the fund for the respective period shown in Table II of the First Schedule.

(2) An insured person may elect to continue to pay contributions into the Fund until he or she has attained the age of sixty-five years.

Rate of pension

54. — (1) The rate of pension shall be equal to forty per cent of the insured person’s average insurable earnings together with zero point one percent of such earnings for every month in excess of the minimum qualifying number of months of contributions shown in Table II of the First Schedule, that he or she has contributed to the Fund.
(2) The average insurable earnings shall be the average of the best five years of insurable earnings before the commencement of the pension, and for the purposes of this regulation where the insurable earnings is in excess of thirty-six thousand dollars per annum then the average insurable earnings shall be computed in accordance with Table III of the First Schedule for the years outlined in the first column of Table III.

(3) The rate of retirement pension shall be increased to two hundred dollars if otherwise it would have been less.

(4) A full pension shall not exceed sixty percent of average insurable earnings.

Entitlement to an early pension

55. — (1) An insured person who has not satisfied all the requirements of regulation 53 may qualify for an early retirement pension before pensionable age under sub-regulation (2).

(2) Where an insured person has attained the age of sixty, has satisfied the prescribed conditions for a full pension and is desirous of obtaining an early pension such pension shall be reduced by zero point five percent for each month below the normal pensionable age, and the rate of such pension shall be in accordance with the formula set out in Table IV of the First Schedule.

Entitlement to retirement grant

56. Subject to these Regulations, an insured person who does not satisfy the conditions under regulation 53 but who —

(a) has attained pensionable age; and

(b) has contributed to the Fund for less than the respective number of months outlined in Table II of the First Schedule

is entitled to a retirement grant.

Amount of retirement grant

57. The rate of retirement grant shall be equal to the insured person’s balance, if any, in the National Provident Fund as at the second day of April, 1979 with interest on such balance from that date to the date he or she attains pensionable age together with one hundred per centum of the employee’s portion of the contributions paid to the Fund under his or her account without interest.
Claims

58. — (1) A claim for retirement benefit shall be made in the form set out as Form RB1 in the First Schedule.

(2) A person who is in receipt of a retirement pension shall furnish documentary evidence that he or she is alive by completing a life certificate in the form set out as Form NI/LC in the First Schedule and submit the completed form to the Director on or before the 30th day of June and the 31st day of December in each year.

(3) Failure to produce a certificate pursuant to sub-regulation (2) will result in the pension being suspended until the date on which that certificate is furnished.

F. Funeral Benefit

Entitlement to grant

59. — (1) Subject to these Regulations, a funeral grant shall be payable on the death of any insured person who —

(a) at the time of his or her death could have satisfied the contribution condition for any benefit except for a grant or allowance; or

(b) has paid at least six months contribution in the twelve months preceding his or her death; or

(c) has paid contribution, the total sum of which is at least equivalent to the amount of the funeral grant.

(2) A funeral grant shall also be payable to an insured person upon the death of a dependent child or spouse if that insured person, at the time of the death of such dependent child or spouse satisfies the following conditions:

(a) the contribution condition for any benefit excluding a grant or allowance; or

(b) paid at least six months of contributions in the twelve months preceding the relevant date of death; or

(c) has paid contributions the total sum of which is at least equivalent to the amount of the funeral grant.
Person who may receive grant

60.— (1) Subject to these Regulations, a funeral grant shall be paid to the person who has met or is liable to meet the funeral expenses of the deceased person.

(2) Where —

(a) death has occurred at sea and the deceased person was buried at sea;

(b) the person who has met or is liable to meet the funeral expenses of the deceased person cannot be found; or

(c) the funeral expenses of the deceased person were less than the amount of the funeral grant;

the funeral grant, or as the case may be, the remainder of the funeral grant, shall be paid to such person or persons as the Director in his or her discretion may decide.

Amount of grant

61.— (1) The amount of funeral grant payable under regulation 59(1) shall be one thousand seven hundred and fifty dollars.

(2) The amount of funeral grant payable under regulation 59 (2) shall be as prescribed in Table V in the First Schedule.

(3) A claim for funeral benefit shall be made in the form set out as Form FB1 in the First Schedule.

G. Employment Injury Benefit

Entitlement to benefit

62.— (1) Subject to these Regulations, employment injury benefit shall be payable to an insured person who at the time of the relevant accident was in insurable employment and who as a result of such accident or a prescribed disease as provided under these Regulations becomes incapable of work and for this purpose:

(a) a person shall be treated as incapable of work for any day on which he or she is required to abstain from work as a result of an employment injury;

(b) one day in each week as may be determined by the Director in any particular case or class of cases shall not be treated as a day of incapacity for work, and shall be disregarded in computing any period of consecutive days.
(2) Notwithstanding sub-regulation (1) a person in insurable employment shall not be deprived of his or her entitlement to employment benefit by reason only that under any other law he or she is deemed to be an unemployed person.

Notice of accident by insured person

63.— (1) An insured person who suffers personal injury through an accident in respect of which employment injury benefit is payable under these Regulations shall give notice of such accident in writing to his or her employer as soon as practicable after the accident.

(2) The notice required to be given by an insured person under subregulation (1) may be given by a person acting on his or her behalf and the Director may in any case authorise the employer to dispense with a written notice.

(3) The notice shall be given to the employer, or if there is more than one employer to one of such employers, or to any foreman or other official under whose supervision the insured person is employed at the time of the accident or to any person designated for the purpose by the employer, and shall give the appropriate particulars of the accident.

Employer to complete form for accident or disease

64. The employer of a person who has sustained an employment injury or developed a prescribed disease shall complete the form set out as Form EIB 1 in the First Schedule, and shall cause the form, after its completion, to be delivered to the Director.

Day from which benefit is to commence

65.— (1) An insured person who is eligible for employment injury benefit is entitled to receive such benefit from the first day of any continuous period of incapacity for work.

(2) In determining whether the insured person is incapable of work on the day of the relevant accident, any part of that day before the occurrence of the accident shall be disregarded.

Manner of claiming and support of claim

66. A claim for employment injury benefit shall be in the form set out as Form EIB 2 in the First Schedule and shall be supported by a certificate from a registered medical practitioner or by such other evidence as the Director may deem requisite and for such purpose the Director may
National Insurance Regulations

require —

(a) the claimant to submit himself or herself to examination by one or more registered medical practitioners nominated by the Director from a panel of registered medical practitioners approved by the Board;

(b) an inspector to conduct an inquiry and submit a report on the relevant accident including its causes and consequences.

Duration and rate of payment

67. — (1) Employment injury benefit shall be paid while the incapacity continues for a maximum of twelve months or until the earlier award of a permanent disability benefit.

(2) The rate of employment injury shall be sixty-five per centum of the insurable earnings in the month in which the injury was sustained or the average of the best two in the last four months of contributions before the month in which the injury was sustained.

(3) Notwithstanding sub-regulation (1) any two or more periods of incapacity for work arising out of the same accident and not separated by more than eight weeks shall be treated as one continuous period of incapacity for work starting on the first day of the first such period.

(4) Where a claimant is entitled to receive from an employer full pay during any period of absence from work due to employment injury, the Director shall suspend payment of employment injury benefit to such claimant during such period.

Medical expenses payable for employment injury

68. — (1) Subject to this Regulation an insured person is entitled to the refund of medical expenses incurred by him or her as a result of the relevant accident or disease in respect of medical, surgical, dental and hospital treatment, and the supply of medicines.

(2) Any medical expenses refunded under this Part shall not exceed twenty thousand dollars.

(3) The fees or charges constituting medical expenses in this regulation shall not be more than would be properly and reasonably charged.
(4) The amount of any such fees and charges which may be refunded under this Part in any case shall be determined by the Director.

(5) Medical expenses incurred in Saint Lucia for which a person is eligible during his or her absence from Saint Lucia shall be paid in Saint Lucia to such representative acting for and on behalf of the person concerned as may be authorised by him or her in writing.

(6) Notwithstanding anything contained in this Part, where the Director considers it necessary to do so, he or she may instead of refunding to an insured person any medical expenses incurred by that person, pay to a medical practitioner or an institution from whom or at which that person obtained treatment a sum equal to such medical expenses or such part thereof as may be refunded under these Regulations.

Disqualification

69. An insured person entitled to payment of employment injury benefit shall be disqualified from receiving benefit for such period as the Director may decide where:

(a) the claimant has become incapable of work through his or her own misconduct;

(b) the injury was self-inflicted;

(c) the claimant fails, without good cause, to comply with a notice in writing by the Director requiring him or her to submit himself or herself to medical or other examination; or

(d) the claimant fails, without good cause, to

(i) refrain from behaviour which retards his or her recovery, or to answer any reasonable enquiry by an officer of the Corporation to ascertain whether he or she is doing so;

(ii) refrain from doing work for which remuneration is or would ordinarily be payable.

Disability pension

70. —(1) If the relevant accident results in permanent total disability of the insured person or disability assessed at over thirty percent, as set out in the Second Schedule, a disablement pension shall be paid at the same rate as an invalidity pension, subject to a minimum of sixty-five percent of the insured person’s average insurable earnings in the month of the relevant accident.
(2) A claim for disablement benefit shall be made in the form set out as Form DB1 in the First Schedule.

Entitlement to disablement benefit

71.—(1) For the purpose of this Regulation, the extent of disablement shall be assessed, by reference to the disabilities incurred by the claimant as a result of the relevant loss of faculty, in accordance with the following general principles:

(a) the disabilities to be taken into account shall be all disabilities to which the claimant may be expected, having regard to his or her physical and mental condition at the date of assessment, to be subject during the period taken into account by the assessment as compared with a person of the same age and sex whose physical and mental conditions are normal;

(b) no such disability shall be treated as having been incurred as a result of the relevant loss of faculty in so far as the claimant either:

(i) would in any case have been subject thereto as a result of congenital defect or of any injury or disease received or contracted before the relevant accident; or

(ii) would not have been subject thereto but for some injury or disease received or contracted after, and not directly attributable to, the relevant loss of faculty;

(iii) the assessment shall be made without reference to the particular circumstances of the claimant other than age, sex and physical and mental condition.

(2) The period to be taken into account for an assessment of the extent of a claimant’s disablement shall be the period —

(a) beginning on the first day of entitlement to benefit and limited either to the claimant’s life or to a definite date; and

(b) during which the claimant has suffered and may be expected to suffer from the relevant loss of faculty.

(3) Notwithstanding sub-regulation (2), if on any assessment the condition of the claimant is not such, having regard to the possibility of changes therein, whether predictable or not, as to allow a final assessment being made up to the end of the said period —
National Insurance Regulations

(a) a provisional assessment shall be made, taking into account such shorter period only as seems reasonable having regard to his or her condition and the possibility aforesaid; and

(b) on the next assessment the period taken into account shall begin with the day after the end of the period taken into account by the provisional assessment.

(4) An assessment shall state the degree of disablement in the form of a percentage, which shall be determined in accordance with the Second Schedule, and shall also specify the period taken into account for the assessment and where that is limited by reference to a definite date as in sub-regulation (2), whether the assessment is provisional or final.

(5) Notwithstanding sub-regulation (4)

(a) the said percentage and period shall not be specified more particularly than is necessary for the purpose of determining in accordance with this Regulation the claimant’s right to disablement benefit;

(b) a percentage above fourteen which is not a multiple of ten shall be treated —
   (i) if it is a multiple of five, as being the next higher percentage which is a multiple of ten;
   (ii) if it is not a multiple of five, as being the nearer percentage which is a multiple of ten;

(c) where a medical authority has given a final assessment of the degree of disablement of a claimant, the assessment may be reviewed at any time at the initiative of the medical authority or at the request of the Director and the new assessment, if different from the previous one, shall be taken into consideration in determining the claimant’s right to disablement benefit.

Rate of disablement grant

72. Where the degree of disablement is assessed for the period taken into account as amounting to less than thirty percent the Director shall commute the disablement benefit into a lump sum equivalent to the benefit payable over a period of sixty months.
Increase of disablement benefit during approved hospital treatment

73. Where an insured person entitled to disablement benefit enters any hospital for the purpose of receiving approved hospital treatment or rehabilitation, then if the degree of disability in respect of which a pension is payable was assessed at less than one hundred per centum, it shall be treated for the period during which he or she received such treatment as if it had been assessed at one hundred per centum.

Death benefits entitlement of dependents

74.— (1) Subject to these Regulations, where an insured person in insurable employment dies as a result of a relevant accident, death benefit shall be payable —

(a) to or for the benefit of the dependants of the deceased, other than those specifically excluded by sub-regulation (2) of this Regulation; and

(b) either as a periodical payment or as a lump sum, calculated in accordance with these Regulations.

(2) The dependants of a person entitled to claim a benefit under sub-regulation (1) shall not include an adult dependant who —

(a) died before an award of such benefit in respect of the deceased had been made; or

(b) is the widow of the deceased unless at the time of his death —

(i) she is over pensionable age or incapable of work and the incapacity is likely to be permanent; or

(ii) she is pregnant by her late husband; or

(iii) she has the care of a child of his or of their marriage who is under the age of sixteen years; or is under eighteen years and is in full time education; or

(iv) she was either residing with him or receiving, or entitled to receive from him periodical payments for the maintenance of herself or their children or both;

(c) is the widower of the deceased unless at the time of her death —

(i) he is over pensionable age and incapable of work and this incapacity is likely to be permanent; or
National Insurance Regulations

(ii) he has the care of a child of hers or of their marriage who is under sixteen years of age; or is under eighteen years and is in full time education; or

(iii) he was either residing with her or receiving, or entitled to receive from her periodical payments for the maintenance of himself or their children or both;

(d) was married to the insured person less than six months before his or her death.

(3) For the purposes of sub-regulation 2 the term widow and widower shall have the same meaning assigned under regulation 52 (1).

Prior entitlement of widow, widower and child

75.— (1) A widow or widower qualifying as a dependant under regulation 74 is entitled to death benefit in preference to all other claimants.

(2) Every unmarried dependent child who becomes an orphan as a result of the death of —

(a) an insured person whose death was caused by the relevant accident; or

(b) a widow or widower in receipt of a death benefit, and who has no stepmother or stepfather with a prior claim;

shall, in preference to all other claimants, be entitled to death benefit from the day after the death of the deceased if he or she is then under sixteen years or is eighteen years and is in full-time education and was wholly or mainly maintained by the deceased and shall, subject to the conditions specified in regulation 74 continue to receive such benefit until he or she reaches the age of eighteen years.

Entitlement of parent to death benefit

76. If the insured person dies as a result of the relevant accident and is not survived by a widow, widower or child, entitled to death benefit, a parent of the deceased who is permanently incapable of self-support and who was being wholly or mainly maintained by the deceased or who would, but for the relevant accident have been so maintained is entitled to death benefit.

Entitlement of other relatives to death benefit

77.— (1) Where an insured person dies as a result of a relevant accident and is not survived by a widow, widower, child or parent entitled to death benefit, then a death benefit shall be payable to a dependant or dependants being members of the family of the deceased if at the time of the death such dependant was wholly or mainly maintained by the
National Insurance Regulations

deceased or would, but for the relevant accident, have been so maintained; and

(a) if the dependant is a man, is permanently incapable of self-support or living with his wife who is permanently incapable of self-support;

(b) if the dependant is a woman, is herself permanently incapable of self support or is living with her husband who is permanently incapable of self-support;

(c) if the dependant is a child, who is under the age of eighteen years, or being above that age is permanently incapable of self-support.

(2) If there is more than one dependant, the death benefit payable under sub-regulation (1) shall be distributed in proportion to the contribution made by the deceased during his or her lifetime to each dependant or in such manner as the Director may, in his or her discretion, consider reasonable.

(3) Where an insured person dies as a result of a relevant accident and leaves no dependant entitled to death benefit, there shall be payable to his or her creditors or his or her estate a lump sum not exceeding the smaller of the following amounts —

(a) a sum equal to the reasonable expenses for medical attendance of the deceased arising from the relevant accident and the reasonable expenses of his or her burial; or

(b) a grant calculated at twelve months of any pension the deceased would have been entitled to receive had he or she made a claim for such benefit.

Claim for death benefit

78.—(1) A claim for death benefit shall be made in the form set out as Form Sur. B1 in the First Schedule.

(2) Except for lump sums payable under regulation 77 all death benefits shall be paid as pensions.

