



Prohibited Action

Employer or Union Response

If you have any questions or need help with this form, please call the phone number on page 2. In addition, you may wish to use the free services offered by the Employers' Advisers Office of the Ministry of Labour. Toll-free within Canada at 1.800.925.2233.

WorkSafeBC use only

Prohibited action number

It is important that you respond to this complaint. The *Workers Compensation Act* states ". . . the burden of proving that there has been no such contravention is on the employer or the union, as applicable."

| | | | |
|-----------------|------------------------------|-------------|--|
| Full legal name | Address of employer or union | | |
| City | Province | Postal code | WorkSafeBC firm number (if applicable) |

| | |
|---|-----------------------|
| Name of employer's chief executive officer or owner(s), or union's business agent | Position/Job title(s) |
|---|-----------------------|

| | |
|---|-----------------------|
| Name of official to contact for information concerning this complaint | Position/Job title(s) |
|---|-----------------------|

| | | | |
|----------------|----------|-------------|--------------|
| Office address | | | |
| City | Province | Postal code | Phone number |

| | | | |
|---------------------------------------|---|--|--|
| Nature of undertaking | | | |
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Partnership | <input type="checkbox"/> Sole proprietorship | <input type="checkbox"/> Provincial government |
| <input type="checkbox"/> Crown agency | <input type="checkbox"/> Other (please specify) | | |

If you are disputing the worker's complaint, please provide your own detailed account of the events in question. The information provided should be specific as to date(s), time(s), place(s), and person(s) involved. In particular, if you agree that you took the prohibited action complained of by the worker under section 47 of the Act, why did you do so? Was it in whole or in part for the worker taking any of the actions set out in section 48 of the Act, or was it for other reasons entirely?

If the worker's complaint concerns a failure to pay wages, what is your response? Generally, the best evidence will be from individuals having personal knowledge or involvement in the matter that is the subject of the worker's complaint, and you may provide written statements signed by those individuals. Please also provide copies of any documents that you believe are relevant to this complaint.

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| Comments |
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Representative information

If you have a person representing you, please provide their name, address, and phone number.

| | | | |
|--|-----------------|-------------|--------------|
| Name of representative (if applicable) | Mailing address | | |
| City | Province | Postal code | Phone number |

I certify that the information provided is correct to the best of my knowledge.

| | | | |
|------|--------------------|-----------|-------------------|
| Name | Position/Job title | Signature | Date (yyyy-mm-dd) |
|------|--------------------|-----------|-------------------|

How to submit this form

If you've completed and signed this form digitally, ensure it's saved to your device. You can then [email](#) it to us. If you've printed this form and signed it by hand, you can scan it and email it to us, at prohibitedaction@worksafebc.com or you can mail or fax it to us (see contact information below).

Mail

WorkSafeBC
PO Box 5350 Stn Terminal
Vancouver BC V6B 5L5

Richmond head office

6951 Westminster Hwy.
Richmond BC
V7C 1C6

Phone 604.232.1864
Toll-free 1.888.621.7233, ext. 1864
Fax 604.233.4040

WorkSafeBC collects information on this form for the purposes of administering and enforcing the *Workers Compensation Act*. That Act, along with the Freedom of Information and Protection of Privacy Act, constitutes the authority to collect such information. To learn more about the collection of personal information, contact WorkSafeBC's FIPP Office at PO Box 2310 Stn Terminal, Vancouver, BC, V6B 3W5, email FIPP@worksafebc.com, or call 604.279.8171.