

SUBSIDIARY LEGISLATION

SECTION 109-THE WORKERS' COMPENSATION (PRIVATE DOMESTIC SERVANTS) REGULATIONS

***Statutory
Instrument
197 of
1973***

Regulations by the Minister after consultation with the Workers'
Compensation Fund Control Board

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|--|---|
| 1. These Regulations may be cited as the Workers' Compensation (Private Domestic Servants) Regulations. | Title |
| 2. The rate of assessment payable by an employer in respect of every private domestic servant employed by him shall be ten ngwee for every month during which he employs such domestic servant in his private dwelling house for a period exceeding thirteen days (including Sundays and public holidays). | Rate of assessment |
| 3. Every employer to whom section <i>one hundred and nine</i> of the Act applies shall pay the assessment with the domestic contribution to the Zambia National Provident Fund in accordance with the provisions of the Zambia National Provident Fund (Domestic Servants) Regulations, 1973. | Payment of assessment
<i>Statutory
Instrument.
194 of 1973</i> |

THE WORKERS' COMPENSATION REGULATIONS [ARRANGEMENT OF REGULATIONS]

Regulation

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1. These Regulations may be cited as the Workers' Compensation Regulations.

Title

2. (1) In these Regulations, unless the context otherwise requires-
 "notice" means notice in writing;
 "party" means any person who is a party to any proceedings under the Act, and includes a person appearing for a party;
 "send" means to post by prepaid registered post;

Interpretation

"sign" includes the making by a person of a mark, attested by two competent witnesses testifying that such mark was made by such person in their presence, and "signature" includes a mark so made.

(2) Where in these Regulations reference is made to a particular form or forms, such reference shall be to be the form or forms contained in the First Schedule.

3. An objection, in terms of section *nineteen* of the Act, shall be in the form and contain the information required in Form 1, and shall be deemed to have been lodged on the date of receipt by the Commissioner of the said form, duly completed in respect of every relevant item. Objections

4. (1) Where it is proposed to hold a formal inquiry to consider and determine an objection, in accordance with the provisions of section *twenty-one* of the Act, the Commissioner shall ascertain the material questions in dispute, and shall reduce such questions into writing and shall fix a time and place for the holding of a formal inquiry into such questions. Formal inquiry by Commissioner

(2) The Commissioner shall thereupon cause a notice in the form and containing the information set out in Form 2 to be sent by prepaid registered post to the parties. Such notice shall state the material questions in dispute and the time and place fixed by the Commissioner for the holding of a formal inquiry.

(3) Every party to a formal inquiry may appear in person or may be represented-

(a) by a legal practitioner; or

(b) by a member of his family; or

(c) by a person in the permanent and exclusive employment of such party; or

(d) in the case of a worker by an officer of a trade union or of an organisation approved by the Minister or, in the case of an employer, by an officer of an employers' organisation; or

(e) by an officer of the Labour Department; or

(f) in the case of a company, by any director, secretary or other officer thereof, and, in the case of a body corporate which is not a company, by an officer thereof; or

(g) by leave of the Commissioner, by any other person.

(4) No person other than a legal practitioner shall be entitled for so appearing to recover any fee or reward except necessary out-of-pocket expenses.

(5) Upon the holding of the inquiry the Commissioner shall receive any evidence presented by the parties which he deems relevant to any question which he has to determine and may call for and receive any evidence which he deems necessary. The Commissioner may receive and have regard to a report of a medical or surgical practitioner registered in the Commonwealth or in the Republic of South Africa as to the mental or physical condition of any person in respect of whom the dispute exists or the application for revision of any award or agreement has been made.

(6) The Commissioner may from time to time adjourn or postpone any inquiry for such periods and for such reasons as he may think fit.

(7) The Commissioner shall keep or cause to be kept a true record of any proceedings before him upon any formal inquiry and upon payment of a fee to be fixed by the Commissioner any person may at any time obtain copies of the record or any part thereof.

(8) The Commissioner may appoint any person to take down in shorthand a note of oral evidence and proceedings; and such appointment may be made either generally for the purposes of all formal inquiries held by the Commissioner or specially for the purposes of any particular formal inquiry. Such person shall take an oath to the satisfaction of the Commissioner for the accurate and faithful recording of such evidence.

(9) The Commissioner shall have the power to award costs at his discretion.

(10) All costs awarded by the Commissioner shall be taxed and recoverable in manner prescribed by the law or rules governing costs in civil actions in the subordinate courts of Zambia. For the purpose of the taxation of costs, the clerk of a subordinate court (Class I) shall be the Taxing Master. Any costs awarded against a worker on any issue on which he has been unsuccessful may be set off by the Commissioner or by the exempted employer, as the case may be, by order of the Commissioner, in paying any compensation awarded to that worker:

Provided that if compensation is payable monthly or weekly the maximum amount that may be set off in respect of any one month or week shall not exceed one-quarter of the monthly or weekly payments due to the worker.