Period for which pension is payable

79.—(1) A death benefit in the form of pensions shall be payable for the undermentioned periods:

(a) to a widow for life commencing from the date of the death of her husband;
National Insurance Regulations

(b) to a widower for life commencing from the date of the death of his wife;

c) to an orphan from the date of death of his or her surviving parent until he or she reaches the age of sixteen years or, being between the ages of sixteen and eighteen, he or she is an unpaid apprentice and not otherwise employed for gain or is receiving full-time education; or

d) to a parent for life commencing from the date of the deceased’s death or until the Director is satisfied that the circumstances of the parent have so changed by re-marriage or otherwise that he or she would no longer have been dependent on the deceased person if he or she had survived.

(2) Notwithstanding paragraphs (a) and (b), where a widow or widower re-marries or co-habits with a person of the opposite sex who is not his or her spouse, the payment of benefit shall cease from the date of his or her re-marriage or his or her co-habitation, as the case may be.

Rate of death benefit

80. The rate of a death benefit for the beneficiaries described in these Regulations shall be the rate payable for pensions under these Regulations.

Prescribed disease

81. Where a person has developed any of the diseases specified in the first column of the Third Schedule, being a disease due to the nature of his or her insurable employment in any occupation set out against that disease in the second column of that Schedule, the benefits specified in these Regulations shall be payable subject to the conditions set out in these Regulations and for this purpose —

(a) any reference to a relevant accident or employment injury shall include a reference to a prescribed disease;

(b) any reference to the date of such an accident or injury shall include —

(i) if the first claim in respect of the prescribed disease is for employment injury benefit, the first day the claimant is incapable of work as a result of a prescribed disease;

(ii) if the first claimant in respect of the prescribed disease is for disablement benefit, the first day the claimant is suffering from loss of physical or mental faculty as a result of a prescribed disease.
Re-occurrence of prescribed disease

82. Where a person claims employment injury or disablement benefit in respect of a prescribed disease for which he or she has previously received employment injury or disablement benefit, his or her earlier claim in respect of that disease shall be disregarded if he or she is incapable of work and if his or her incapability is predominantly due to further exposure to risk of that disease in his or her insurable employment in any occupation set out against that disease in the second column of the Third Schedule.

H. Miscellaneous Provisions Relating to Employment Injury

Obligations of claimants and beneficiaries in respect of employment injury benefit or disablement benefit.

83.— (1) Subject to these Regulations every claimant for and every beneficiary of employment injury benefit or disablement benefit shall comply with every direction given to him or her by the Director, which requires him or her either —

(a) to submit himself or herself to a medical examination by a medical authority for the purpose of determining the effect of the relevant accident or the treatment appropriate to the relevant injury or loss of faculty; or

(b) to submit himself or herself to such medical treatment for the said injury or loss of faculty as is considered appropriate in his or her case by the registered medical practitioner in charge of the case or by the medical authority to whose examination he or she has submitted himself or herself in accordance with the foregoing provisions to these Regulations; or

(c) to attend any vocational training or industrial rehabilitation course that might be provided, and which, in the opinion of the Board, is appropriate in his or her case.

(2) Every direction given to a claimant or beneficiary requiring him or her to submit himself or herself to medical examination shall be given in writing.

(3) A claimant or beneficiary who, in accordance with the foregoing provisions of this Regulation, is required to submit himself or herself to a medical examination or to medical or other treatment for the relevant injury shall attend at such time and place as may be required.

(4) A claimant or beneficiary shall, as soon as may be practicable, notify the Director of any change in circumstances arising after his or her claim has been made or benefit has been made or benefit has been granted.
which he or she might reasonably be expected to know might affect the continuance of his or her right to any benefit awarded to him or her or to the receipt thereof.

(5) Where a beneficiary entitled to a disablement benefit attends a vocational training or industrial rehabilitation course at the request of the Director, then if the degree of disablement in respect of which the disablement benefit is payable is assessed at less than one hundred per centum, it shall, for the period for which he or she is required by the Corporation to attend such vocational training or industrial rehabilitation, be treated as if it had been assessed at one hundred per centum.

Credited contribution for weeks of employment injury benefit.

84. For every contribution week for the whole of which an insured person has received employment injury benefit or disablement benefit or approved hospital treatment under these Regulations, a contribution shall be credited to that person without actual payment thereof.

I. Hospitalisation & Medical Treatment

Hospitalisation and medical benefit

85.— (1) Hospitalisation and medical benefit shall be in the form of a quarterly payment to the Government for the provision in Saint Lucia, by the Government, of medical services and supplies for insured persons at an approved hospital.

(2) The amount of such quarterly payments shall be mutually agreed upon by the Board and the Government.

(3) The Minister of Health shall fix an equitable allocation of the quarterly payments and decide how it will be apportioned between all approved hospitals.

(4) The quarterly payment made in accordance with this regulation shall cease from the day when the Regulations under the Act, for a scheme of medical insurance, come into operation.

(5) Hospitalisation and medical benefits shall apply only if an insured person has satisfied the conditions stipulated in regulation 32 (b) and (c).

(6) Approved hospitals for the purposes of this regulation shall be every public hospital operating in Saint Lucia or any hospital or clinic incorporated under any law in force and approved by the Minister by Order published in the Gazette.
Remarkable

PART V
PERSONS EMPLOYED ON SHIPS AND AIRCRAFT

Application to persons employed on ships and aircraft

86.—(1) This Part shall apply to persons in insurable employment as masters, members of the sea service on a ship registered in Saint Lucia or as pilots, commanders, navigators and members of the crew of any aircraft registered in Saint Lucia or in any other capacity on board any such ship or aircraft, with the following modifications:

(a) the notice of the accident and the claim for benefit except where the person injured is the master or other person in charge of the ship or aircraft (in these regulations called the “person in charge”) may be given to the person as if he or she were the employer, but, where the accident happened and the incapacity commenced on board the ship or aircraft it shall not be necessary to give any notice of the accident;

(b) in case of the death of the person in charge or of a member of the crew resulting from the relevant accident, the application for death benefit under these Regulations shall be made within three months after news of the death has been received by the claimant; and

(c) where the injured person is discharged or left behind in a foreign country, depositions respecting the circumstances and nature of the injury may be taken by a diplomatic or consular officer of Saint Lucia or any judge or magistrate of that foreign country, and such depositions or certified copies of the depositions shall be admissible in evidence in any proceedings for enforcing the claim.

(2) In this Regulation the word “ship” has the same meaning as in the Shipping Act 1994, No. 11.

PART VI
MISCELLANEOUS

Entitlement to more than one benefit

87.—(1) Where a person is entitled to two or more benefits at the same time, only one benefit shall be payable to such person.

(2) The benefit payable under sub-regulation (1) shall be the one at a higher rate, but where the last mentioned higher benefit ceases to be
payable then an award or reinstatement of a benefit to which such person is entitled may be made.

(3) Notwithstanding sub-regulations (1) and (2) —

(a) a person is entitled to receive two or more disablement benefits at the same time in so far as the sum of the weekly rates of these benefits do not exceed the weekly rate of disablement benefit to which he or she would be entitled for loss of faculty which is assessed at one hundred per centum of the relevant wage applicable in his or her case or of the higher or highest relevant wage where the disablement benefits are assessed on different relevant wages;

(b) any benefit under these Regulations may be paid with funeral benefit.

(4) Nothing contained in this Regulation shall —

(a) preclude payment of employment injury benefit or disablement at the same time as death benefit or survivor’s benefit under these Regulations;

(b) preclude the payment of sickness benefit or maternity benefit with death benefit.

(5) Notwithstanding any provision of these Regulations where any two benefits together do not exceed an amount determinable by the Board such benefits shall be payable.

Benefits payable as grant or periodical payments

88. — (1) Where a question arises regarding one or more benefits which are not allowed to be paid together, and one or more are grants and the rest periodical payment, the benefits payable shall be a periodical payment unless a grant has already been paid.

(2) Subject to sub-regulation (3) on cessation of the periodical payment under sub-regulation (1) which is less in total than the grant, the grant may be paid subject to a deduction therefrom of the total amount of the periodical payment.

(3) Where the period covered by the periodical payment referred to in sub-regulation (2) coincides only in part with the period covered by the grant, the deduction shall not exceed the total amount of the periodical payment for the coincidental period.
(4) Where a grant to which this regulation refers has already been paid, the periodical payment may be made subject to a deduction therefrom of an amount not exceeding twenty percent until the whole amount of the grant, or the amount applicable to the coincidental period, if any, has been deducted or the periodical payment, has ceased, whichever first occurs.

Refund of benefit improperly paid

89.— (1) Where it is found that any person has received any sum by way of benefit to which he or she is not entitled, he or she is liable to repay to the Fund the sum so received.

(2) Where any person is liable to repay any sum received by him or her by way of benefit, that sum may be recovered, without prejudice to any other remedy, by means of deductions from any other benefit to which he or she thereafter becomes entitled.

(3) Any such sum not recovered shall be treated as expenditure on, and charged to the Fund.

Credited contribution

90.—(1) For every contribution period for which an insured person receives any short-term benefit or employment injury benefit, a contribution shall be credited to that person without actual payment thereof.

(2) A contribution credited under sub-regulation (1) shall, subject to these Regulations, be valid for the short contribution condition for short term benefits and employment injury benefits, and shall be at the level of the insured person’s insurable earnings corresponding to or most closely corresponding to that on the basis of which the first benefit had been paid.

Persons abroad

91.— (1) A person shall be disqualified from receiving any benefit for any period during which that person is absent from Saint Lucia, except that —

(a) during such period as the Director may allow, having regard to the particular circumstances of the case, a person shall not be disqualified from receiving short-term benefits or employment injury benefits;
National Insurance Regulations

(b) a person shall not be disqualified from receiving retirement benefit, survivor’s benefit or death benefit by reason of being absent from Saint Lucia;

(c) a person shall not be disqualified from receiving invalidity benefit by reason of being absent from Saint Lucia for such period as the Director may allow, having regard to the particular circumstances of the case.

(2) The Director may arrange payment of any long-term benefit to a person who is entitled to a benefit under these Regulations and who has taken up permanent residence in another country in any case where no reciprocal agreement exists between Saint Lucia and any other country.

Payment of benefit for which person is eligible under regulation 91

92. Any benefit for which a person is eligible by virtue of regulation 91 shall be paid to that person or to such representative acting for and on behalf of the person concerned as may be approved by the Director and the receipt of the person so approved shall be a good discharge to the Corporation and the Fund for any sum so paid.

Persons under-going imprisonment or detention in legal custody

93. A person shall be disqualified from receiving any benefit for any period during which that person is in prison or detention in legal custody except that where the Director is satisfied that the person undergoing such imprisonment or detention, has dependants who immediately prior to such imprisonment or detention were wholly maintained by him or her, the Director may authorise payment to, and in respect of those dependants, of an amount not exceeding one half of the benefit which would otherwise be payable for such period as he or she may allow, having regard to the particular circumstances of the case.

PART VII

MISCELLANEOUS PROVISIONS RELATING TO CLAIMS AND PAYMENTS CLAIMS

Claims, to be in writing

94.—(1) Every claim for benefit shall be made in writing to the Director on the prescribed form or where there is no prescribed form, in such other manner in writing as the Director may accept as sufficient in the circumstances of any particular case or class of cases.
(2) Every prescribed form of claim shall be supplied without charge by the Director.

(3) Where a claim for benefit has been made on a prescribed form other than the form appropriate to the benefit claimed, the claim may, if it contains sufficient particulars, be treated as if it had been made on the appropriate form.

(4) Notwithstanding sub-regulation (3) where a claim for a benefit is made on a prescribed form other than the appropriate form, the Director may require the claimant to complete the appropriate form.

Information to be given

95.— (1) A person who makes a claim for benefit shall furnish such certificates, documents, information and evidence for the purpose of determining the claim as the Director may require, and shall, for that purpose, attend at such office or place as the Director may direct.

(2) A person who makes a claim for benefit shall, in particular, furnish, if required by the Director the following information concerning himself or herself or in respect of the person for whom the benefit is claimed —

(a) his or her identity, date of birth, usual place of residence, occupation and relationship to the claimant;

(b) his or her position in regard to any benefit under the Act, available sources of income and the amounts contributed by any person towards his or her maintenance; and

(c) in the case of a claim in respect of or based on a relationship to an insured person of a wife, husband, widow or a widower, a certificate of the marriage, or proof of registration as beneficiary, together with a declaration signed by him or her and, where appropriate, by the claimant that the information is true to the best of his or her knowledge and belief.

(3) A person who makes a claim for benefit in respect of a child, shall, in particular furnish such certificate relating to the birth of the child and such other information as the Director may require.

(4) A person who makes a claim for funeral benefit shall furnish, if required, the following information:
National Insurance Regulations

(a) a death and burial certificate relating to the deceased;
(b) the estimate or account of the undertaker;
(c) in the case of any corporate body, association or other authority, such particulars relating to the relevant person as may be required by the Director.

(5) A person who makes a claim for survivor’s benefit or death benefit shall furnish, if required by the Director, a death and burial certificate relating to the deceased.

(6) The Director may accept in support of claims and in the absence of the certificate or documents aforementioned —

(a) as proof of kinship or marriage, evidence of a third person or other documentary evidence;
(b) as proof of age, extracts from baptismal records or school records or other evidence as he or she considers satisfactory.

Date of claim

96. For the purpose of any claim for a benefit, the day of receipt of the claim at the office of the Corporation shall be deemed to be the date of the claim.

Defective and incomplete claim

97.— (1) If a claim is defective in any material particular or incomplete at the date of its receipt by the Director, the Director may refer the claim to the claimant and if the form is returned properly completed within one month from the date on which it is so referred, or such other period as the Director may in any special circumstances specify, the claim may be treated as if it had been properly made in the first instance.

(2) Any person who has made a claim for benefit in accordance with these Regulations, may amend his or her claim at any time before a decision has been given on it by notice in writing delivered or posted to an office of the Board, and any claim so amended may be treated as if it had been properly made in the first instance.

(3) Where it appears to the Director that a person who made a claim for benefit may be entitled to some other benefit, any such claim may be treated by the Director as a claim in the alternative for that other benefit.

Time for claiming benefits

98.— (1) The prescribed time for claiming benefits is:
(a) in the case of sickness and injury benefit, not later than three
months from the date of expiration of sick leave;

(b) in the case of maternity benefit, not later than three months after
the date of confinement;

(c) in the case of —

(i) disablement benefit, and increases thereof on account of
incapacity or hospital treatment, or

(ii) invalidity, retirement, survivor’s or death benefit,
the period of three months from the date on which apart from
satisfying the condition of making a claim, the claimant becomes
entitled thereto;

(d) in the case of funeral grant, the period of six months from the
date of death of the deceased;

(e) in the case of medical expenses, not later than three months from
the date on which the relevant expenses were incurred.

(2) Failure to submit a claim within the stipulated time limit shall result
in the loss of the benefit unless it can be shown by the claimant to the
satisfaction of the Director that there was good cause for delay in
submitting the claim, in which case the claimant shall not be disqualified
from receiving any benefit to which he or she would have been entitled if
the claim had been made on the earlier date.

(3) No payment shall be made by way of sickness, maternity,
employment injury (or disablement benefit, or increases of disablement
benefit on account of incapacity or the need for constant attendance or
hospital treatment), invalidity, retirement, survivor’s or death benefit or
medical expenses in respect of any period more than twelve months after
the date on which the claim for the benefit is duly made.

(4) No sum shall be paid by way of a funeral grant if the claim for the
funeral grant is not made within twelve months after the date of the death
of the person in respect of whom the grant is payable.

Claim in advance

99.— (1) Notwithstanding regulation 98, where it has been certified
that a person is incapable of work for the period specified in the certificate,
a claim for sickness or employment injury benefit may, unless the Director
otherwise directs, be made by the person in respect of the period or such
shorter period as the Director may in the circumstances determine, in
either case commencing immediately after the date on the certificate.
(2) Any claim for sickness or employment injury benefit made under sub-regulation (1), may, if it is made on the form containing the certificate be treated as a claim made also in respect of any days in the said period or in any such shorter period, as the case may be.

