

WorkplaceNL

**MAIL FORM TO:**  
P.O. Box 9000 St. John's NL A1A 3B8

**CALL US AT:**  
709.778.1000  
1.800.563.9000

**EMAIL FORM TO:**  
info@workplacnl.ca

**VISIT US AT:**  
workplacnl.ca

**FAX FORM TO:**  
709.778.1302  
1.800.276.5257

**Form  
95**

Claim number (worker):

## FORM 95 – EXPENSE FORM

Note: You may submit this form by mail or fax. However, we encourage you to use MyWorkplaceNL online services for best service.

Name:

Full Mailing Address:

PLEASE SEE THE FORM GUIDELINES ON THE BACK

### TRAVEL EXPENSES

**Important:** Medical confirmation for all trips claimed **must** be attached to this form. Indicate the type of travel, where you are travelling and the total return trip in kilometres.

Date of travel	Appointment time	Medical or LMR travel?*	From	To	Total # of kms	Check if you are claiming: Accommodations Meals	

### OTHER EXPENSES

**Important:** Receipts are required for all expenses below.

Description	Amount Claimed

I declare that this form is complete and correct. I understand that giving false information or omitting relevant information is a serious offence.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

For WorkplaceNL Use Only

## EXPENSE GUIDELINES

When you are required to attend an appointment or treatment **outside your home community**, WorkplaceNL will accept responsibility for the payment of your travel costs, including any necessary overnight accommodations, in accordance with the following guidelines:

### Method of travel

1. You will be reimbursed for expenses based on the most economical means of travel available. This usually means bus.
2. If there is no public transportation in your area, you will be reimbursed for travel required to get you to the nearest connecting point for public transportation. Reimbursement will be made in accordance with Newfoundland and Labrador's automobile reimbursement rates applicable on the date of travel.
3. WorkplaceNL will only pay for transportation costs to WorkplaceNL's office if we request your visit.
4. Trips by ambulance or travel attendant/companion require prior authority of WorkplaceNL except under emergency circumstances.
5. All trips must be medically confirmed.
6. Trips to a general practitioner/health care provider outside your community will only be covered if there is no general practitioner/health care provider available in your home community. Travel will be paid to the nearest service provider.

### Overnight accommodations

Please call WorkplaceNL before booking any overnight accommodations. The following may be covered:

1. **All areas:** Reimbursement of \$25.00 per day if staying with relatives or friends (no receipt necessary).
2. **Commercial establishments:** Reimbursement of commercial establishment (e.g., hotels, motels) costs will be based on minimum rates for the geographic location and availability (consultation with WorkplaceNL in advance and receipts are required).

### Meals

[Please refer to Procedure 60.00](#)

### Labour Market Re-entry (LMR) Travel

WorkplaceNL will reimburse necessary and appropriate travel and parking expenses (excluding parking tickets) incurred during a LMR assessment or plan. Reimbursement will be made in accordance with Newfoundland and Labrador's automobile reimbursement rates applicable on the date of travel.

For further information please contact WorkplaceNL.

\*Medical Travel: Any travel related to attending treatment or rehabilitation, specialists, doctors or diagnostics.

\*LMR Travel: Any travel related to attending vocational rehabilitation appointments including LMR assessment with a vocational rehabilitation provider or to attend schooling.