(11) The fees and expenses payable to witnesses in connection with a formal inquiry shall be as set out in the Third Schedule to the Subordinate Courts (Civil Jurisdiction) Rules. Cap. 28

(12) (a) The findings of the Commissioner shall be pronounced by him either immediately after the conclusion of the inquiry or as soon as is reasonably practicable thereafter at some subsequent date.

(b) As soon as practicable after the conclusion of the formal inquiry the Commissioner shall send by prepaid registered post to the parties a copy of his decision and order, which shall be in the form and contain the information required in Form 3.

(13) If any party does not appear at the time and place fixed for the formal inquiry, the Commissioner may in his discretion proceed with the inquiry and may determine the matters in dispute and make an order, or he may postpone or adjourn the inquiry and cause a notice to be sent by prepaid registered post to the parties notifying them of the postponement or adjournment and of the time and place he had fixed for the holding or continuing of the inquiry:

Provided that, if the Commissioner has in terms of this regulation

determined the matters in dispute and has made an order, he may set aside the order and reopen the inquiry on good cause shown within fourteen days of the date on which the order was made and may make such further orders as he deems fit.

(As amended by No. 381 of 1964 and No. 156 of 1965)

- | | |
|---|--|
| <p>5. The remuneration, travelling and subsistence expenses payable to an assessor appointed in terms of section <i>twenty-six</i> of the Act shall be in accordance with the scale prescribed in the Second Schedule.</p> | <p>Expenses of assessors</p> |
| <p>6. The remuneration, travelling and subsistence expenses payable to any person chosen as a member of the Workers' Compensation Appeal Tribunal, in terms of section <i>twenty-seven</i> of the Act, shall be in accordance with the scale prescribed in the Third Schedule.</p> | <p>Expenses of members of Tribunal</p> |
| <p>7. The scale of fees and expenses payable to witnesses, in terms of section <i>thirty-seven</i> of the Act, shall be as set out in the Witnesses and Assessors Allowances Rules.</p> | <p>Expenses of witnesses
Cap. 27</p> |
| <p>8. (1) Any agreement made, in terms of sub-section (2) of section <i>forty-five</i> of the Act, shall be in writing and signed by the parties thereto, and shall contain the particulars set out in Form 4.</p> | <p>Agreements</p> |
| <p>(2) The employer shall submit such agreement not later than fourteen days after the making thereof, together with a registered medical practitioner's certificate containing the particulars set out in Form 5.</p> | |
| <p>9. For the purposes of section <i>sixty-nine</i> of the Act, the prescribed amount shall be one thousand kwacha per month.</p> <p><i>(As amended by S.I. no. 31 of 1995)</i></p> | <p>Prescribed amount of pension</p> |
| <p>10. A report of an accident to a worker made by an employer to the Commissioner, in terms of sub-section (1) of section <i>seventy-five</i> of the Act, shall be in the form and contain the information set out in Form 6.</p> | <p>Report of accident by employer</p> |
| <p>11. The register of accidents which an employer is required to keep, in terms of sub-section (4) of section <i>seventy-five</i> of the Act, shall contain the particulars set out in Form 7.</p> | <p>Register of accidents</p> |

12. The prescribed amount for the purposes of paragraph (b) of sub-section (4) of section *ninety-nine* of the Act to be paid by an insurer or exempted employer shall be one per centum of the compensation, including medical aid, paid by such insurer or exempted employer who has not transferred the obligations referred to in sub-section (2) or (3) of section *ninety-nine* to the Board within the period specified in the said paragraph (b) of sub-section (4) of section *ninety-nine*.

Prescribed
amount of
payments to
Board

(No. 230 of 1965)

13. (1) Every employer desiring to be exempted, in terms of section *one hundred and five* of the Act, from the necessity of paying assessments, shall apply to the Commissioner for a certificate of exemption. The application shall be in the form and contain the information required in Form 8.

Exemption

(2) Every such employer shall, before a certificate of exemption is granted to him, furnish the Commissioner with full information in regard to the fund to be established and maintained by him, in terms of sub-section (1) of section *one hundred and five* of the Act.

(3) For a certificate of exemption, or for the renewal thereof, such employer shall pay to the Commissioner before the said certificate is issued, the sum of seventy-five fee units.

(4) Every certificate of exemption shall expire on the 31st March in each and every year.

(5) Should an employer not wish to renew his certificate of exemption after its expiration, he shall give notice to that effect to the Commissioner not later than three months before the date of expiration.

(6) If at any time the Minister is satisfied that an exempted employer has failed to comply with any of the provisions of this regulation, he may cancel the certificate of exemption granted to such employer.