Payments

Time and manner of payment of benefits other than pensions

100. — (1) Subject to these Regulations, a benefit shall be paid in accordance with an award thereof as soon as is reasonably practicable after such an award has been made by the Director, by means of drafts, cheques or other means payable through the bank, post office, or office of the Corporation, including cash payment at the home of the claimant, if the circumstances of any particular case appears to the Director to render this appropriate.

(2) Payments made under sub-regulation (1) shall be made weekly, fortnightly or monthly but where payment is due for a period covering less than one week, there shall be paid after the end of that period an amount equal to the proportion of the rate of benefit which the number of days in the period, (one day of each week being disregarded), bears to six.

(3) In the case of those benefits payable only by way of lump sum or single payment, payment would be made by means of cheques or other means as appears to the Director to be appropriate in the circumstances of any particular case.

(4) Any benefit payable by way of a single lump sum payment, may be payable by instalments of such amounts and at such times as appears reasonable to the Director in the circumstances of the case, and an appeal shall not be brought against either any decision that such grant shall be payable by installments or the time of payment thereof but any decision may be varied by the Director at any time.

Time and manner of payment of pensions

101. Subject to these Regulations, retirement pensions shall be paid monthly in arrears by means of cheques or at such post office, bank, or office of the Corporation as the Director, after enquiry of the pensioner, may from time to time determine.
Other arrangements for payment of pension

102. Notwithstanding anything contained in these Regulations the Director may arrange —

(a) in any case where the date from which a pension would commence or as from which a change in the rate of pension would take effect is other than a date immediately following the payment date;

(b) in any case where the date from which a pension would cease to be payable is a day other than the payment date for the payment of that pension;

that the pension shall continue to be payable up to but not including the day following such day.

Other times and methods of payment of pension

103. Notwithstanding anything contained in these Regulations, the Director may in any particular case or class of cases arrange for the payment of a pension otherwise than monthly or otherwise than by means of cheques payable to the pensioner.

Extinguishment of right to sum payable by way of benefit which is not obtained within the prescribed time

104.—(1) The right to any sum payable by way of benefit shall be extinguished where payment thereof is not obtained within the period of six months or such longer period as the Director may determine in the circumstances of any particular case, after the date on which the sum becomes payable.

(2) In calculating the period of six months under sub-regulation (1), no account shall be taken of:

(a) any period during which a cheque or bank draft containing the sum is in the possession of the Corporation or any post office or bank at which it is payable other than a period after written notice has been given that the cheque or, bank draft is available for collection;

(b) any period during which the Corporation has, after consideration, represented that a cheque or bank draft containing the sum has not been received, or has been lost, mislaid or stolen;
Information to be given when obtaining payment of benefit

105. Every beneficiary and every person by whom or on whose behalf sums payable by way of benefit are received shall furnish in such manner and at such times as the Director may determine, such certificates and other documents and such information or facts affecting the right to benefit or to receipt thereof as may be required either as a condition on which any sum or sums shall be receivable or otherwise by the Director, and in particular, shall notify the Director in writing of any change in circumstances which he or she might reasonably be expected to know might affect the right to benefit or to the receipt thereof, as soon as reasonably practicable after the occurrence thereof.

Forfeiture or suspension of payment of benefit

106.— (1) If in respect of any incapacity, expected or actual confinement, a person claiming or entitled to sickness, maternity, invalidity, employment injury or disablement benefit or to any increases in any such benefit on account of incapacity, as the case may be —

(a) has become incapable of work through his or her misconduct or negligence;

(b) without good cause behaves in any manner calculated to retard his or her recovery or without good cause fails to answer any officer of the Corporation directed to ascertain whether he or she is behaving in a manner that is calculated to retard his or her recovery;

(c) undertakes work for which remuneration is or would ordinarily be payable;

he or she shall forfeit that benefit for such period as the Director determines.

(2) If, without good cause —

(a) a claimant fails to furnish any information required for the determination of a claim, or any question arising in connection therewith; or

(b) a beneficiary fails to give notice of any change of circumstances affecting the continuance of the right to benefit or to the receipt thereof, or to furnish any information required for the
determination of any question arising in connection with the award; or

(c) a claimant for, or a beneficiary of sickness, maternity, invalidity, injury or disablement benefit, or a claimant for medical expenses fails to comply with any requirement of these Regulations, he or she shall, if the Director so decides, forfeit any benefit claimed in respect of the period of such failure.

(3) If a person who is entitled to any claim or benefit under these Regulations willfully obstructs, or is guilty of misconduct in connection with any examination or treatment to which he or she is required under these Regulations to submit himself or herself, or in connection with any proceedings under the Act for the determination of his or her right to benefit or to the receipt thereof, he or she shall, subject to sub-regulations (4) to (6), forfeit any benefit claimed, for such period as the Director determines.

(4) In any case to which sub-regulations (1), (2) or (3) relates, proceedings on the claim or payment of benefit, as the case may be, may be suspended for such period as the Director determines.

(5) Nothing in this Regulation providing for the forfeiture of benefit for —

(a) failure to comply with the requirements of sub-regulation (1);

(b) failure to comply with the requirements of these Regulations; or

(c) obstruction or misconduct in connection with medical examination or treatment,

shall authorise the disentitlement of a claimant or beneficiary to benefit for a period of more than six weeks on any forfeiture.

(6) A person who would be entitled to any benefit but for the operation of this Regulation shall be treated as if he or she was entitled thereto for the purpose of any rights or obligations under the Act whether of himself or herself or any other person who depends on his or her being so entitled, other than the right to payment of the benefit.

**Obligations of beneficiary to notify change of circumstances**

107.— (1) A person in receipt of benefit shall inform the Director of any change in his or her circumstances affecting his or her continued right to receive such benefit or the rate at which the benefit is payable within one week of the occurrence of the change.
(2) The Director may require any person entitled to a benefit to furnish from time to time documentary evidence in the form set out as Form NC/LC in the First Schedule that he or she is alive and the conditions governing the grant of such benefit continue to be fulfilled, and if such evidence is not given to the Director within the time required, the Board may suspend payment of the benefit until the date on which the evidence is given.

**Person unable to act**

108. — (1) In the case of any person to whom benefit is payable or who is alleged to be entitled or by whom or on whose behalf a claim for benefit has been made, and who is a child or is unable for the time being to act, where no person or authority has been duly appointed by law to have charge of such person or his or her estate, the Director may, upon written application being made to him or her, appoint a person to exercise on behalf of the child or person any right to which he or she may be entitled under the Act and to receive and deal with any sums payable on behalf of such child or person.

(2) Notwithstanding sub-regulation (1) —

(a) any such appointment by the Director shall terminate on the date immediately prior to the date on which the Director is notified that a person or authority has been duly appointed by law;

(b) a person who has not attained the age of eighteen shall not be capable of being appointed to act under this Regulation;

(c) the Director may at any time in his or her absolute discretion revoke any appointment made under this Regulation; and

(d) any person appointed under this Regulation may, on giving the Director one month’s notice in writing of his or her intention to do so, resign his or her office.

(3) Anything required by these Regulations to be done by or on behalf of any child or any person who is for the time being unable to act, may be done by any person or authority duly appointed by law to have charge of that child or person or of his estate or by or to the person appointed under this Regulation to act on behalf of such child or person, and the receipt by a person appointed under this Regulation shall be a good discharge to the Corporation and the Fund for any sum paid, notwithstanding that such person has not attained the age of twenty-one.
Payment of death benefit to person appointed by the Director

109.— (1) On the death of a person who has made a claim for benefit or who is alleged to have been entitled to benefit or in respect of whose death a funeral grant is alleged to be payable, the Director may appoint such person as he or she thinks fit to proceed with or to make a claim for the benefit, and this Regulation shall apply subject to necessary modifications to any such claim.

(2) Notwithstanding sub-regulation (1) in the case of funeral grant a claim may be made by any person specified in sub-regulation (3).

(3) Subject to these Regulations, any sum payable by way of benefit which is payable under an award or on claim proceeded with or made under sub-regulation (1) may be paid or distributed to or amongst persons claiming as personal representatives, legatees, next-of-kin, or creditors of the deceased and these Regulations shall apply to any such payment or distribution.

(4) Notwithstanding sub-regulation (3) —

(a) the receipt by a person who has attained the age of eighteen shall be a good discharge to the Corporation and the Fund for any sum so paid; and

(b) where the Director is satisfied that any such sum or part thereof is needed for the benefit of any person under the age of eighteen, the Director may obtain a good discharge thereof to a person over that age who need not be a person specified in the Regulation who satisfies the Director that he or she will apply the sum so paid for the benefit of the person under the age of eighteen.

(5) Subject to this Regulation, any benefit due to a deceased person, payment of which he or she had not obtained at the date of his or her death, may unless the right thereto was already extinguished at that date, be paid or distributed to or amongst such persons as are mentioned in sub-regulation (3).

(6) For the purposes of regulation 104 the period of six months shall be calculated from the date on which the sum was received by any such person, and not from the date it was received by the deceased and for those purposes the reference in regulation 103 to the date on which the sum became payable, shall be construed as a reference to the date of application to the Corporation made in accordance with these Regulations.
Medical Certificate

Evidence of incapacity to be given

110.— (1) Every person claiming sickness benefit, or invalidity benefit shall furnish evidence of incapacity in respect of the day or days for which the claim is made by means of a certificate given by a registered medical practitioner in accordance with the provisions for medical certification set out in Part A of the Fourth Schedule in the Form appropriate to the circumstances of any particular case or class of cases.

(2) Every woman by whom or on behalf of whom a claim for maternity benefit is made shall furnish evidence:

(a) where the claim is made in respect of expectation of confinement, that she is pregnant and the stage of her pregnancy; or

(b) where the claim is made by virtue of the fact of confinement, that she has been confined,

by means of a certificate given in accordance with the provisions for certification set out in Part C of the Fourth Schedule on the appropriate form as set out in Part B of that Schedule or by such other means as the Director may accept as sufficient in the circumstances of any particular case or class of cases.

(3) For the purpose of this Regulation the expression “certificate” shall not include a certificate which is given only by the person whom or on whose behalf the claim is made.

PART VIII

Appeals

111.— (1) A person dissatisfied with the decision of the Director in respect of —

(a) his or her liability to pay any contribution under the Act;

(b) the amount of contribution due and payable by him or her;

(c) any contribution due by him or her under the Act which has not been paid;

(d) his or her entitlement to a benefit under the Act; or

(e) the fulfilment by him or her of any prescribed conditions of entitlement of any benefit under the Act;
may within one month from the date of the Director’s decision appeal to the Board against that decision.

(2) Notice of appeal shall be addressed to the Chairman of the Board and shall be in the form set out as Form APP1 in the First Schedule.

(3) A copy of the notice shall also be addressed to the Director.

(4) The Chairman of the Board shall not later than fourteen days after receipt of a notice of appeal as provided in this Regulation, summon a meeting of the Board for the purpose of hearing the appeal.

(5) The Board shall be duly constituted for the purpose of hearing appeals if any four members of the Board excluding the Director are present.

(6) On receipt of a copy of a notice of appeal the Director shall prepare and submit to the Board a memorandum containing the reasons for his or her decision, any document considered by him or her and evidence taken in making his or her decision.

(7) The Director and the appellant shall both be entitled to be present at the hearing of the appeal.

(8) The Director shall, if required by the Board, assist with any further information which the Board requires.

(9) The Board shall hear evidence on oath which it considers to be relevant and useful from the appellant and from any other person presented by the appellant, and may also summon the employer of the appellant if it considers it necessary to do so.

(10) The decision of the Board shall be made by no fewer than four members, excluding the Director who shall not sit as a member of the Board.

(11) The Board may affirm or reverse the decision of the Director or make such order as appears to the Board, that the justice of the case demands.

PART IX
OFFENCES

Offences and penalties

112. — (1) Any employer who without reasonable excuse —

(a) fails to obtain, complete or forward any registration document as required under these Regulations;
(b) fails to complete or submit any monthly remittance statements as required under these Regulations;

(c) fails or refuses to make available to an Inspector the duplicate copy of any monthly schedule of contributions or any monthly contribution remittance statement or any deduction in accordance with these Regulations;

(d) fails to deliver to any of his or her employees any document he or she is required to deliver under these Regulations;

(e) fails to match the employees contribution with the employer’s portion;

(f) deducts the full composite sum from the wages of an employee; or

(g) fails to comply with any requirements under these Regulations, commits an offence and is liable on summary conviction to a fine not exceeding fifty thousand dollars or to imprisonment for a term not exceeding six months, or to both such fine and imprisonment.

(2) Any employee who without reasonable excuse —

(a) fails to make his or her signature or mark as required by these Regulations; or

(b) fails to provide his or her employer with any information required by these Regulations,

commits an offence and is liable on summary conviction to a fine not exceeding two thousand dollars or to imprisonment for a term not exceeding six months, or to both such fine and imprisonment.

(3) Any employer or employee convicted of any offence under subregulation (1) or (2) shall be ordered by the Magistrate to comply with the respective provisions within twenty four hours of such conviction or face a term of imprisonment not exceeding six months for disobedience to such order.

PART X
FINANCIAL AND ACCOUNTING REGULATIONS

113. — (1) In these Regulations —

“expenditure” means payment out of the Fund in accordance with section 3(2) of the Act.

“income” means payments into the Fund in accordance with section 3(1) of the Act.
National Insurance Regulations

“reserve” means any one of the reserves constituted under these Regulations.

Benefit branches

114. —(1) Subject to these Regulations, benefit provided under the Act shall be grouped into separate benefit branches as follows —

(i) long-term benefits branch, comprising retirement, invalidity and, survivor’s benefits;

(ii) short-term benefits branch, comprising sickness, maternity, employment injury, funeral and hospitalization benefits;

(2) Notwithstanding the foregoing, all other funds and accounts falling under the control of the Board shall be established and maintained separately in accordance with Regulations 123 to 143.

Financial year

115. The financial year for the purpose of the budget and accounts shall be the year ending on the thirtieth day of June.

Submission of estimates

116. —(1) Before the thirtieth day of April of each year, the Director shall, in respect of each of the branches, funds and accounts specified in these Regulations, submit to the Board for its approval estimates of income and expenditure expected to be received and incurred in the financial year beginning on the first day of July next following, including administrative expenditure, which shall be shown separately.

(2) These estimates shall be accompanied by a memorandum giving full explanations of any variations of the amounts expected to be received or spent as compared with the corresponding amounts included in the approved estimates in the current year, and of any receipts or expenditure of a type not included in the approved estimates in the current year. The memorandum shall also state how it is proposed to finance administrative expenditure and expenditure of an extra-ordinary nature.

(3) The Board may add to or otherwise alter the heads under which the estimates are to be submitted to it, and may require information
National Insurance Regulations

relating to the make up, calculations or reasons for inclusion of any items in the estimates as submitted.

(4) The estimates submitted in accordance with this regulation, as and when approved by the Board, shall show the income which is expected to be collected and shall set limits to the expenditure which may be incurred under each of the relevant heads. Expenditure shall not be incurred in any head in excess of the limit set for that head without the prior approval of the Board; but the Director shall have the authority to incur expenditure in excess of any head or heads, where such expenditure was necessary and unavoidable and was in accordance with the provisions of the Act, and the Director shall be personally accountable for such expenditure pending approval by the Board.

(5) If the budget estimates have not been approved by the Board before the beginning of the financial year to which they relate, the Director shall be authorized by the Board to incur expenditure under the various heads subject to such conditions as it may deem fit to impose until such time as the budget is duly approved.

Financial authorities of staff

117. The Director shall draw up a list which shall contain the names of such of the officers of the Board as, from time to time, shall be authorized by the Board to approve payment vouchers, sign cheques approve accounting transfers or exercise other similar functions, and the list may specify such limits, financial or otherwise, as the Board may approve, within which each officer whose name appears on the list shall be authorized to exercise the function or functions allotted to him.

Fidelity bond

118. Insurance by way of fidelity bond or other similar security may be arranged by the Board giving cover, up to such amounts as may be approved by the Board, against risk of defalcation by the cashiers, store-keepers or other custodians of the property of the Board.

