

QUESTIONABLE CLAIM NOTICE

"WE ARE FILING THIS REPORT IN COMPLIANCE WITH THE STATE OF COLORADO WORKER'S COMPENSATION ACT, AT THE REQUEST OF THE EMPLOYEE WHO ALLEGES HE OR SHE WAS INJURED IN AN ACCIDENT ARISING OUT OF AND IN THE COURSE OF HIS OR HER EMPLOYMENT. WE HAVE NO KNOWLEDGE THAT SUCH IS THE CASE, AND DO NOT VOUCH FOR THE TRUTH OF ANY STATEMENTS MADE BY THE EMPLOYEE. WE SERIOUSLY DOUBT HE OR SHE WAS INJURED AS ALLEGED, AND REQUEST AN INVESTIGATION OF THE CIRCUMSTANCES, OR A HEARING IF WARRANTED."

This notice is to be attached to the First Report of Injury and made a permanent part of the claim file. The adjuster is requested to file a temporary denial of liability (D1B) until such investigation can be made by Pinnacol Assurance to ascertain whether the injury or occupational disease occurred as alleged.

SUPPORTING STATEMENT:

SIGNED: _____

DATE: _____