(7) After an employer has ceased to be exempted from the necessity of the payment of assessments, he shall still remain liable in respect of all

obligations to his workers which have arisen, or which may arise, in respect of the period during which he was so exempt, and the amount of cash or securities deposited by him, in terms of sub-section (1) of section *one hundred and five* of the Act, will not be released unless in respect of reduction of liability of the employer proved to the satisfaction of the Commissioner. Any balance retained by the Commissioner will be released upon proof that all liabilities of the employer have been discharged.

(8) Whenever compensation is payable by an exempted employer, in terms of sections *sixty-one* and *sixty-two* of the Act, he shall forthwith notify the Commissioner of the fact, and shall furnish him with all available information in respect of each such case and shall await his directions in regard to the payment of such compensation.

(9) Every exempted employer shall transmit to the Commissioner on or before the 1st June in each year, a certified copy of his latest duly audited trading account, profit and loss account and balance sheet together with-

(a) a statement of pensions payable by him under the Act as required in Form 9;

(b) a statement of children's allowances payable by him under the Act as required in Form 10;

(c) a statement containing details of outstanding claims as at the 31st March preceding, as required in Form 11;

(d) a statement in the form and containing the information required in Form 12 of wages paid during the previous twelve months ending the 31st March.

(10) Every exempted employer shall transmit to the Commissioner, within thirty days after the end of each month, returns in the manner and containing the information required in Form 13, showing all claim payments made by him during such month.

(11) Should an exempted employer fail to meet any claim for compensation or medical aid for which he may have become liable under the Act, the Commissioner shall have the right to withdraw from

the deposit made by such employer, in terms of sub-section (1) of section *one hundred and five* of the Act, sufficient money, and shall have the right to sell such securities forming part of the said deposit as will realise sufficient money, for the purpose described in this sub-regulation.

(12) An exempted employer shall not be entitled to a refund of any portion of the fee paid by him under sub-regulation (3) if, in terms of the provisions of sub-regulation (6), the Minister has cancelled the certificate of exemption granted to the employer.

(13) Every exempted employer shall keep all accounts and records of all payments by him in respect of workers' compensation under the Act separate from the records of his other business transactions.

(As amended by Act No. 13 of 1994)

14. A statement transmitted to the Commissioner by an employer in terms of sub-section (1) of section *one hundred and six* of the Act shall be in the form and contain the information set out in Form 14.

Statement by employer

(As amended by No. 143 of 1965)

15. The particulars of business which an employer is required to furnish to the Commissioner, in terms of sub-section (1) of section *one hundred and eleven* of the Act, shall be in the form and contain the information set out in Form 15.

Particulars of business

16. The particulars of employers required to be furnished by an insurance company, in terms of sub-section (1) of section *one hundred and twenty-one* of the Act, shall be in the form and contain the information set out in Form 16.

Particulars of employers

17. (1) All moneys payable under the Act to any person shall be paid as soon as possible after the date on which they become payable.

Early payment to be made

(2) If the Commissioner, or the employer individually liable, as the case may be, is unable to trace the payee, and any such moneys accordingly remain unpaid after the expiration of twelve months of the date on which they became payable, the following procedure shall be adopted:

(a) Details of all such amounts payable to persons other than persons from outside Zambia shall be notified in the *Gazette* and in a local newspaper by the Commissioner, both in respect of moneys payable from the Fund and moneys payable by employers individually liable, who shall advise and pay to the Commissioner such moneys every quarter. Such notice shall call upon any person claiming payment of any such amount to lodge his claim with the Commissioner within a period of one month of the date thereof. If, at the expiration of the said period, no claim has been lodged, or if any claim has been lodged and rejected by the Commissioner, the amount shall be paid into the reserves of the Fund:

Provided that if at any subsequent date a claim is lodged with the Commissioner and proved to his satisfaction he shall pay the amount of the said claim.

(b) Any such unpaid moneys payable to persons from outside Zambia shall be paid to the government of the country in which such person is domiciled, or to the local representative in Zambia of such government; and any subsequent claim for payment of any such amount shall be referred to the government concerned for consideration.

(As amended by No. 156 of 1965)

FIRST SCHEDULE

PRESCRIBED FORMS

FORM 1 **(Section 19)** **(Regulation 3)**

THE WORKERS' COMPENSATION ACT

This objection must be lodged with the Workers' Compensation Commissioner, P.O. Box 71534, Ndola, within thirty days of the date of the Commissioner's decision.

(NOTE.-"Lodged within thirty days" means that the objection must reach the Commissioner within thirty days of the date of his decision.)

NOTICE OF OBJECTION

Name of workman

Name of employer

1. Full name and address of objector

Full name and address of legal practitioner or other representative, if any

2. State whether objector is-

(a) the worker or

(b) the employer or

(c) an employer's organisation or trade union of which the person in respect of whom the decision was given, was at the relevant times a member

(NOTE.-The word "Yes" should be written against (a), or (b), or (c), whichever is applicable.)