Loss deficiencies and other payments

119. If a loss, damage, overpayment or destruction of cash, equipment or other assets of the Corporation, occurs, it shall be within the discretion of the Board to approve the write-off of the asset involved; but when the Board is satisfied that the loss, damage, overpayment or destruction is due to the fault or negligence of an officer, the Board, in
the absence of a satisfactory explanation, shall direct that the officer be surcharged with the whole or such part of the value of the loss as it shall deem appropriate in the circumstances of the particular case. The amount of the surcharge shall be deducted from any moneys owing by the Corporation to the officer over such period as the Director may determine and shall be credited to the revenues of the Corporation.

Unserviceable assets

120. If in the opinion of the Director an asset becomes unserviceable, redundant or uneconomical to upkeep, it shall be within his or her discretion to dispose of it, in such manner, including sale or destruction as he or she thinks fit. The asset thus disposed of shall be written-off the inventory and the proceeds of any sale credited to the revenues of the Corporation.

Financial audit

121. The Director shall ensure that adequate arrangements shall be made for the internal audit of the financial procedures, benefit payments and the maintenance and operation of the accounts of the Fund and the principal functions of the internal audit may be specified in Financial and Accounting Rules, orders or administrative directions issued by the Director.

Periodical reports to the board

122. — (1) The Director shall submit to the Board periodical reports on the financial situation of the Fund with reference to income and expenditure at such intervals and in such form as the Board may direct, together with any comments or remarks that may be called for.

(2) The Director shall submit to the Board any report concerning fraud, administrative abuse and serious irregularities.

Accounting systems

123. The Director shall open accounts for each of the heads under which the estimates of income and expenditure, as approved, have been arranged, and such other heads or sub-divisions of heads as may be necessary, and shall record therein, by the double-entry system of book-keeping the financial transactions of the Fund.
Quarterly accounts

124. At the end of each quarter, the accounts as a whole shall be balanced and income and expenditure statements for the quarter together with projections to the end of the year shall be prepared and submitted to the Board not later than the twenty-fifth day of the month following that quarter.

Annual accounts

125. At the end of each financial year the account shall be balanced and summary accounts and balance sheet shall be prepared, namely —

(i) a consolidated income and expenditure account for the Fund as a whole;

(ii) a statement of cash flows;

(iii) the income and expenditure account in respect of each benefit branch, fund and account under the control of the Board;

(iv) a balance sheet for the Fund as a whole;

(v) any other account or statement which the Board may from time to time request to be included, the details of which shall be specified in the financial and accounting orders.

Statement of cash flows

126. The statement of cash flows shall reflect funds provided from or used in operations separately from other sources or uses of funds. Unusual items which are not part of the ordinary activities of the Board shall be separately disclosed in the statement. The income and expenditure account shall show the income and expenditure recorded during the financial year and the balance sheet shall show the liabilities and assets as at the end of the financial year.

Preparation of accounts and balance sheets

127. The accounts and balance sheet specified in these Regulations shall be prepared as soon as practicable after the end of the financial year and shall be submitted to the Board not later than thirtieth day of September in the year following the financial year, but if the Board is satisfied that for certain practical reasons the accounts could not be submitted to it by that date, it may extend that date by a period not exceeding thirty days.
Distribution of income of the Fund

128. All sums collected as contributions shall be distributed among the benefit branches in such proportions, as the Minister shall, on the recommendation of the Board and after consultation with an actuary, determine by Order or Regulations, but a sum collected as contribution which is payable in respect of a specified branch, fund or account shall be allocated to the branch, fund or account of which such benefit forms part with due regard to the provisions of this regulation.

Income from investment of reserves

129. The income from the investment of the reserves shall be allocated in such proportions as the total reserves bears to separate branch reserves at the beginning of the financial year.

Unidentified income

130. All other income to the Fund which cannot be identified shall be allocated as the Board may from time to time direct.

Distribution of expenditure

131. The expenditure on each benefit branch, fund or account shall be ascribed to that benefit branch fund or account.

Administrative expenditure

132. The administrative expenditure of the Fund shall be distributed among the benefits in such proportions as the Board may direct.

Unallocated expenditure

133. All other expenditure which cannot be specifically allocated shall be distributed as the Board may direct.

Reserves to be constituted

134. A short-term benefit reserve shall be constituted by transferring thereto annually the excess of income over expenditure of the short-term benefit account, and any amount in excess of the expected expenditure for the ensuing financial year shall be transferred to the long term benefit reserve.

Long term benefit reserve

135. A long-term benefit reserve shall be constituted by transferring thereto annually the excess of income over expenditure of
the long-term benefit account, together with the excess amounts from the short term benefit reserve which is over the expected expenditure for the ensuing twelve months.

Other reserves

136. The Minister on the advice of the Board, may by Regulations constitute other reserves if and when this becomes necessary.

Minimum sums of reserves to be maintained by the board

137. The Board shall ensure that minimum levels of reserves are maintained to meet any unforeseen or abnormal expenditure which the current income may not be sufficient to cover, but where it is anticipated that both the reserve and the current income for any benefit branch will become insufficient to meet the current expenditure, actuarial advice shall be sought in accordance with the Act.

Audit of accounts

138. The Board shall require the Director to produce the accounts and balance sheet to the auditor appointed under section 22(1) of the Act on or before the thirtieth day of August following the close of the financial year in which they relate; but in the case of an extension of time the Board may extend the date by a period not exceeding thirty days.

Accounts to be audited

139. The Director shall submit to the auditor all accounts required for the purpose of the audit and any other documents, information or explanation which the auditor may require for that purpose.

Auditor's Report

140. Subject to section 22 of the Act, the auditor shall perform the audit of the accounts prescribed by regulation 125 in accordance with international accounting standards, and shall submit in accordance therewith an auditor's report to the Board.

Submission of audit finding

141. Without limiting the generality of regulation 145 should the audit prescribed thereby reveal —

(i) any material impropriety or irregularity in the expenditure, in the recovery of moneys due to the Fund or in the accounts under the control of the Board; or
(ii) any loss or waste of money or other property owned by or
vested in the Board which has been caused by neglect or mis-
conduct,

the auditor shall submit to the Board a separate statement, if necessary,
detailing such audit findings.

**Director to report to Minister**

142. The Board shall forthwith require the Director to remedy any
defect or irregularity pointed out by the auditor, and shall determine
responsibility therefor and report to the minister on the action taken
thereon.

**Powers of Director**

143. The Director should have power to make administrative,
financial and accounting orders for the effective implementation of these
Regulations.

**Revocations**

144. The following Regulations are revoked —

(a) Worker’s Compensation Regulations 1964, No. 14;

(b) National Provident Fund Regulations 1972, No. 30; and

(c) National Insurance Regulations 1984, No. 37.

**Validation of actions**

145. Any action done by the Board or its servants or agents
pursuant to the provisions of these Regulation, prior to the publication of
the Regulations or the Gazette is hereby validated and given the force of
law as from the 1st day of January, 2001.

**Commencement**

146. These Regulations shall be deemed to have come into force
National Insurance Regulations

FIRST SCHEDULE

ARRANGEMENT OF FORMS

<table>
<thead>
<tr>
<th>FORM</th>
<th>Description</th>
<th>Regulation</th>
</tr>
</thead>
<tbody>
<tr>
<td>R 1</td>
<td>Application Form for Registration by Employer</td>
<td>3 (1)</td>
</tr>
<tr>
<td>R 3</td>
<td>Employed persons application for registration</td>
<td>3 (2)</td>
</tr>
<tr>
<td>CF 1</td>
<td>Change of Address</td>
<td>3 (4) (a)</td>
</tr>
<tr>
<td>CF 2</td>
<td>Cessation of Employment</td>
<td>3 (4) (b)</td>
</tr>
<tr>
<td>C 2</td>
<td>Contribution Remittance Form</td>
<td>8</td>
</tr>
<tr>
<td>C 3</td>
<td>Monthly Schedule of Contributions</td>
<td>9 (1)</td>
</tr>
<tr>
<td>SE1</td>
<td>Self Employed Persons Application for Registration</td>
<td>12 (2)</td>
</tr>
<tr>
<td>VC 1</td>
<td>Application for registration as Voluntary Contributor</td>
<td>12A (6)</td>
</tr>
<tr>
<td>SB 2</td>
<td>Claim for Sickness Benefit</td>
<td>31</td>
</tr>
<tr>
<td>Inv. B1</td>
<td>Claim for Invalidity Benefit</td>
<td>38</td>
</tr>
<tr>
<td>MB1</td>
<td>Claim for Maternity Allowance and Grant</td>
<td>44 (1)</td>
</tr>
<tr>
<td>MB2</td>
<td>Claim for Maternity Grant</td>
<td>44 (2)</td>
</tr>
<tr>
<td>RB 1</td>
<td>Claim for Age Benefit</td>
<td>58 (1)</td>
</tr>
<tr>
<td>NI/LC</td>
<td>Life Certificate</td>
<td>58 (2)</td>
</tr>
</tbody>
</table>
FORM FB 1
Claim for Funeral Benefit  Regulation 61 (3)

FORM EIB 1
Notice of Employment Injury  Regulation 64

FORM EIB 2
Claim for Employment Injury Benefit  Regulation 66

FORM DB 1
Claim for Disablement Benefit  Regulation 70 (2)

FORM APP1
Notice of Appeal  Regulation 112 (2)

TABLE I
Wage Bands for Self Employed Contributors  Regulation12 (8)

TABLE II
Qualifying No. of Months for Pensions  Regulation 35

TABLE III
Insurable Earnings on Income in Excess of $36,000 per Annum  Regulation 36

TABLE IV
Early Retirement Pension Formula  Regulation 55 (2)

TABLE V
Amount of Funeral Grant  Regulation 61 (2)
APPLICATION FOR REGISTRATION BY EMPLOYER

A. TO BE COMPLETED BY ALL EMPLOYERS

1. Name of Owner/Trustee: ............................................................................................................


3. Trade of Business Name: ..........................................................................................

   (If different from 1 above)

   (If Business is registered a Copy of Certificate of Registration must be produced)

4. Name of Company: ..............................................................................................

   (A copy of Certificate of Incorporation, Notice of Directors and
   Notice of Registered Office must be produced)

5. Postal Address: ............................................................................................................

6. Location of Business: ......................................................................................................

7. Nature of Business: ..............................................................................................

   (Indicate major activity)

8. Number of Employees: ..............................................................................................

9. Business Telephone Number: ......................................................................................

10. Business Fax Number: ......................................................................................................

11. E-mail Address: ..............................................................................................................

12. Previous Business Owned: ..............................................................................................

13. Name of Associated Companies: ......................................................................................

14. Location of Branches/Divisions: ......................................................................................

B. TO BE COMPLETED FOR ALL EXTERNAL COMPANIES

1. Name of Head Office/Parent Company: ..............................................................................

2. Jurisdiction of Incorporation: ..............................................................................................

3. Address of registered Office

   (a) Local ..............................................................................................................................

   (b) External ............................................................................................................................

   Name and Position of Applicant: ..............................................................................................

   (Please Print)

   Signature of Applicant: .................................................. Date: ......................................

* Where the application is made in respect of domestic employment the residence address should be given and the nature of business should be shown as “household”.

---

National Insurance Regulations

FORM R1
(Reg. 3 (1))

FOR OFFICE USE ONLY
REGISTRATION NO.
APPLICATION FOR REGISTRATION

DO NOT COMPLETE THIS FORM IF YOU HAVE COMPLETED ONE BEFORE.

(USE BLOCK LETTERS)

Name ................................................................................................................................
Surname Other names
Also known as (alias) ...................... (If married give maiden name)......................
Date of Birth   (Day)...................(Month)...............................(Year)....................
Place of Birth ........................ Nationality ......................... National Reg. No. ..............
Passport No. ............... Place of Issue .................... Date of Issue ................
Address ............................................................................................................................
District .............................. Occupation .................................................................
Purpose of Registration .............................................................. Tel #........................

Mark with X as Appropriate

<table>
<thead>
<tr>
<th>Sex of Applicant</th>
<th>Married</th>
<th>Single</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>Widowed</td>
<td>Widow</td>
</tr>
<tr>
<td>Female</td>
<td>Separated</td>
<td>Divorced</td>
</tr>
</tbody>
</table>

Spouse Name.............................................................
Date of Marriage ...........................................................
Signature of Applicant .........Date...........
(Witnessed by an Employee of the NIC)
Signature of Witness .........Date...........

THIS SECTION MUST BE COMPLETED BY EMPLOYER

Name of Employer.............................................................
Registration Number of Employer .............................................................
Address of Employer .............................................................
Nature of Business .............................................................Sector .....................................
Date of Commencement of Employment .............................................................
Signature of Employer or His Representative ......................... Date ....................

Notes
1. Return this Form as soon as it is completed with Birth Certificate or Passport.
2. No Employee should be Employed without a National Insurance Card.
FORM CF 1
(Reg 3 (4)(a)

CHANGE OF ADDRESS
(EMPLOYER OR EMPLOYER’S REPRESENTATIVE
TO COMPLETE IN BLOCK LETTERS)

Business Name ....................................................................................................................
Registration # : ..............................................................

New Address :
Business Address ..............................................................................................................
............................................................................................................................................
Postal Address : (if different) ...........................................................................................
............................................................................................................................................
............................................................................................................................................

Authorised Signature  Name (Please Print)  Position

..........................................................  ..........................................................  ..........................................................

Date

--------------------------------------------------------------------------------------------------------
FOR OFFICIAL USE :

..........................................................  ..........................................................  ..........................................................

Updated by Customer Service Clerk

..........................................................  ..........................................................

Date
FORM CF 2  
(Reg. 3 (4)(b)

STATEMENT FROM EMPLOYER TO CONFIRM CESSATION OF EMPLOYMENT

Employer’s Name ______________________________________________________

Registration No. ___________________________ Date ________________________

The Director  
National Insurance, Castries  

Dear Sir/Madam

I/We hereby inform you that there was/will be a cessation of employment in my/our  
business from ______________________________

I/We will resume/resumed employment by/on _________________________________

Reasons for cessation

Yours sincerely

____________________________________  ________________________  _______________
Director/Manager  
(Please Print Name)  
Employer Signature & Stamp  
Date

FOR OFFICIAL USE ONLY

To Be Completed By An Inspector  
To Be Completed By Compliance Clerk

Wage Records Examined: Yes [ ]  No [ ]  Code Assigned [ ]

If No, Please state method of verification: ...........

.........................................................................................
Name

Other Comments .................................................................

.........................................................................................
Signature

.........................................................................................
Date

Inspector’s Signature  
Date

Review 1

Inspectors comments/verification performed (to be completed at closure date or end of dormancy period)

Recommendation:  
Code Assigned [ ]

Name ..................................................

Inspector’s Signature ........................................... Signature ............................................

Date..................................................................... Date...................................................

Review 2

Inspectors comments/verification performed (to be completed at closure date or end of dormancy period)

Recommendation:  
Code Assigned [ ]

Name ..................................................

Inspector’s Signature ........................................... Signature ............................................

Date..................................................................... Date...................................................
CONTRIBUTIONS REMITTANCE FORM

This form with a remittance for the total contributions due in __________ must reach the office not later than seven days after the end of the month for which it is due.

EMPLOYER’S REG. NO. ____________________________

Name of Employer ______________________________________________________

Address of Employer ___________________________________________________

I certify that the amounts shown below represent the total contributions due and payable and which are shown on the Form C3.

No. of Employees ______________________________________________________

Contributions for month ending ____________________ $_____________________

1.25% surcharge for late remittance $  ____________________

(If Applicable)

Total $ ____________________

Signature ____________________________ Date_________________

_______________________________________________________________________

FOR OFFICIAL USE ONLY

Checked by __________________________________________

Date ________________________________________________

Posted to Employer’s ledger by __________________________

Verified by _________________________ Date ____________

Contributions due and payable in ______________________

(State month)
### MONTHLY SCHEDULE OF CONTRIBUTIONS

**SCHEDULE OF CONTRIBUTIONS FOR MONTH OF**

**TO BE SUBMITTED WITH REMITTANCE FOR TOTAL CONTRIBUTIONS DUE IN**

**TO REACH NIC OFFICE NOT LATER THAN 7 DAYS AFTER END OF MONTH**

<table>
<thead>
<tr>
<th>EMP. NIC No.</th>
<th>Employee Name</th>
<th>Contribution</th>
<th>EMP. NIS No.</th>
<th>Employee Name</th>
<th>Contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**DELETE AS NECESSARY**

| A. Total carried forward to next sheet |
| B. Total for which payment is sent |

Please make note of the following:

1. If the N.I.C Number for any employee is incorrect or missing, please insert the correct number.
2. Insert the Total Contribution to be paid on behalf of each employee. This is twice the amount deducted from his/her salary.
3. The Grand Total on this form must equal the value of your payment. Return this form to the N. I.C Office at the end of every month.
4. Penalty fee of 1.25% will be charged for late submission of Contribution Payment.
5. Delete the name and number of persons no longer employed.
6. Add NIC Number and full name of any new employees.
7. Return white copy of this form to NIC Office.

