EMPLOYER CERTIFICATE AND REQUEST FOR CLAIMS HISTORY
(For Employers Subject to the A.D.A.)

In accordance with the provisions of Idaho Code § 74-105(10)(b), the undersigned requests a copy of a computer claims history search of the last five (5) years of the workers’ compensation records of the Idaho Industrial Commission for the worker identified below. Requester agrees to pay all billable costs incurred in responding to this request under the Idaho Public Records Law.

The undersigned certifies that the requester is the employer or prospective employer of the identified worker and that an offer of employment for the job identified below has already been extended to said worker. The undersigned certifies further that the requested information will only be used in accordance with the provisions of the Americans with Disabilities Act (42 U.S.C. 12112) or other statutory limitations. The undersigned acknowledges that this certificate is made under oath and subject to the provisions of Idaho Code § 18-5401, regarding false statements made under oath.

Worker’s Full Name:* ____________________________________________
Other Names Used: ______________________________________________
Worker’s Address:* ______________________________________________

Worker’s Home Phone #: (___) ______________________
Worker’s Social Security Number:* __ __ __-__ __ __ __

Description of Job Offered to this Worker:* ________________________________
Start Date of Job Offered:* __________________________.
Requester’s (Employer’s):
Name:* __________________________________
Mailing Address:* __________________________________________
Phone #/FAX #/Email: (___) __________/(___) __________/_______________________

Certified By (Signature):*
Printed Name & Title*: ____________________________________________

STATE OF ____________________ )

County of ____________________ ) ss.

SUBSCRIBED AND SWORN TO Before me this ______ day of ____________________, ________.

I.C. RESPONSE/NOTE AREA:
SEND COMPLETED REQUEST TO: IDAHO INDUSTRIAL
COMMISSION, ATTN: RECORDS MANAGEMENT, PO BOX
83720, BOISE, ID 83720-0041  FAX: 208-334-2321
EMAIL: RECORDSMANAGEMENT@IIC.IDAHO.GOV

I.C. Records Form RMR-2
Revised: September 1, 2019

(* = Completion mandatory)