3. Quote the reference number and date of the document containing the Commissioner's decision against which the objection is lodged

4. State fully what portion of the Commissioner's decision you object to

5. Give your reasons in full for lodging the objection

6. State the relief or order which you claim, or the question which you desire to have determined

7. Any documentary evidence (or copies thereof) which you wish to submit in support of your contentions as stated in paragraph 5 should be attached and enumerated hereunder:

<i>Number</i>	<i>Title or description of document</i>
(i).....	
(ii).....	
(iii).....	
(iv).....	

8. Give names and addresses of persons whom you wish to be called as witnesses to give evidence in support of your objection:

<i>Name</i>	<i>Address</i>
.....	
.....	
.....	
.....	

9. On what points *briefly* will they give evidence?

- (i).....
- (ii).....
- (iii).....
- (iv).....

Place.....

Date

Signature of Objector

NOTE.-Where the objector is an employer individually liable, this form must be accompanied by a statement as to whether he admits his liability to pay compensation or denies such liability, and whether the admission or denial is total or partial, and if he admits or denies liability partially, a statement of the extent to which he admits or denies liability and, in the case of a denial of liability, the grounds thereof shall be stated.

FORM 2
(Regulation 4 (2))

THE WORKERS' COMPENSATION ACT

NOTICE OF THE COMMISSIONER'S INTENTION TO HOLD A FORMAL INQUIRY

Inquiry No.

In the matter of the dispute or application between:

Applicant

and

Respondent

Date

To

of

Take notice that the material questions in dispute between the parties are

The Commissioner will hold a formal inquiry at (time) on
the (date) in the (place) to determine the
questions in dispute and you should attend at that time and place together with your
witnesses, if any, as to such questions.

Workers' Compensation Commissioner

FORM 3
(Regulation 4 (12) (b))

THE WORKERS' COMPENSATION ACT

NOTICE OF ORDER MADE BY THE COMMISSIONER ON A FORMAL INQUIRY

Inquiry No.

In the matter of the dispute or application between:

Applicant

and

.Respondent

Date

To

of

The material questions in dispute between the parties were

The decision of the Commissioner on these questions is

And the Commissioner orders that

Workers' Compensation Commissioner

FORM 4
(Section 45)
(Regulation 8 (1))

THE WORKERS' COMPENSATION ACT

AGREEMENT

MEMORANDUM OF AGREEMENT made and entered into between (1)
(hereinafter referred to as the employer) of the one part, and (2)
(hereinafter referred to as the worker) of the other part.

WHEREAS both the employer and the worker declare that they are acquainted with the liabilities, rights, privileges and benefits contained and set out in the Workers' Compensation Act:

AND WHEREAS the worker is specially liable to meet with an accident or if he meets with an accident, to sustain serious injury in his employment as a (3)
by reason of (4)
mentioned in the certificate by the registered medical practitioner annexed hereto, it is hereby agreed between the worker and the employer that in the event of the worker meeting with an accident whilst in the employ of the employer the rights of the worker or his dependants to compensation under the Workers' Compensation Act shall be limited to (5)
per centum of the compensation which would otherwise
be payable under the said Act.

Signed at this day
of 19

Witness:

.....
.....

Employer

Witness:

.....
.....

Worker

Approved under section 45 of the Workers' Compensation Act, this
day of 19

Workers' Compensation Commissioner

NOTES

- (1) Full name of employer.
- (2) Full name of worker.
- (3) State nature of work on which worker is engaged.
- (4) State "old age", "serious physical infirmity", or "previous injury", as the case may be.

(5) State percentage.

FORM 5
(Regulation 8 (2))

THE WORKERS' COMPENSATION ACT

CERTIFICATE OF REGISTERED MEDICAL PRACTITIONER

IT IS HEREBY CERTIFIED by me, pursuant to section 45 of the Workers' Compensation Act, that I have this day examined (1)
and that by reason of (2)-

- (a) old age (state age)
- (b) serious physical infirmity (state nature of)

- (c) previous injury (state nature of)

he is specially (3) liable to meet with an accident or to sustain a serious injury if employed as a

I assess the degree of disability at per centum.

Dated this day of 19

Registered Medical Practitioner

Address

NOTES

- (1) Full name of worker.
- (2) Strike out words not applicable.
- (3) Registered medical practitioners should note that section 45 (2) of the Act has used the words "specially liable" and not merely "more liable" and regard should be had before issuing the certificate, not only to the age, serious physical infirmity or previous injury of the worker, but also to the nature of the work in which he is employed at the time.

FORM 6
(Section 75)
(Regulation 10)

THE WORKER'S COMPENSATION ACT

For official use
Claim Number:

EMPLOYER'S REPORT OF AN ACCIDENT TO A WORKER

To be addressed to:

The Workers' Compensation Commissioner
P.O. Box 71534, Ndola

Employer:

Name under which trade or business is
carried on (block capitals):

Address

Worker:

Full name
(block capitals)

Residential
address

Occupation

Age	Sex

- 1.(a) How long has he been in your employ?
- (b) If not in your direct employ, give the name and address of the sub-contractor
- (c) Prior to this accident had he, to your knowledge, any physical defect or did he suffer from any serious disease? If so, give details.