I CERTIFY THAT THE AMOUNTS SHOWN REPRESENT TOTAL CONTRIBUTIONS DUE AND PAYABLE.

___________________________ ___________
Signature and Stamp of Date
Employer/Agent

FOR OFFICIAL USE ONLY

RECEIVED: DATE____________________ INT_________
ENTERED: DATE____________________ INT_________
VERIFIED DATE____________________ INT_________
FORM SE1
(Reg. 12 (2) )

SELF-EMPLOYED PERSONS APPLICATION FOR REGISTRATION

In accordance with regulation of the National Insurance Regulations 2001 I hereby apply for registration as a self-employed person and submit hereunder the following relevant particulars:

1. Name_____________________________________________________________
   Surname Other Names

2. Address and Telephone Nos.___________________________________________

3. Date of Commencement of Trade or Business Day Month Year
   ______________ _____________ _____________

4. Declared Earnings for Year ended 31st December $______

5. Details of Earnings ___________________________________________________
   ___________________________________________________________________

6. Nature of Trade or Business ___________________________________________
   ___________________________________________________________________
   ____________________________ ____________________________
   Signature of Applicant Date

7. Annual Insurable Earnings for the year ending 31st December $______

8. Assessed Annual Insurable Earnings $____________________________

9. Assessed Monthly Contribution $____________________________
   ____________________________ ______________________________
   Date Signature of Insured Person

9. Application and Assessment Approved By : _____________________________
   Signature of National Insurance Corporation Official
   ____________________________
   Date
APPLICATION FOR REGISTRATION – VOLUNTARY CONTRIBUTORS

Name........................................................................................................................................
Also known as (alias)........................................................................................................................
National Insurance Number............................................................................................................
Sex (Male/Female) ........................................... Marital Status (Married/Single).....................
Date of Birth (Day/Month/Year)............................. Nationality ..........................
*(Birth Certificate or Passport to be submitted)*
Address.......................................................... Country of Residence..........................
Name of Last Employer .................................................................
Purpose of Registration .................................................................

Signature of Applicant Date

Where the claimant cannot sign, a responsible person (Lawyer, J.P., Doctor, Senior Civil Servant on permanent establishment, etc.) should witness the Mark by signing below.

............................................................. ..................................................
Name of Witness (please Print) Signature

.............................................................. .....................................................
Occupation Date

FOR OFFICIAL USE ONLY

(i) Number of Contributions paid......................... (minimum of 60 months)
(ii) Date of last contribution .................................................................
(iii) Average annual wage for 20___ and 20____ $........ (for last 2 yrs worked)
(iv) Contribution required per month $......... (min of 5%, max of "10% of (iii) above)

Signed .............................................................
FORM SB2
(Reg. 31)

CLAIM FOR SICKNESS BENEFIT

I, the undersigned, hereby apply for sickness benefit under the National Insurance Corporation Act, 2000 and furnish a Medical Certificate, together with the following particulars:

My full name is ____________________________________________________________

(Please Print)

My Nat. Ins. No. is _______________________________________________________

Date of Birth ___________________________________________________________

My Address is ___________________________________________________________

Tel. No. _______________________________________________________________

When I became ill I was employed by _______________________________________

My occupation was _____________________________________________________

I finished working there on _____________________________________________

I understand that a False Statement or Misrepresentation makes me liable to a penalty under the National Insurance Corporation Act, 2000.

Date ________________ ___________________________ Signature or Mark of Claimant

NOTE: Where the Claimant cannot sign, a responsible person (Lawyer, J.P., Doctor, Senior Civil Servant on permanent establishment, etc.) should witness the Mark by signing on the line below.

Witness to Mark _______________________________________________________

Profession or Occupation _______________________________________________

Address _______________________________________________________________

Date ________________ _________________________________________________

TO BE COMPLETED BY EMPLOYER:

1. Name of Employer and Registration No. __________________________________

2. Tel. No. ______________________________________________________________

3. The above named employee has been absent from work continuously since ______ on account of _____________________________________________________________

4. This Employee has been/will be paid wages/salary at the rate of ______ per week/month, during the period of absence from work up to and including ______

(Insert last date from which wages/salary will be paid if absence continues)

I certify that the above statements are true to the best of my knowledge and belief and I assume full responsibility as to their correctness. I also undertake to notify the National Insurance Corporation as soon as possible, of the return of the employee to my employ.

Date ________________ Signature _____________________________

Print Name ___________________________

Position ______________________________

Stamp _______________________________
MEDICAL CERTIFICATE – SICKNESS

IN CONFIDENCE TO:

Mr./Mrs./Miss____________________________________________________

(Print Name)

I______________________________________________________________ a duly

Qualified Registered Medical Practitioner, hereby certify that in my opinion you
were at the time of my examination suffering from:

________________________________________________________________

________________________________________________________________

As a result of this illness you will

(1) Remain incapable of work for a period of ________ days commencing on

______________________________________________________________

(2) You will be fit to resume work today/tomorrow/on __________________

Any Other Remarks by Doctor ________________________________________

________________________________________________________________

Doctor’s Name _____________________________________________________

(in Block Letters)

Doctor’s Signature_____________________ Date ______________________

Address __________________________________________________________

________________________________________________________________

Tel. No. ____________________________________________________________
CLM FOR INVALIDITY BENEFIT

I hereby apply for Invalidity Benefit under the National Insurance Corporation Act, 2000 and furnish a medical certificate and other supporting documents together with the following particulars:

1. My full name is _____________________________________________________
   (Print Name)
2. Occupation _________________________________________________________
3. My Nat. Ins. No. is ___________________________________________________
4. My date of birth is ___________________________________________________
5. My address is _______________________________________________________
6. My Tel. No. is _______________________________________________________
7. My last/present Employer’s name and address were/are
   Name of Employer ___________________________________________________
   Address ___________________________________________________________
   Tel. No. ___________________________________________________________
   Period of Employment _______________________________________________
8. The Name and Address of the last Doctor who examined me is/was:
   Name of Doctor _____________________________________________________
   Address of Doctor ___________________________________________________
   Tel. No. ___________________________________________________________

ANSWER ALL QUESTIONS

(a) From what date have you been continuously incapable of work? _____________
(b) What is the nature of your illness or disease? ____________________________
(c) Are you now receiving sickness or any other benefit? ______________________
(d) If so, from what date have you been receiving such benefit? ________________

I declare that the foregoing information is true in all particulars. I understand that a false statement or misrepresentation makes me liable to a penalty under the National Insurance Corporation Act, 2000.

If unable to sign, mark X and have it witnessed by a responsible person (Lawyer, J.P., Doctor, Senior Civil Servant on permanent establishment, etc.)

<table>
<thead>
<tr>
<th>Date</th>
<th>Signature or mark of Claimant</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Witness to mark _______________</td>
</tr>
</tbody>
</table>
|      | Profession or Occupation _______
|      | Address _______________________
|      | Date _________________________|
MEDICAL CERTIFICATE OF PERMANENT INCAPACITY FOR WORK

(To be completed by a Registered Medical Practitioner)

To: Mr./Mrs./Miss ________________________________________________
(Print Name)

I hereby certify that on ______________________________________200

I examined you and found that you are suffering from__________________

(state nature of disease or bodily or mental disablement)

A disablement which is likely to remain permanent.

In my opinion you are likely to remain permanently incapable of work as a result of this
disablement. Yes No (Tick appropriate box)

Give reasons for Claimant’s condition:__________________________________

____________________________________________________________________

____________________________________________________________________

Signature _____________________________

Name ________________________________ (Please Print)

Address ______________________________________

Date _________________________________

Tel. No. _______________________________

NOTE
For purposes of a “benefit” under the National Insurance Regulations 2000 the term
“Invalid” means a person incapable of work as a result of a specific Disease or Bodily or
Mental disablement which is likely to remain permanent, and the term “disablement”
means a loss of capacity for any of the ordinary activities of life.
CLAIM FOR MATERNITY ALLOWANCE AND GRANT
(In accordance with the National Insurance Corporation Act, 2000).

I hereby apply for Maternity Benefit under the National Insurance Corporation Act, 2000, and furnish a Certificate of Expected/Actual Confinement, together with the following particulars:

My full name is _______________________________________________________
(Print Name)

My Nat. Ins. No. is _____________________________________________________

My address is _________________________________________________________

My Tel. No. is _________________________________________________________

My Date of Birth is_____________________________________________________

I am/was employed by__________________________________________________

I last worked there on___________________________________________________

The period for which I claim benefits is from_____________ to ________________

I do not expect to receive any wages or salary from my Employer during my absence from work. I will be given _________________ weeks Maternity Leave, from__________________ to ________________ during which period I will be paid _________________ per week/month.

I understand that a False Statement or Misrepresentation makes me liable to a Penalty under the National Insurance Corporation Act, 2000.

__________________________ _____________________________
Date Signature or Mark of Claimant

NOTE: Where the Claimant cannot sign, a responsible person (Lawyer, J.P., Doctor, Senior Civil Servant on permanent establishment, etc.) should witness the mark by signing on the line below.

Witness to Mark________________________
Profession or Occupation_________________
Address______________________________
Date_________________________________

TO BE COMPLETED BY EMPLOYER:

1. Name of Employer and Registration No. _________________________________

2. Tel. No. ____________________________________________________________

3. The abovenamed employee has been absent from work continuously since_______ on account of_________________________________________________________

4. This Employee has been/will be paid wages/salary at the rate of_____________ per week/month, during the period of absence from work up to and including_______

   (Insert last date from which wages/salary will be paid if absence continues)

I certify that the above statements are true to the best of my knowledge and belief and I assume full responsibility as to their correctness. I also undertake to notify the National Insurance Corporation as soon as possible of the return of the employee to my employ.

Date ______________________ Signed _______________________________

Employers Signature

Print Name ___________________________
Position ______________________________
Stamp ________________________________
MEDICAL CERTIFICATE OF EXPECTED/ACTUAL CONFINEMENT

(TO BE GIVEN BY A REGISTERED MEDICAL PRACTITIONER OR REGISTERED MIDWIFE)

(A or B to be completed as appropriate)

To:
M__________________________________________
(Print Name)

A. EXPECTED CONFINEMENT

I certify that I examined you on__________________________ and that in my opinion you may expect to be confined on the __________ day of__________________________, 200_________

Any other Remarks by Doctor or Midwife ____________________________

________________________________________________________________________

B. ACTUAL CONFINEMENT

I certify that I attended to you during your confinement which took place at___________

__________________________ on the __________ day of__________________________

And that you delivered: Male/Female _______ ________

CHILDREN DEAD

Name of Doctor or Midwife ______________________________________________
(Block Letters)

Signature and Stamp ____________________________________________________

Address_______________________________________________________________

Tel. No._____________________________

Date________________________________
FORM MB 2
(Reg. 44(2))

CLAIM FOR MATERNITY GRANT
(For Claims Based on Contribution Record of Husband)

I hereby claim Maternity grant on my husband’s/common law husband’s contribution and furnish a Certificate of Confinement and marriage certificate where applicable together with the following particulars:

My full name is _______________________________________________________
(Block Letters) Surname Other Names

My Nat. Ins. No. is _____________________________________________________

My Date of Birth is_____________________________________________________

My Tel. No. is _________________________________________________________

My Address is _________________________________________________________

My Husband’s/Common Law Husband’s Name is_____________________________

His N.I.C. No. is ________________________________________________________

His Address is _________________________________________________________

He was/is employed by _________________________________________________

His Occupation is _______________________________________________________

His Employer’s Address is ________________________________________________

I hereby declare that I have lived with the said Mr _________________________ as his wife/common law wife from the ______________________ day of ______ 200___

__________________________ _____________________________
Date Signature Mark

NOTE: Where the Claimant cannot sign, a responsible person (Lawyer, J.P., Doctor, Senior Civil Servant on permanent establishment, etc.) should witness the mark by signing on the line below.

Witness to Mark__________________
Profession or Occupation_________________
Address____________________________
Date______________________________
CLAIM FOR SURVIVOR’S/DEATH BENEFIT

I hereby apply for Survivor’s/Death Benefit under the National Insurance Corporation Act, 2000, and furnish a Death Certificate and other supporting documents together with the following particulars:

PARTICULARS OF DECEASED

1. Name of Deceased Person ________________________________________________________
   (Block Letters) Surname Other Names

2. Nat. Ins. No. _________________________________________________________________

3. Date of Birth ____________________________
   Day Month Year

4. Date of Death ____________________________
   Day Month Year

5. Was Death due to an Employment Injury/Disease? Yes/No

6. If not, state cause of death ____________________________________________________

7. Was deceased in receipt of any benefit from National Insurance Corporation? Yes/No

8. State what Benefit _________________________________________________________

9. Name of Employer prior to death and duration of such Employment ____________

10. Address of Employer _______________________________________________________

11. Tel. No. of Employer _______________________________________________________

PARTICULARS OF CLAIMANT

1. Name of Claimant ____________________________ Nat. Ins. No._________
   (Block Letters) Surname Other Names

2. Date of Birth of Claimant ______________________________
   Day Month Year

3. Relation to Deceased ____________________________
   (If Widow or Widower attach Marriage Certificate)

4. Address of Claimant _______________________________________________________

5. Was Claimant wholly or mainly maintained by the deceased person? ____________

6. Was Claimant residing with deceased at the time of death? Yes/No

7. Tel. No. ________________________________________________________________
GIVE PARTICULARS OF THE CHILDREN OF THE DECEASED PERSON

<table>
<thead>
<tr>
<th>Name of child/ Children</th>
<th>Sex M/F</th>
<th>Father’s Name</th>
<th>Mother’s Name</th>
<th>Date of Birth</th>
<th>Place of Birth</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(ATTACH THE BIRTH CERTIFICATE OF EACH CHILD UNDER 18 YEARS)

I hereby declare that I have lived with the said ____________________ now deceased as *Husband/Wife/Common Law Husband/Common Law Wife from the _____ day of ___________________.

Signature/Mark __________________

Date _____________________________

I declare that the foregoing information is true in all particulars. I understand that a false statement or misrepresentation makes me subject to a penalty under the National Insurance Corporation Act 2000.

_________________________ ________________________________
Date Signature or Mark of Claimant

If unable to sign, mark X and have it witnessed by a responsible person (Lawyer, J.P., Doctor, Senior Civil Servant on permanent establishment, etc.)

Signature __________________________

Name of Witness _______________________

Profession or Occupation ___________________

Address ______________________________

Date ________________________________
CLAIM FOR RETIREMENT BENEFIT

I hereby apply for Retirement Benefit under the National Insurance Corporation Act, 2000, and furnish my Birth Certificate and other supporting documents together with the following particulars:

PARTICULARS OF CLAIMANT

My full name is_________________________________________________________(Print Name)

My Nat. Ins. No. is _______________________________________________________

My date of birth is ______________________________________________________

My address is ___________________________________________________________

My last/present Employer’s name and address were/are_________________________

Name of Employer _______________________________________________________  

Address ________________________________________________________________

I declare that I have reached the age of________will reach the age of________on the 

______________ day of _____________ 200________ I further declare that I am continuing in employment/retired from gainful employment.

I understand that a False statement or Misrepresentation makes me liable to a penalty under the National Insurance Corporation Act, 2000.

_______________________ ____________________________________

Date Signature or mark of Claimant

If unable to sign, mark X and have it Witnessed by a responsible person (Lawyer, J.P., Doctor, Senior Civil Servant on permanent establishment, etc.)

Signature of Witness __________________________

Name of Witness________________________________________

Profession or Occupation________________________

Address ______________________________

Date _______________________________
Form FB 1
(Reg. 61 (3) )

CLAIM FOR FUNERAL GRANT

I hereby apply for Funeral Grant under the National Insurance Corporation Act, 2000, and furnish a Death Certificate and receipts in support of funeral expenses together with the following particulars:

1. Name of deceased person_____________________________________________
2. Nat. Ins. No. _______________________________________________________
3. Date of Birth _______________________________________________________ 
4. Date of Death _______________________________________________________ 
5. Cause of Death______________________________________________________
6. Name of Claimant___________________________________________________
7. Tel. No. ___________________________________________________________
8. Date of Birth _______________________________________________________ 
9. Relation to deceased_________________________________________________
10. To the best of your knowledge and belief, are you the only person who will be entitled to make this claim? _______________________________________
11. Nat. Ins. No. _______________________________________________________

I declare that the foregoing information is true in all particulars. I understand that a false statement or Misrepresentation makes me liable to a penalty under the National Insurance Corporation Act, 2000.

_______________________ ____________________________________
Date Signature or Mark of Claimant

If unable to sign, mark X and have it Witnessed by a responsible person (Lawyer, J.P., Doctor, Senior Civil Servant on permanent establishment, etc.)

Signature of Witness __________________________
Name of Witness ____________________________
Profession or Occupation ______________________
Address ______________________________________
Date _________________________________________
National Insurance Regulations

Form EIB 1
(Reg. 64)

NOTICE OF EMPLOYMENT INJURY

PARTICULARS OF UNDERTAKING

1. Name of Employer ________________________________________________
2. Address of work place or place where accident occurred ________________
3. Nature of business ________________________________________________
4. Tel. No. _________________________________________________________

PARTICULARS OF INJURED PERSON

1. Surname __________________________ First name_________________________
2. Alias or other names ________________________________
3. Date of Birth _______________ Sex ______________ Nat. Ins. No._________
4. Full address _____________________________________________________
5. Tel. No. _________________________________________________________
6. Occupation or title _______________________________________________
7. Nature and location of injury _______________________________________
8. Estimated duration of disability _________________________________
   (on basis of Medical Certificate)
9. Normal rate of wages ____________________________
   (a) State wages paid for day of accident (if any)
   (b) How much will injured person be paid per week/month when off work?
       $_________
   (c) For how long will payment be made? From _________ to ___________
   (d) Duration of employment _______________________________________

CIRCUMSTANCES OF ACCIDENT

1. Date and hour of accident ____________________________
   Day   Month   Year   Time
2. Date and time injured person stopped working ________________
   Day   Month   Year   Time
3. Between what hours was injured person normally expected to work? From_______
   to ______________.
4. Was the accident reported (Yes/No) _________________________________
5. If Yes, to whom ________________________________
National Insurance Regulations

Exact place or location where accident occurred? ___________________________
_________________________________________________________________

6. Was the injured person authorised to be in that place at the time of the accident? *Yes/No

7. Exact type of work performed by injured person at the time of accident__________

8. Was this type of work authorised or permitted? Yes/No

9. What was the exact cause of the alleged accident? How did it happen?___________
_________________________________________________________________
_________________________________________________________________

10. If caused by machinery, give name of machine and part causing accident________

11. State whether machine was moved by mechanical power at time of accident? ____

12. What was the nature, location and extent of the injury observed at the time of the accident?________________________________________________________

13. State whether accident was fatal or not __________________________________

14. State what measures were taken to prevent recurrence of similar accident____

15. Was accident reported to the Labour Department? Yes/No___________________

16. Could the accident have been prevented? Yes/No________________________

I certify that the information given above is true and correct to the best of my knowledge and I understand that any false statement or misrepresentation renders me liable to a penalty under the National Insurance Corporation Act, 2000.

______________________ ____________________________________________
Date Signature and stamp of Employer/Representative
National Insurance Regulations

Form EIB 2
(Reg. 66)

CLAIM FOR EMPLOYMENT INJURY BENEFIT

I hereby apply for Employment Injury Benefit under the National Insurance Corporation Act, 2000, and furnish a Medical Certificate together with other supporting documents, and the following particulars:

My full Name_________________________________________________________
(Block Letters) Surname Other Names

My Date of Birth is______________________________________________________
Day Month Year

My Nat. Ins. No. is______________________________________________________

My Employer is _______________________________________________________ 

My Occupation is _____________________________________________________ 

My Tel. No. is__________________________________________________________

As a result of my injury, I last worked on ___________________________________

I understand that a False Statement or Misrepresentation makes me liable to a Penalty under the National Insurance Corporation Act, 2000.

____________________ ____________________________
Date Signature or Mark of Claimant

NOTE: Where the Claimant cannot sign, a responsible person (Lawyer, J.P., Doctor, Senior Civil Servant on permanent establishment, etc.) should Witness the Mark by signing on the Line below.

Witness to Mark_____________________________________________________
Profession or Occupation_______________________________________________
Addressss___________________________________________________________
Date__________________
National Insurance Regulations

MEDICAL CERTIFICATE — INJURY

In Confidence To:

Mr./Mrs./Miss__________________________________________________________

I_______________________________________________ a duly qualified Registered

Medical Practitioner, hereby certify that in my opinion you were at the time of my

examination suffering from_______________________________________________

_______________________________________________________________________

As a result of this illness you will

(1) Remain incapable of work for a period of _________________ * days commencing

on______________________________________________________________

(2) You will be fit to resume work today/tomorrow/on________________________

Any other Remarks by Doctor____________________________________________

_____________________________________________________________________

Doctor’s Name________________________________________________________

(in block letters)

Doctor’s Signature_____________________________________________________

Date_________________________________________________________________

Address______________________________________________________________

_____________________________________________________________________

Tel . No. _____________________________________________________________

* In the case of a First Certificate, the days indicated must not be more than seven

(including Sundays and Public Holidays).

In the case of a Second Certificate, the days indicated must not be more than fourteen

(including Sundays and Public Holidays) and for a Third or Subsequent Certificate,

the day indicated must not be more than 28.
CLAIM FOR DISABLEMENT BENEFIT

I hereby apply for Disablement Benefit under the National Insurance Act #18 of 2000, and furnish an assessment of my disablement together with the following particulars:

My Name is ___________________________________________________________

Surname Other Names

My NIC No. is ___________ My Date of Birth is ___________ Tel No. __________

My Address ___________________________________________________________

Date of Accident Resulting In Disablement _________________________________

Nature of Injury ________________________________________________________

Name of Employer Where Accident occurred _______________________________

I understand that a false statement or misrepresentation makes me liable to a penalty under the National Insurance Corporation Act, 2000.

____________________________ ___________________________
Signature of Claimant Date

Where the claimant cannot sign, a responsible person (Lawyer, J.P., Doctor, Senior Civil Servant on permanent establishment, etc.) should witness the Mark by signing below.

_______________________________ ___________________________
Signature of Witness Name (Please Print)

______________________________________________________________________
Occupation Date

FOR OFFICIAL USE ONLY

Period of E.I.B. ___________________________ to ___________________________

Amount of E.I.B. $ _____________________________________________________

Report of Inspector attached (Yes/No) _________________________________
MEDICAL CERTIFICATE OF ASSESSMENT OF DISABLEMENT
(TO BE COMPLETED BY A REGISTERED MEDICAL PRACTITIONER)

TO: Mr/Mrs/Miss_____________________________________________________

Print Name

I hereby certify that on ______________________ 200______ I examined you and in
my opinion you were at the time of my examination suffering from _______________
_____________________________________________________________________
_____________________________________________________________________

Description of Injury

Per Centum degree of disablement __________% Serial No. ____ (as per to Prescribed
Degree of Disablement in the Second Schedule of the National Insurance Regulations
No ______ of 2002)

NB

1. In the case of a right handed person, an injury to the right arm or hand and in the case
of a left handed person to the left arm or hand, shall be rated ten percent higher than
the above average.

2. In the case of a post traumatic shortening in a lower limb, any disability of that limb
shall be rated at ten percentum higher than the percentage of that disability.

Signature and Stamp _________________________________________________

Name (please print) _________________________ Registration date ______________

Address _______________________________________________________________

Date ___________________________ Tel Number ____________________________
Form NI/LC
(Reg. 58 (2) & 107 (2) )

LIFE CERTIFICATE

Full Name of Pensioner/Beneficiary________________________________________

Type of Pension______________________ Nat. Ins. No. (Pensioner)______________

Nat. Ins. No. (Beneficiary)_____________

+ Signature/Mark of Pensioner/Beneficiary____________________________ Date__________________

I, __________________________________ of_______________________________
(Please Print Name)

* ___________________________________________________________________
(Please State Profession and/or Official Title)

Hereby certify that_____________________________________________________

Whose signature is affixed above was alive on the ________________________ day
of______________________ 200___________

__________________________ Date __________________________ Signature

* To be certified by a Notary Royal, Notary Public, Lawyer, Justice of the Peace,
Doctor, Senior Civil Servant on permanent establishment, Minister of Religion.

+ Guardian must sign on behalf of a minor child.
NOTICE OF APPEAL  

In the matter of ______________________________________________________

Print name of Insured person and Nat. Ins. No.

To the Chairman of the National Insurance Board

c. The Director of the National Insurance Corporation

I__________________________________________________________________ of

(Print Name)

___________________________________________________________________do

Address

hereby give you and each of you notice that it is my intention to appeal against

a decision of the Director given on__________________in respect of an application

made by me for a ______________________ benefit under the National Insurance Cor-


My Nat. Ins. No. is ______________________________________________________

The general grounds of  Appeal are that —

1. ___________________________________________________________________

2. ___________________________________________________________________

3. ___________________________________________________________________

4. ___________________________________________________________________

5. ___________________________________________________________________

6. ___________________________________________________________________

Dated this ______________ day of __________________ 200____.

____________________________

Signature
**TABLE I**

*(Reg. 12 (8))*

**WAGE BANDS FOR SELF EMPLOYED CONTRIBUTORS**

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>MONTHLY INCOME AS A PERCENTAGE OF MAXIMUM INSURABLE EARNINGS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Special</td>
<td>10%</td>
</tr>
<tr>
<td>A</td>
<td>20%</td>
</tr>
<tr>
<td>B</td>
<td>30%</td>
</tr>
<tr>
<td>C</td>
<td>40%</td>
</tr>
<tr>
<td>D</td>
<td>50%</td>
</tr>
<tr>
<td>E</td>
<td>60%</td>
</tr>
<tr>
<td>F</td>
<td>70%</td>
</tr>
<tr>
<td>G</td>
<td>80%</td>
</tr>
<tr>
<td>H</td>
<td>90%</td>
</tr>
<tr>
<td>I</td>
<td>100%</td>
</tr>
</tbody>
</table>

**TABLE II**

*(Reg. 35)*

**Qualifying No. of Months for Pensions**

<table>
<thead>
<tr>
<th>During the year (s)</th>
<th>Qualifying No. of Months of contribution for pensions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st January 2000 to 31st December 2002</td>
<td>132 months</td>
</tr>
<tr>
<td>1st January 2003 to 31st December 2005</td>
<td>144 months</td>
</tr>
<tr>
<td>1st January 2006 to 31st December 2008</td>
<td>156 months</td>
</tr>
<tr>
<td>1st January 2009 to 31st December 2011</td>
<td>168 months</td>
</tr>
<tr>
<td>1st January 2012 and continuing</td>
<td>180 months</td>
</tr>
</tbody>
</table>
TABLE III
(Reg. 36)

INSURABLE EARNINGS ON INCOME
IN EXCESS OF $36,000.00 PER ANNUM

<table>
<thead>
<tr>
<th>FOR THE YEAR</th>
<th>AMOUNT TO BE CREDITED $</th>
</tr>
</thead>
<tbody>
<tr>
<td>January to December 1</td>
<td>36,000 + 25% of (excess over 36,000)</td>
</tr>
<tr>
<td>January to December 2</td>
<td>36,000 + 25% of (excess over 36,000)</td>
</tr>
<tr>
<td>January to December 3</td>
<td>36,000 + 30% of (excess over 36,000)</td>
</tr>
<tr>
<td>January to December 4</td>
<td>36,000 + 40% of (excess over 36,000)</td>
</tr>
<tr>
<td>January to December 5</td>
<td>36,000 + 50% of (excess over 36,000)</td>
</tr>
<tr>
<td>January to December 6</td>
<td>36,000 + 60% of (excess over 36,000)</td>
</tr>
<tr>
<td>January to December 7</td>
<td>36,000 + 60% of (excess over 36,000)</td>
</tr>
</tbody>
</table>

TABLE IV
(Reg. 55 (2))

EARLY RETIREMENT PENSION FORMULA

<table>
<thead>
<tr>
<th>Description</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early Retirement Age</td>
<td>60</td>
</tr>
<tr>
<td>Required months of contributions</td>
<td>See TABLE 1 of the First Schedule</td>
</tr>
<tr>
<td>Early Reduction Factor</td>
<td>0.5% per month of age below normal pensionable age</td>
</tr>
<tr>
<td>Early Pension Formula</td>
<td>Full pension at pensionable age X (100 - early reduction factor)</td>
</tr>
</tbody>
</table>
TABLE V

(Reg. 61 (2))

AMOUNT OF FUNERAL GRANT

<table>
<thead>
<tr>
<th>Age of Death</th>
<th>Amount of Grant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 2 years</td>
<td>$150.00</td>
</tr>
<tr>
<td>3 years</td>
<td>$300.00</td>
</tr>
<tr>
<td>4 years</td>
<td>$450.00</td>
</tr>
<tr>
<td>5 years</td>
<td>$600.00</td>
</tr>
<tr>
<td>6 years</td>
<td>$750.00</td>
</tr>
<tr>
<td>7 years</td>
<td>$900.00</td>
</tr>
<tr>
<td>8 years</td>
<td>$1,050.00</td>
</tr>
<tr>
<td>9 years</td>
<td>$1,200.00</td>
</tr>
<tr>
<td>10 years</td>
<td>$1,300.00</td>
</tr>
<tr>
<td>11 years and older</td>
<td>$1,500.00</td>
</tr>
</tbody>
</table>
**National Insurance Regulations**

**SECOND SCHEDULE**

**PRESCRIBED DEGREES OF DISABLEMENT**

<table>
<thead>
<tr>
<th>Description of Disability</th>
<th>Degree of Disablement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Serial No.</td>
<td>Per Centum</td>
</tr>
<tr>
<td>1. Loss of two limbs</td>
<td>100</td>
</tr>
<tr>
<td>2. Loss of both hands or of all fingers</td>
<td>100</td>
</tr>
<tr>
<td>and thumbs</td>
<td></td>
</tr>
<tr>
<td>3. Total loss of sight</td>
<td>100</td>
</tr>
<tr>
<td>4. Total paralysis</td>
<td>100</td>
</tr>
<tr>
<td>5. Injuries resulting in being bed-ridden permanently</td>
<td>100</td>
</tr>
<tr>
<td>6. Loss of remaining eye by one-eyed person</td>
<td>100</td>
</tr>
<tr>
<td>7. Loss of remaining arm by one-armed person</td>
<td>100</td>
</tr>
<tr>
<td>8. Loss of remaining leg by one-legged person</td>
<td>100</td>
</tr>
<tr>
<td>9. Loss of a hand and a foot</td>
<td>100</td>
</tr>
<tr>
<td>10. Any other injury causing permanent total incapacity</td>
<td>100</td>
</tr>
<tr>
<td>11. Very severe disfigurement facial</td>
<td>100</td>
</tr>
<tr>
<td>12. Absolute deafness</td>
<td>100</td>
</tr>
<tr>
<td>13. Amputation of arm between elbow and shoulder</td>
<td>100</td>
</tr>
<tr>
<td>14. Amputation through shoulder joint</td>
<td>100</td>
</tr>
<tr>
<td>15. Loss of arm at elbow</td>
<td>100</td>
</tr>
<tr>
<td>16. Loss of arm between wrist and elbow</td>
<td>100</td>
</tr>
<tr>
<td>17. Loss of hand at wrist</td>
<td>60</td>
</tr>
<tr>
<td>18. Loss of four fingers</td>
<td>40</td>
</tr>
<tr>
<td>19. Loss of four fingers and thumb of one hand</td>
<td>60</td>
</tr>
<tr>
<td>20. Loss of thumb both phalanges</td>
<td>30</td>
</tr>
<tr>
<td>21. Loss of thumb one phalanx</td>
<td>20</td>
</tr>
<tr>
<td>22. Loss of index finger three phalanges</td>
<td>14</td>
</tr>
<tr>
<td>23. Loss of index finger two phalanges</td>
<td>11</td>
</tr>
<tr>
<td>24. Loss of index finger one phalanx</td>
<td>9</td>
</tr>
<tr>
<td>25. Loss of middle finger three phalanges</td>
<td>12</td>
</tr>
<tr>
<td>26. Loss of middle finger two phalanges</td>
<td>9</td>
</tr>
<tr>
<td>27. Loss of middle finger one phalanx</td>
<td>7</td>
</tr>
<tr>
<td>28. Loss of ring finger three phalanges</td>
<td>7</td>
</tr>
<tr>
<td>29. Loss of ring finger one phalanx</td>
<td>5</td>
</tr>
<tr>
<td>30. Loss of ring finger two phalanges</td>
<td>6</td>
</tr>
<tr>
<td>31. Loss of little finger three phalanges</td>
<td>7</td>
</tr>
<tr>
<td>32. Loss of little finger one phalanx</td>
<td>6</td>
</tr>
<tr>
<td>33. Loss of little one phalanx</td>
<td>5</td>
</tr>
<tr>
<td>34. Loss of metacarpals third, fourth or fifth (additional)</td>
<td>4</td>
</tr>
<tr>
<td>35. Guillotin amputation of tip of INDEX, MIDDLE Ring finger without loss of bone or LITTLE FINGER</td>
<td>2</td>
</tr>
<tr>
<td>36. Double amputation through thigh, through thigh on one side and loss of other foot, or double amputation below knee</td>
<td>100</td>
</tr>
</tbody>
</table>
### National Insurance Regulations