2. *Earnings:*

- (a) Wages (excluding bonus, commission or allowances).

Per Hour	

<p>(b) Normal working hours: per week or per shift</p> <p>(c) Monthly cost-of-living allowance</p> <p>(d) Monthly other allowances (specify)</p> <p>(e) Monthly value of free food supplied</p> <p>(f) Monthly value of free quarters supplied</p>	
<p>3. (a) Has he previously received compensation for permanent disablement?</p> <p>(b) If so, when and by whom employed?</p>	
<p>4. Accident:</p> <p>(a) Where did it occur? (State site, e.g., workshop, underground, etc.)</p> <p>(b) When did it occur?</p> <p>(c) When did the worker report it?</p> <p>(d) If he failed to report it on the same day, what is his explanation?</p> <p>(e) What was the worker doing when it occurred?</p> <p>(f) Describe cause, mentioning contributory factors and any part of premises, plant or machinery connected with the accident.</p> <p>(g) Did it result from action properly within the scope of the worker's duties? If not, please attach explanatory statement.</p>	
<p>5. Was the accident caused by-</p> <p>(a) deliberate violation of rules?</p> <p>(b) drunkenness?</p> <p>(c) deliberate contravention of any law made for the purpose of ensuring the safety of workers? (If reply is in the affirmative, please attach explanatory statement.)</p>	
<p>6. Give the names and addresses of witnesses to the accident.</p>	
<p>7. Was the accident caused by the action of a person other than the worker? If so, give his name and address</p>	
<p>8. Has notice been received of any magisterial or other official inquiry? If accident was investigated by the Police, state name of Police Station</p>	
<p>9. <i>Particulars of disablement:</i></p> <p>(a) Describe the nature and extent of the injuries sustained, mentioning parts of the body, and in the case of limb, or eye, stating right or left side.</p> <p>(b) When did the employee cease work as a result of the accident?</p> <p>(c) State probable period worker will be off duty</p> <p>(d) Name and address of doctor attending the</p>	

worker
(e) If in hospital, give name and address.

I hereby certify that, to the best of my knowledge and belief, the particulars furnished in this report are true and correct.
Date.
.....

Employer's Signature

For Official Use Only				
Date received	Employer's number	Premium checked by	Claim accepted by	Claim rejected by

FORM 7
(Section 75)
(Regulation 11)

THE WORKERS' COMPENSATION ACT

EMPLOYER'S REGISTER OF ACCIDENTS TO WORKERS

Name and address of employer.

Accident No.	Date of accident	Name of worker	Residential address of worker	Village/ Chief/ District/ of worker if applicable	Cause of accident	Nature of injuries received	Date of reporting accident to Commissioner

FORM 8
Regulation 13 (1)

THE WORKERS' COMPENSATION ACT

APPLICATION FOR EXEMPTION IN TERMS OF SECTION 105 OF THE ACT

1. Employer's name
2. Postal address
3. Address at which workers are to be engaged
4. Nature and particulars of work, trade or business of employer.

5. SCHEDULE

NOTES

- (1) Salaries and wages must include the value of house rent, food, commission, etc., paid or supplied by the employer. (*See* section 67 of the Act.)
- (2) Workers shown in one class must not be shown in another class.
- (3) Workers whose basic rate of pay exceeds K4,800 a year must not be included.
- (4) This application must be accompanied by a certified copy of the last balance sheet, and of the trading, profit and loss accounts.

Classification of Worker	Workers whose basic rate of pay does not exceed K4,800 a year	Estimated annual wages	For official use only
(a) Engaged with woodworking machinery		..	
(b) Engaged with machinery other than wood-working			
(c) Not engaged with machinery			
(d) Engaged with or handling explosives			
(e) Workers whose duties involve underground work			
(f) Clerical staff			
(g) Salesmen (in retail shops only)			
(h) Commercial travellers
(i) Drivers and wagon attendants
(j) Workers making use of aircraft
(k)			
(l)			

6. Do you carry on more than one business in any one building? If so, specify
7. (a) Have you any machinery driven by electricity, steam, water, or any other mechanical power? If so, state particulars
- (b) Are your machinery, plant, and ways properly fenced and guarded and otherwise in good order and condition?
8. State what acids, chemicals or explosives will be used
9. State number of workers using motor-cycles in connection with your business
10. Has any company refused to accept any proposal for insurance, increased your premium on renewal, refused

- renewal, cancelled your policy? Give full particulars
11. Were you insured during the last ten years? State name(s) of companies
 12. Give full particulars of all accidents to your workers during the last ten years; the extent and nature of the injuries and the compensation paid in each case
 13. State any special circumstances in connection with your business which tend to make the risk more than usually hazardous
 14. (a) What is the amount of the fund at present?
 (b) What will be the initial amount of the fund if exemption is granted?
 (c) What amount will be added annually?
 (d) In what securities will the fund be invested?
 15. (a) What amount do you consider a fair estimate of the average annual expenditure on workers compensation under the Act?
 (b) Please give full particulars of how the estimate has been arrived at