<table>
<thead>
<tr>
<th>Description of Disability</th>
<th>Degree of Disablement Per Centum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Serial No.</td>
<td></td>
</tr>
<tr>
<td>38.</td>
<td>Double amputation through leg lower than 5 inches below knee</td>
</tr>
<tr>
<td>39.</td>
<td>Amputation of one leg lower than 5 inches below knee and loss of other foot</td>
</tr>
<tr>
<td>40.</td>
<td>Amputation of both feet resulting in end-bearing stumps</td>
</tr>
<tr>
<td>41.</td>
<td>Amputation through both feet proximal to the metatarsophalangeal joint</td>
</tr>
<tr>
<td>42.</td>
<td>Loss of all toes of both feet through metatarsophalangeal joint</td>
</tr>
<tr>
<td>43.</td>
<td>Loss of all toes of both feet distal to the proximal interphalangeal joint</td>
</tr>
<tr>
<td>44.</td>
<td>Loss of all toes of both feet proximal to the proximal interphalangeal joint</td>
</tr>
<tr>
<td>45.</td>
<td>Amputation through hip-joint</td>
</tr>
<tr>
<td>46.</td>
<td>Amputation below hip with stump not exceeding 5 inches in length measured from tip of great trochanter</td>
</tr>
<tr>
<td>47.</td>
<td>Amputation below hip with stump exceeding 5 inches in length measured from tip of great trochanter, but not beyond middle thigh</td>
</tr>
<tr>
<td>48.</td>
<td>Amputation below middle thigh to 3 1/2 inches below knee</td>
</tr>
<tr>
<td>49.</td>
<td>Amputation below knee with stump exceeding 3 1/2 inches but not exceeding 5 inches</td>
</tr>
<tr>
<td>50.</td>
<td>Amputation below knee with stump exceeding 5 inches</td>
</tr>
<tr>
<td>51.</td>
<td>Amputation of one foot resulting in end-bearing stump</td>
</tr>
<tr>
<td>52.</td>
<td>Amputation through one foot proximal to the metatarsophalangeal joint</td>
</tr>
<tr>
<td>53.</td>
<td>Loss of all toes of one foot proximal to the interphalangeal joint, including amputation through the metatarsophalangeal joint</td>
</tr>
<tr>
<td>54.</td>
<td>Loss of great toe, both phalanges</td>
</tr>
<tr>
<td>55.</td>
<td>Loss of great toe, one phalanx</td>
</tr>
<tr>
<td>56.</td>
<td>Loss of great toe, part with some loss of bone</td>
</tr>
<tr>
<td>57.</td>
<td>Loss of toes other than great toe, each</td>
</tr>
<tr>
<td>58.</td>
<td>Loss of toe other than great toe-part with some loss of bone</td>
</tr>
<tr>
<td>59.</td>
<td>Two toes of one foot, excluding great toe through metatarsophalangeal joint</td>
</tr>
<tr>
<td>60.</td>
<td>Part with some loss of bone</td>
</tr>
<tr>
<td>61.</td>
<td>Three toes of one foot excluding great toe through metatarsophalangeal joint</td>
</tr>
<tr>
<td>62.</td>
<td>Part with some loss of bone</td>
</tr>
<tr>
<td>63.</td>
<td>Four toes of one foot excluding great toe through metatarsophalangeal joint</td>
</tr>
<tr>
<td>64.</td>
<td>Part with some loss of bone</td>
</tr>
</tbody>
</table>

**OTHER SPECIFIC INJURIES**

| Serial No. |  |
| 65. | Loss of one eye, without complications, the other being normal | 40 |
| 66. | Loss of vision of one eye, without complications of disfigurement of the eye ball, the other being normal | 30 |
### Description of Disability

<table>
<thead>
<tr>
<th>Serial No.</th>
<th>Degree of Disablement Per Centum</th>
</tr>
</thead>
</table>

67. Loss of hearing, one ear

68. Post-traumatic ankylosis of limbs and joints ranging between partial and complete:

<table>
<thead>
<tr>
<th>Ankylosis of</th>
<th>Partial</th>
<th>Complete</th>
</tr>
</thead>
<tbody>
<tr>
<td>(i) Spine</td>
<td>20</td>
<td>30</td>
</tr>
<tr>
<td>(ii) Shoulder</td>
<td>30</td>
<td>40</td>
</tr>
<tr>
<td>(iii) Elbow</td>
<td>30</td>
<td>30</td>
</tr>
<tr>
<td>(iv) Wrist</td>
<td>30</td>
<td>30</td>
</tr>
<tr>
<td>(v) Superior and inferior radio-ulnar</td>
<td>30</td>
<td>30</td>
</tr>
<tr>
<td>(vi) Thumb (first metatarsophalangeal)</td>
<td>30</td>
<td>30</td>
</tr>
<tr>
<td>Finger Joints</td>
<td>30</td>
<td>30</td>
</tr>
<tr>
<td>(vii) One joint of any finger excluding thumb</td>
<td>—</td>
<td>33</td>
</tr>
<tr>
<td>(viii) All three joints of one finger exclusive thumb</td>
<td>—</td>
<td>10</td>
</tr>
<tr>
<td>(ix) Joints of all fingers excluding thumb</td>
<td>—</td>
<td>30</td>
</tr>
<tr>
<td>(x) Finger joints of all fingers including thumbs</td>
<td>—</td>
<td>40</td>
</tr>
<tr>
<td>(xi) Hip joints</td>
<td>20</td>
<td>40</td>
</tr>
<tr>
<td>(xii) Knee</td>
<td>10</td>
<td>19</td>
</tr>
<tr>
<td>(xiii) Ankle</td>
<td>10</td>
<td>19</td>
</tr>
<tr>
<td>(xiv) Sub-astragaloid group of joints</td>
<td>10</td>
<td>19</td>
</tr>
<tr>
<td>(xv) Big toe (first metatarsophalangeal)</td>
<td>10</td>
<td>19</td>
</tr>
<tr>
<td>(xvi) Toe Joints</td>
<td>5</td>
<td>10</td>
</tr>
</tbody>
</table>

### POST TRAUMATIC PARALYSIS OF LIMBS

**OR PARTS OF THE BODY**

(i) Total paralysis toe to spinal cord injury — 100

### PARALYSIS OF:

| (ii) Brachial plexus | 50 | 50 |
| (iii) Radial nerve   | 30 | 50 |
| (iv) Medial nerve    | 20 | 40 |
| (v) Ulna nerve       | 20 | 40 |
| (vi) Sciatic nerve   | 50 | 70 |
| (vii) Medial popliteal | 20 | 40 |
| (viii) Lateral popliteal | 20 | 30 |

1. In the case of a right-handed person, an injury to the right arm or hand and in the case of a left-handed person to the left arm or hand, shall be rated ten per centum higher than the above percentage.

2. In the case of a post-traumatic shortening in a lower limb, any disability of that limb shall be rated at ten per centum higher than the percentage of that disability.
3. The degree of disablement in cases not specified in this Schedule shall be assessed on the basis of the general principles referred to in regulation 71 of these Regulations, taking into account prescribed cases of equal or similar effect.
National Insurance Regulations

THIRD SCHEDULE

(Reg. 81)

Prescribed Diseases/Injury

<table>
<thead>
<tr>
<th>Description of Disease or injury</th>
<th>Nature of Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Conditions due to physical agents and the physical demands of work</strong></td>
<td></td>
</tr>
<tr>
<td>1. Inflammation, ulceration or malignant disease of the skin due to ionising radiation</td>
<td>Work with ionising radiation.</td>
</tr>
<tr>
<td>2. Malignant disease of the bones due to ionising radiation</td>
<td>Work involving exposure to electromagnetic radiation, including radiant heat.</td>
</tr>
<tr>
<td>3. Blood dyscrasia due to ionising radiation</td>
<td></td>
</tr>
<tr>
<td>4. Cataract due to electromagnetic radiation</td>
<td>Work involving exposure to electromagnetic radiation, including radiant heat.</td>
</tr>
<tr>
<td>5. Decompression illness</td>
<td></td>
</tr>
<tr>
<td>6. Barotrauma resulting in lung or other organ damage</td>
<td>Work involving breathing gases at increased pressure, including diving.</td>
</tr>
<tr>
<td>7. Dysbaric osteonecrosis</td>
<td></td>
</tr>
<tr>
<td>8. Cramp of the hand or forearm due to repetitive movement</td>
<td>Work involving prolonged periods of hand-writing, typing or other repetitive movements of the fingers, hand or arm.</td>
</tr>
<tr>
<td>9. Subcutaneous cellulitis of the hand</td>
<td>Physically demanding work causing severe or prolonged friction or pressure on the hand.</td>
</tr>
<tr>
<td>10. Bursitis or subcutaneous cellulitis arising at or about the knee due to severe or prolonged external friction or pressure at or about the knee</td>
<td>Physically demanding work causing severe or prolonged friction or pressure at or about the knee.</td>
</tr>
<tr>
<td>11. Bursitis or subcutaneous cellulitis or arising at or about the elbow due to or prolonged external friction or pressure at or about the elbow</td>
<td>Physically demanding work causing severe or prolonged friction or pressure at or about the elbow.</td>
</tr>
<tr>
<td>Description of Disease or injury</td>
<td>Nature of Occupation</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>----------------------</td>
</tr>
<tr>
<td>12. Traumatic inflammation of the tendons of the hand or forearm or of the associated tendon sheaths</td>
<td>Physically demanding work frequent or repeated movements, constrained postures or extremes of extension or flexion of the hand or wrist.</td>
</tr>
<tr>
<td>13. Carpal tunnel syndrome</td>
<td>Work involving the use of hand-held vibrating tools.</td>
</tr>
</tbody>
</table>
| 14. Hand-arm vibration syndrome | Work involving:  
(a) the use of chain saws, brush cutters or hand-held or hand-fed circular saws in forestry or woodworking;  
(b) the use of hand-held rotary tools in grinding material or in sanding or polishing metal;  
(c) the holding of material being ground or metal being sanded or polishing by rotary tools;  
(d) the use of hand-held percussive metal-working tools or the holding of metal being worked upon by percussive tools in connection with riveting, caulking, chipping, hammering, setting or swaging;  
(e) the use of hand-held powered percussive drills or hand-held powered percussive hammers in mining, quarrying or demolition or on roads or footpaths (including road construction); or  
(f) the holding of material being worked upon by pounding machines in shoe manufacture. |
# National Insurance Regulations

<table>
<thead>
<tr>
<th>Description of Disease or Injury</th>
<th>Nature of Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infections due to biological agents</td>
<td></td>
</tr>
<tr>
<td>15. Anthrax</td>
<td><em>(a)</em> Work involving handling infected animals, their products or packaging containing infected material, or <em>(b)</em> work on infected sites.</td>
</tr>
<tr>
<td>16. Brucellosis</td>
<td>Work involving contact with: <em>(a)</em> animals or their carcases (including any parts thereof) infected by brucella or the untreated products of some; or <em>(b)</em> laboratory specimens or vaccines of or containing brucella.</td>
</tr>
<tr>
<td>17. (a) Avian chlamydiosis</td>
<td>Work involving contact with birds infected with Chlamydia psittaci, or the remains or untreated products of such birds.</td>
</tr>
<tr>
<td>(b) Ovine chlamydiosis</td>
<td>Work involving contact with sheep infected with Chlamydia psittaci or the remains or untreated products of such sheep.</td>
</tr>
<tr>
<td>18. Hepatitis</td>
<td>Work involving contact with: <em>(a)</em> human blood or human blood products; or <em>(b)</em> any source of viral hepatitis.</td>
</tr>
<tr>
<td>19. Legionellosis</td>
<td>Work on or near cooling systems which are located in the workplace and use water or work on hot water service systems located in the workplace which are likely to be a source of contamination.</td>
</tr>
<tr>
<td>Description of Disease or Injury</td>
<td>Nature of Occupation</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>----------------------</td>
</tr>
<tr>
<td>20. Leptospirosis</td>
<td>(a) Work in places which are liable to be infested by rats, fieldmice, voles or other small mammals; (b) work at dog kennels or involving the care or handling of dogs; or (c) work involving contact with bovine animals or their meat products or pigs or their meat products.</td>
</tr>
<tr>
<td>21. Lyme disease</td>
<td>Work involving exposure to ticks (including in particular work by forestry workers, rangers, dairy farmers, game keepers and other persons engaged in countryside management).</td>
</tr>
<tr>
<td>22. Q fever</td>
<td>Work involving contact with animals, their remains or their untreated products.</td>
</tr>
<tr>
<td>23. Rabies</td>
<td>Work involving handling or contact with infected animals.</td>
</tr>
<tr>
<td>24. Streptococcus suis</td>
<td>Work involving contact with pigs infected with streptococcus suis, or with the carcasses, products or residues of pigs so infected.</td>
</tr>
<tr>
<td>25. Tetanus</td>
<td>Work involving contact with soil likely to be contaminated by animals.</td>
</tr>
<tr>
<td>26. Tuberculosis</td>
<td>Work with persons, animals, human or animal remains or any other materials which might be a source of infection.</td>
</tr>
<tr>
<td>27. Any infection reliably attributable to the performance of the work specified in the entry opposite hereto</td>
<td>Work with microorganisms; work with live or dead human beings in the course of work.</td>
</tr>
</tbody>
</table>
### National Insurance Regulations

<table>
<thead>
<tr>
<th>Description of Disease or Injury</th>
<th>Nature of Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>of providing any treatment or service or in conducting any investigation involving exposure to blood or body fluids; work with animals or any potentially infected material derived from any of the above</td>
<td></td>
</tr>
</tbody>
</table>

#### Conditions due to substances

28. Poisonings by any of the following:
   - (a) acrylamide monomer;
   - (b) arsenic or one of its compounds;
   - (c) benzene or a homologue of benzene;
   - (d) beryllium or one of its compounds;
   - (e) cadmium or one of its compounds;
   - (f) carbon disulphide;
   - (g) diethylene dioxide (dioxan);
   - (h) ethylene oxide;
   - (i) lead or one of its compounds;
   - (j) manganese or one of its compounds;
   - (k) mercury or one of its compounds;
   - (l) methyl bromide;
   - (m) nitrochlorobenzene, or a nitr or amino or chloro-derivative of benzene or of a homologue of benzene;
   - (n) oxides of nitrogen;
   - (o) phosphorus or one of its compounds.