I certify that the foregoing information is true and correct.
 Date

.....
Signature of Employer

FORM 9
(Regulation 13 (9) (a))

THE WORKERS' COMPENSATION ACT

To be completed by Exempted Employers

Statement of Capitalised Value of Pensions (1) as at 31st March, 19, by

Claim No	Name of pensioner	State whether Name of pensioner whether married, widow, widower, single, divorced	If pensioner is a male and has a wife dependent on him, give date of birth of wife	Sex	State whether pensioner is a workman or widow of a worker	Date from which pension is, or will be, payable	Age of pensioner at nearest birthday	Disablement of worker (2)	Monthly earnings of worker on which pension is, or will be, based	Gross annual pension	Amount of annual pension commuted (3)	Net annual pension payable

Auditor

Signature

Date

Address

Date

Notes

This statement must be submitted to the Workers' Compensation Commissioner on or before the 1st June in each year.

Where the pension payable has been commuted in full and paid prior to the 31st March, the pension should not be included in this return.

- (1) A children's allowance is *not* a pension and a separate statement in respect of children's allowances must be rendered on Form 10.
- (2) State fatal or permanent. If permanent give degree of disablement. If a permanently injured worker in receipt of a pension dies and his widow becomes the pensioner state degree of disablement of the deceased worker and the date of his death.
- (3) Where part of a pension has been commuted, the commuted value should not be deducted unless payment thereof was made on or before the 31st March.

FORM 10
(Regulation 13 (9) (b))

THE WORKERS' COMPENSATION ACT

To be completed by Exempted Employers

Statement of Capitalised Value of Children's Allowances as at 31st March, 19..... by

Claim No.	Name of Worker in respect of whom children's allowance is payable	State whether married, widow, widower or divorced	Disability of Worker (1)	Amount of monthly pension on which allowance is based	State whether allowance is payable in accordance with Third or Fourth Schedule to Act	Date from which allowance is, or will be, payable	Names of child or children	Dates of birth of children	Age of child, nearest birthday	Nearest number of years allowance has to run. Annuity value (each child)	Annual amount of allowance	
											Applicable to each child	Total payable for children of s wor

Auditor

.....Signature

Date

Address

.....

Date.....

Notes

This statement must be submitted to the Workers' Compensation Commissioner on or before the 1st June in each year.
(1) State if fatal or permanent. If permanent give degree of disablement. If a permanently injured worker in receipt of a pension dies and his children are in receipt of an allowance state, in addition to the degree of permanent disablement, the date on which the workman died.

FORM 11
(Regulation 13 (9) (c))

THE WORKERS' COMPENSATION ACT

To be completed by Exempted Employers

Statement of Outstanding Claims as at 31st March, 19.....
 To be completed in duplicate and forwarded to reach the Workers' Compensation Commissioner on or before the 1st June in each year.

Name and Address of Exempted Employer

Injured or deceased worker					Accident	Dependants (3)					
Name	Age (1)	Occupation	Earnings (2)	Date	Details (medical certificates must be enclosed showing nature and extent of injuries, probable result of accident, estimated cost of medical aid and estimated duration of disablement)	Name	Relationship to workman	Date of birth	Periodical payments	Lump sum	Capitalised pension
Total									..		

I certify that the foregoing particulars are true and correct:
 foregoing information it is considered that an amount of K

From the

Date Signature of Employer is

- required in respect of outstanding claims.
 (1) If exact age not known, state estimated age.
 (2) Specify weekly or monthly earnings and, if food and/or quarters are supplied, the value must be included.
 (3) To be completed only in respect of workers fatally injured or permanently disabled.

FORM 12
(Regulation 13 (9) (d))

THE WORKERS' COMPENSATION ACT
ANNUAL RETURN OF WAGES PAID BY EXEMPTED EMPLOYERS

To be completed by Exempted Employers Form 12

Exemption Certificate No.

Name, Address and Business of Employer

Notes-(1) Wages and salaries must include the full value of rent, food, etc., paid or supplied by the employer.
(2) This statement, duly completed in duplicate, must reach the Workers' Compensation Commissioner on or before the 1st June in each year.

(1) Classification of workers	Number of workers	Wages paid in respect of basic wages except
(a) Engaged with woodworking machinery		
(b) Engaged with machinery other than woodworking		
(c) Not engaged with machinery		
(d) Engaged with handling explosives		
(e) Workers whose duties involve underground work		
(f) Clerical staff		
(g) Salesmen (in retail shops only)		
(h) Commercial travellers		
(i) Drivers and wagon attendants		
(j) Amount paid to contractors (2) as wages of workers (see section 10 of the Act)		
.. .. .		
(k) Workers making use of aircraft		
Workers not included in the above (specify):		
(l), (m), (n)		
Totals		

(1) The number of workers and wages paid in respect of the same class of work must not appear under more than one heading.

(2) If liability for work of contractors has been assumed, then item (j) must be completed, if not, please complete the following particulars:

Name of contractor

Address

Nature of work performed and period

.....

.....

Amount paid to contractor.....

.....

Amount of licence fee payable
Licence
..... on
K

Total

Date

Date Certified correct Signature
of Employer Remarks
Date
of Auditor Signature

- (3) State briefly cause of accident or cause of death naming the object which was the immediate cause of the accident. For example: "Struck by fall of rock", "Run over by cocopan", "Buried by fall of earth", "Slipped and fell from scaffolding", "Spanner slipped", "Splashed by copper", etc.
- (4) Nature and location of injury should be described briefly in such terms as will convey full information, using such phrases as amputation, burns, scalds, cuts, lacerations, strain, sprain, fractures, etc. The exact location must be indicated and in cases of all injuries to a member whether it is right or left member. For example: "Fracture of tibia right leg", "Right arm amputated between wrist and elbow", "Amputation two phalanges right index finger and one phalanx middle finger left hand", "Foreign body left eye", "Loss of use of right arm", etc.
- (5) State whether fatal, giving date of death; whether permanent, giving percentage of disablement; or total or partial, giving period of disablement.
- (6) State site, e.g., workshop, yard, track, etc.
- (7) Earnings means salaries, wages, commissions, cost-of-living allowances and other payments, including overtime if of a constant character or for work habitually performed, and must also include the value of food and quarters provided.
- (8) This column is to be used to record payments in respect of transportation of injured workers, constant attendance (section 70), etc., and an appropriate suffix should be added to indicate the nature of the payment, i.e., Transport (T); Burial Expenses (B); Constant Attendance (C); etc.

The above statement, duly completed, must reach the Workers' Compensation Commissioner not later than thirty days after the last day of the month in respect of which the return is rendered.

FORM 14
(Section 106 (1))
(Regulation 14)

THE WORKERS' COMPENSATION ACT

ESTATE AND STATEMENT OF EARNINGS OF WORKERS

This form must be completed and returned to the Workers' Compensation Commissioner, P.O. Box 71534, Ndola, not later than 19, or within fourteen days of the commencement of business, whichever date is the later.

--

Separate Forms Must be used for Each Class of Business Carried on by Employer

<p>1. Is your name and address correctly shown above? If so, simply state "Yes"; if not, insert correct name and postal address in block capitals.</p> <hr/> <p>2. State names and addresses of all branches, etc., covered by this return. If insufficient space, please answer fully on separate sheet ..</p> <hr/> <p>3. Has there been any change in the nature of your trade or in the type of work in which your workers are employed since you completed and returned Form 15 ("Particulars of Business")? If so, please detail; if not, simply state "No".</p>	
--	--

4. Estimate of Earnings
 Give an estimate to the nearest K of the total earnings which you expect to pay during the financial year 1st April, 19 to 31st March, 19 in respect of workers (male and female) whose basic rate of pay does not exceed K per annum.
 (For definition of "earnings", see section 2 of the Act.)

Average number of workers likely to be employed <i>per month</i>	
Average number of workers likely to be supplied with food and quarters <i>per month</i>	
Total earnings of all workers during the year, excluding food and quarters	
Total cash value of food to be supplied by the employer to all workers <i>during the year</i>	
Total cash value of quarters to be supplied by employer to all workers <i>during the year</i>	
Total Earnings for Assessment	

Average number of workers employed	
Average number of workers supplied with food and/or quarters	
Total earnings of all workers, excluding food and quarters	
Total cash value of food supplied by employer to all workers	
Total cash value of quarters supplied by employer to all workers	

3. Is your name and address correctly shown overleaf? If so, simply state "YES"; if not, insert correct name and postal address in BLOCK CAPITALS.	
--	--

4. State names and addresses of all branches, etc., covered by this return. If insufficient space, please answer fully on separate sheet.	
---	--

5. State the precise nature of your trade, work, business or profession.	
--	--

Notes:

- (1) Earnings means salaries, wages, commissions, cost-of-living allowances and other payments (including overtime) if of a constant amount paid during the financial year. (See section 67 of the Act.)
- (2) All earnings paid or to be paid by sub-contractors not otherwise registered as employers with the Workers' Compensation Commission are to be included.
- (3) Intermittent overtime and sums paid or to be paid under any Provident Fund, or by way of pension, are not to be included.

I hereby certify that to the best of my knowledge all particulars in this return are true, correct and complete, and that the estimates are fair and reasonable.