29. Cancer of a bronchus or lung
   - (a) Work in or about a building where nickel is produced by decomposition of a gaseous nickel compound or where any industrial process which is ancillary or incidental to that process is carried on; or
   - (b) work involving exposure to bis (chloromethyl) or any electrolytic chromium processes (excluding passivation) which involves hexavalent chromium compounds, chromate production or zinc chromatic pigment manufacture.
### National Insurance Regulations

<table>
<thead>
<tr>
<th>Description of Disease or Injury</th>
<th>Nature of Occupation</th>
</tr>
</thead>
</table>
| 30. Primary carcinoma of the lung where there is accompanied evidence of silicosis | Any occupation in:  
(a) glass manufacture;  
(b) sandstone tunnelling or quarrying;  
(c) the pottery industry;  
(d) metal ore mining;  
(e) slate quarrying or slate production;  
(f) clay mining;  
(g) the use of siliceous materials as abrasives;  
(h) foundry work;  
(i) granite tunnelling or quarrying; or  
(j) stone cutting or masonry |
| 31. Cancer of the urinary tract | 1. Work involving exposure to any of the following substances:  
(a) beta-naphthylamine or \textit{methylene-bis-orthochloroaniline};  
(b) diphenyl substituted by at least one nitro and primary amino group (including benzidine);  
(c) any of the substances mentioned in sub-paragraph (b) if further ring substitution by halogeno, methyl or methoxy group, but not by other groups; or  
(d) the salts of any of the substances mentioned in sub-paragraphs (a) to (c).  
2. The manufacture of auramine or magenta. |
<p>| 32. Bladder cancer | Work involving exposure to aluminium smelting using the Soderberg process. |</p>
<table>
<thead>
<tr>
<th>Description of Disease or injury</th>
<th>Nature of Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>33. Angiosarcoma of the Liver</td>
<td><em>(a)</em> Work in or about machinery or apparatus used for the polymerisation of vinyl chloride monomer, a process which, for the purposes of this sub-paragraph, comprises all operations up to and including the drying of the slurry produced by the polymerisation and the packaging of the dried product; or <em>(b)</em> work in a building or structure in which any part of the process referred to in the foregoing sub-paragraph takes place.</td>
</tr>
<tr>
<td>34. Peripheral neuropathy</td>
<td>Work involving the use or handling of or exposure to the fumes of or vapour containing n-hexane or methyl n-butyl ketone.</td>
</tr>
<tr>
<td>35. Chrome ulceration of:</td>
<td><em>(a)</em> the nose or throat; or <em>(b)</em> the skin of the hands or forearm</td>
</tr>
<tr>
<td>36. Folliculitis</td>
<td>Work involving exposure of chromic acid or to any chromium compound.</td>
</tr>
<tr>
<td>37. Acne</td>
<td>Work involving exposure to mineral oil, tar, pitch or arsenic.</td>
</tr>
<tr>
<td>38. Skin cancer</td>
<td>1. <em>(a)</em> The mining, quarrying or working of silica rock or the working of dried quartzose sand, any dry deposit or residue of silica or any dry admixture containing such materials (including any activity in which any of the aforesaid operations are carried out incidentally to the mining or quarrying of other minerals or to the manufacture of articles containing crushed or ground silica rock); or</td>
</tr>
<tr>
<td>39. Pneumoconiosis (excluding asbestosis)</td>
<td></td>
</tr>
</tbody>
</table>

*National Insurance Regulations*
### Description of Disease or Injury | Nature of Occupation
--- | ---
(b) the handling of any of the materials specified in the foregoing subparagraph in or incidental to any of the operations mentioned therein or substantial exposure to the dust arising from such operations.

2. The breaking, crushing or grinding of flint, the working or handling of broken, crushed or ground flint or materials containing such flint or substantial exposure to the dust arising from any of such operations.

3. Sand blasting by means of compressed air with use of quarizose sand or crushed silica rock or flint or substantial exposure to the dust arising from such sand blasting.

4. Work in a foundry or the performance of, or substantial exposure to the dust arising from, any of the following operations:

   (a) the freeing of steel casting from adherent siliceous substance or;

   (b) the freeing of metal casting from adherent siliceous substance:

       (i) by blasting with an abrasive propelled by compressed air steam or a wheel; or

       (ii) by the use of power-driven tools.
<table>
<thead>
<tr>
<th>Description of Disease or Injury</th>
<th>Nature of Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>5. The manufacture of china or earthenware (including sanitary earthenware, electrical earthenware and earthenware (tiles) and any activity involving substantial exposure to the dust arising therefrom.</td>
<td></td>
</tr>
<tr>
<td>6. The grinding of mineral graphite or substantial exposure to the dust arising from such grinding.</td>
<td></td>
</tr>
<tr>
<td>7. The dressing of granite or any igneous rock by masons. The crushing of such materials or substantial exposure to the dust arising from such operations.</td>
<td></td>
</tr>
<tr>
<td>8. The use or preparation for use of an abrasive wheel or substantial exposure to the dust arising therefrom</td>
<td></td>
</tr>
<tr>
<td>9. (a) Work underground in any mine in which one of the objects of the mining operations is the getting of any material.</td>
<td></td>
</tr>
<tr>
<td>(b) the working or handling above ground at any coal or tin mine of any materials extracted therefrom or any operation incidental thereto:</td>
<td></td>
</tr>
<tr>
<td>(c) the trimming of coal in any ship, barge, lighter, dock or harbour or at any wharf or quay; or</td>
<td></td>
</tr>
<tr>
<td>(d) the sawing, splitting or dressing of slate or any operation incidental thereof.</td>
<td></td>
</tr>
<tr>
<td>Description of Disease or injury</td>
<td>Nature of Occupation</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>----------------------</td>
</tr>
<tr>
<td>10. The manufacture or work incidental to the manufacture of carbon electrodes by an industrial undertaking for use in the electrolytic extraction of aluminium from aluminium oxide and any activity involving substantial exposure to the dust therefrom.</td>
<td></td>
</tr>
<tr>
<td>11. Boiler scaling or substantial exposure to the dust arising therefrom.</td>
<td></td>
</tr>
<tr>
<td>40. Byssinosis</td>
<td>The spinning or manipulation of raw or waste cotton or flax or the weaving of cotton or flax, carried out in each case in a room in a factory, together with any other work carried out in such a room.</td>
</tr>
<tr>
<td>41. Mesochclioma</td>
<td>(a) The working or handling of asbestos or any admixture of asbestos;</td>
</tr>
<tr>
<td>42. Lung cancer</td>
<td>(b) the manufacture or repair of asbestos textiles or other articles containing or composed of asbestos;</td>
</tr>
<tr>
<td>43. Asbestosis</td>
<td>(c) the cleaning of any machinery or plant used in any of the foregoing operations and of any chambers, fixtures and appliances for the collection of asbestos dust; or</td>
</tr>
<tr>
<td>44. Cancer of the nasal cavity or associated air sinuses</td>
<td>(d) substantial exposure to the dust arising from any of the foregoing operations.</td>
</tr>
<tr>
<td>1. (a) Work in or about a building where wooden furniture is manufactured;</td>
<td></td>
</tr>
</tbody>
</table>
National Insurance Regulations

<table>
<thead>
<tr>
<th>Description of Disease or injury</th>
<th>Nature of Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>(b) work in a building used for the manufacture of footwear or components of footwear made wholly or partly of leather or fibre board; or (c) work at a place used wholly or mainly for the repair of footwear made wholly or partly of leather or fibre board.</td>
<td>2. Work in or about a factory building where nickel is produced by decomposing of a gaseous nickel compound or in any process which is ancillary or incidental thereto.</td>
</tr>
<tr>
<td>45. Occupational dermatitis</td>
<td>Work involving exposure to any of the following agents: (a) epoxy resin systems; (b) formaldehyde and its resins; (c) metal working fluids,-, (d) chromate (hexavalent and derived from trivalent chromium); (e) cement, plaster or concrete; (f) acrylates and methacrylates; (g) colophony (rosin) and its modified products; (h) glutaraldehyde; (i) mercaptobenzothiazole, thiurams, substituted \textit{para} \textit{phenylene} \textit{diamines} and related rubber processing chemicals.</td>
</tr>
</tbody>
</table>
National Insurance Regulations

<table>
<thead>
<tr>
<th>Description of Disease or Injury</th>
<th>Nature of Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>(j) biocides, antibacterials, preservatives or disinfectants;</td>
<td></td>
</tr>
<tr>
<td>(k) organic solvents;</td>
<td></td>
</tr>
<tr>
<td>(l) antibiotics and other pharmaceuticals and therapeutic agents;</td>
<td></td>
</tr>
<tr>
<td>(m) strong acids, strong alkalis, strong solutions (e.g. brine) and oxidising agents including domestic bleach or reducing agents;</td>
<td></td>
</tr>
<tr>
<td>(n) hairdressing products including in particular dyes, shampoos, bleaches and permanent waving solutions;</td>
<td></td>
</tr>
<tr>
<td>(o) soaps and detergents;</td>
<td></td>
</tr>
<tr>
<td>(p) plants and plant-derived material including in particular the daffodil, tulip and chrysanthemum families, the parsley family (carrots, parsnips, parsley and celery), garlic and union, hardwoods and the pine family;</td>
<td></td>
</tr>
<tr>
<td>(q) fish, shell-fish or meat;</td>
<td></td>
</tr>
<tr>
<td>(r) sugar or flour; or</td>
<td></td>
</tr>
<tr>
<td>(s) any other known irritant or sensitising agent including in particular any chemical bearing the warning: “may cause sensitisation by skin contact” or “Irritating to the skin”.</td>
<td></td>
</tr>
</tbody>
</table>

46. Extrinsic alveolitis (including farmer’s lung) Exposure to moulds, fungal spores or heterologous proteins during work in:
### National Insurance Regulations

<table>
<thead>
<tr>
<th>Description of Disease or Injury</th>
<th>Nature of Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a)</td>
<td>agriculture, horticulture forestry, cultivation of edible fungi or malt-working;</td>
</tr>
<tr>
<td>(b)</td>
<td>loading, unloading or handling mouldy vegetable matter or edible fungi whilst same is being stored;</td>
</tr>
<tr>
<td>(c)</td>
<td>caring for or handling birds; or</td>
</tr>
<tr>
<td>(d)</td>
<td>handling bagasse.</td>
</tr>
</tbody>
</table>

#### 47. Occupational asthma

Work involving exposure to any of the following agents:

- (a) isocyanates;
- (b) platinum salts;
- (c) fumes or dust arising from the manufacture, transport or use of hardening agents (including epoxy resin curing agents) based on phthalic anhydride, tetrachlorophthalic anhydride, uimellitic anhydride or, thiethylene-tetramine;
- (d) fumes arising from the use of rosin as a soldering flux;
- (e) proteolytic enzymes;
- (f) animals including insects and other arthropods used for the purposes of research or education or in laboratories;
### Description of Disease or Injury

<table>
<thead>
<tr>
<th>Description of Disease or Injury</th>
<th>Nature of Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>(g) Dusts arising from the sowing, cultivation, harvesting, drying, handling, milling, transport or storage of barley, oats, rye, wheat or maize or the handling, milling, transport or storage of meals or flour made therefrom;</td>
<td></td>
</tr>
<tr>
<td>(h) Antibiotics;</td>
<td></td>
</tr>
<tr>
<td>(i) Cimetidine;</td>
<td></td>
</tr>
<tr>
<td>(j) Wood dust;</td>
<td></td>
</tr>
<tr>
<td>(k) Ispaghula;</td>
<td></td>
</tr>
<tr>
<td>(l) Castor bean dust;</td>
<td></td>
</tr>
<tr>
<td>(m) Ipecacuanha;</td>
<td></td>
</tr>
<tr>
<td>(n) Azodicarbonamide;</td>
<td></td>
</tr>
</tbody>
</table>

48. (a) Dystrophy of the cornea (including ulceration of the corneal surface) of the eye;

(b) Localised new growth of the skin, papilomatous of keratotic

c) Squamous-celled carcinoma of the skin, due in any case to arsenic, tar, pitch bitumen, mineral oil, including paraffin, soot, or any compound product, including quinone, or hydroquinone, or residue of any of these substances.

49. Inflammation or ulceration of the mucous membrane of the upper respiratory passage or mouth produced by dust, liquid or vapour

50. Pulmonary disease due to the inhalation of the dust of mouldy vegetable produce, and characterised by symptoms and signs, attributable to a reaction in the peripheral part of the broncho pulmonary system, and giving rise to a farmer’s lung

Exposure to the dust of mouldy hay or their mouldy vegetable produce by reason of employment:
<table>
<thead>
<tr>
<th>Description of Disease or injury</th>
<th>Nature of Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) in agriculture, horticulture or forestry; or</td>
<td></td>
</tr>
<tr>
<td>(b) loading or unloading in storage hay or other vegetable produce; or</td>
<td></td>
</tr>
<tr>
<td>(c) handling bagasse.</td>
<td></td>
</tr>
</tbody>
</table>
National Insurance Regulations

FOURTH SCHEDULE

PART A

RULES FOR MEDICAL CERTIFICATION

1. Every certificate shall be written in ink or other indelible substance, signed by a registered medical practitioner, and shall contain the following particulars:

(a) the claimant’s name;
(b) the date and place of the examination on which the certificate is based;
(c) a concise statement of the disease or disablement by which the claimant is, in the medical practitioner’s opinion, at the time rendered incapable of work;
(d) the date on which the certificate is given;
(e) the address of the medical practitioner; and
(f) the signature of the medical practitioner.

2. The statement of the incapacitating disease or disablement in the certificate shall specify the cause of incapacity as precisely as the practitioner’s knowledge of the claimant’s condition at the time of the examination.

3. Notwithstanding paragraph 2, if in the opinion of the medical practitioner, a disclosure to the claimant of the precise cause would be prejudicial to his well-being, the certificate may contain a less precise statement.

4. Every certificate must have been given on a date not more than one day after the date of the examination upon which it is based, and no further certificate based on the same examination shall be furnished other than a certificate to replace an original certificate which has been lost or mislaid, but in that case the form shall be clearly marked “DUPLICATE”.

5. Where the claimant is being attended by a medical practitioner in the Public Service or is receiving treatment on the advice of such a medical practitioner at any hospital as either an in-patient or an out-patient, the certificate shall be on a form supplied by the Director for the purpose and shall be signed by that medical practitioner.

6. Where the claimant is being attended by any other medical practitioner the certificate shall be either on a form supplied by the Director or on such form substantially to the like effect as the Director may accept, and shall be signed by such other medical practitioner.

7. The certificate shall be in the form set out in Part B of this Schedule.
National Insurance Regulations

8. In a case in which, in the opinion of the medical practitioner the claimant will become fit to resume work on a day not later than the end of the 7th day after the date of the examination on which the certificate is based, the certificate shall specify the first-mentioned day.

9. In any other case, the certificate shall cover a specified number of days from and including that date of the examination on which the certificate is based, which shall not exceed seven days in the case of a first certificate, fourteen days in respect of a second certificate and twenty-eight days in respect of any subsequent certificate.

10. In computing any period of time in relation to any certificate given under these Regulations, Sundays and Public Holidays shall be included.

PART B
MEDICAL CERTIFICATE

Re ______________________________________________________

I hereby certify that I have on this day of
examined the above-named __________________________ at ______________
and found as follows : ________________________________

(Sgd. Medical Practitioner)

To: The Director
    National Insurance Corporation.
National Insurance Regulations

PART C

RULES FOR CERTIFICATE OF CONFINEMENT

1. Certificate of confinement or expected confinement shall be written in ink or other indelible substance, signed by a registered medical practitioner or registered midwife attending confinement.

2. The certificate shall be in a form provided by the Director for the purpose, and shall be set out in the Form set out in part B of this Schedule.

3. Every certificate of confinement or expected confinement, shall contain the following particulars:
   
   (a) the woman’s name;
   
   (b) in the case of a certificate of confinement, the date and place of the confinement;
   
   (c) in the case of a certificate of expected confinement, the week in which it is to be expected that the woman will be confined, and the date of the examination on which the certificate is based;
   
   (d) the date on which the certificate is given;
   
   (e) where the certificate is signed by a midwife, her address and the date of her qualifications; and
   
   (f) the signature of the person given the certificate.

4. After a certificate based on an examination has been given, no further certificate based on the same examination shall be furnished other than a certificate to replace an original certificate which has been lost or mislaid, but in that case the form shall be clearly marked “DUPLICATE”.

Made this 24th day of February, 2003.

KENNY D. ANTHONY,
Minister responsible for National Insurance.