Date

Signature

(No. 24 of 1970)

FORM 15
(Section 111)
(Regulation 15)

THE WORKERS' COMPENSATION ACT

Financial Year

PARTICULARS OF BUSINESS

This form must be completed and returned, not later than
or within fourteen days of the commencement of business, whichever date is the later, to the Workers' Compensation
Commissioner, P.O. Box 71534, Ndola.

SEPARATE FORMS MUST BE USED FOR EACH CLASS OF BUSINESS CARRIED ON BY EMPLOYER

Note.-Replies to Questions 9 and 10 must give full details of all activities carried on, as this information determines the
premium rating.

1. Employer's name (in full) (block capitals) . . .	
2. Employer's postal address and telephone number	
3. Employer's business (street) address . . .	
4. Name under which business is carried on (block capitals)	
5. Names of partners (if any) (block capitals) . . .	
6. Registered name of company (limited liability companies only)	
7. State whether business commenced before 1st April, 1964	Yes/No
8. If business commenced on or after 1st April, 1964, state date on which business commenced	
9. State the precise nature of your trade, work, business or profession	
.....	
.....	
.....	
.....	
10. Give a general description of the various types of work in which your workers will be engaged (e.g., commercial travellers and warehousing; workshop and sales; soft goods only; machinery sales, installation and repairs)	
.....	
.....	
11. What type of business licence do you hold?	
.....	
12. State the names of all branches covered by this return, the nature of business of each branch and the town or suburb in which branch is situated. (Note.-Subsidiary limited liability companies must be registered on a separate form.)	
.....	
.....	
13. Have you previously been insured against Workers' Compensation risks? If so, state:	
(a) under what name	
(b) name of insurance company	

14. I hereby certify that, to the best of my knowledge, all particulars in this return are true.
Date

*Signature of employer or his duly
authorised agent*
(No. 381 of 964)

(Section 121)
(Regulation 16)

THE WORKERS' COMPENSATION ACT

be completed by Insurance Companies

PARTICULARS OF EMPLOYERS

Policy No.

Employer's name

Employer's postal address

Classification and Code No. of trade or business carried on by Employer

Workers employed in such trade or business whose basic rate of pay does not exceed K4,800 (male or female)	Number employed	Remuneration		
		A. If Wages Declaration Available		B.
		Earnings exclusive of food and quarters for period 1st April, 1962, to 31st March, 1963. (See Note 1)	Value of food and quarters supplied by employer for period 1st April, 1962, to 31st March, 1963 (See Note 2)	Estimated earnings exclusive of food and quarters for period from to (See Note 3)
Workers				

Earned premium if wages declaration available K

If no wages declaration available, premium paid on estimated earnings K

In each case, please state exact period covered by premium paid.

Note-1. If earnings declared do not cover period 1st April, 1962, to 31st March, 1963, please state period to which earnings declared relate.

2. If value of food and quarters supplied have been included in earnings, please so state.

3. Please state period covered by estimated earnings and amount of earnings.

4. If value of food and quarters supplied have been included in estimated earnings, please so state.

SECOND SCHEDULE

(Regulation 5)

EXPENSES OF ASSESSORS

Any person appointed as an assessor, in terms of sub-section (1) of section 26 of the Act, shall, whilst engaged in any sitting or work of a formal inquiry, under the provisions of section 21 of the Act, be paid out of the Fund remuneration and reasonable expenses for travelling and subsistence in accordance with the following tariff:

- (a)* For every day or part thereof: K8.40 per day.
- (b)* The cost of his air or train fare.
- (c)* For each mile of any journey by motor transport, provided that the journey could not conveniently be undertaken by train or air: 15n per mile.
- (d)* For each day he is absent from his town of residence and incurs expense: K8.00 per day.

THIRD SCHEDULE

(Regulation 6)

EXPENSES OF MEMBERS OF TRIBUNAL

Any person chosen as a member of the Workers' Compensation Appeal Tribunal shall, whilst engaged in any sitting or any work of the Tribunal, receive from moneys appropriated by Parliament, remuneration and reasonable expenses for travelling and subsistence in accordance with the following tariff:

- (a)* For every day or part thereof: K20.00 per day.
- (b)* The cost of his air or train fare.
- (c)* For each mile of any journey by motor transport, provided that the journey could not conveniently be undertaken by train or air: 15n per mile.
- (d)* For each day he is absent from his town of residence and incurs expense: K8.00 per day.

(As amended by No. 156 of 1965)

NOTICE AND RULES MADE UNDER THE WORKERS' COMPENSATION ACT
(Section 15 of the Interpretation and General Provisions Act)

Government Notice
194 of 1961

Exemption

The Railways in Zambia have been exempted from the operation of *section ninety in Part VII of the Workers' Compensation Act.

*See sections 104 and 105 of the Act.

THE WORKERS' COMPENSATION RECIPROCAL ARRANGEMENTS (ZIMBABWE) RULES

Government Notices
183 of 1957
497 of 1964
Statutory Instrument
156 of 1965

1. These Rules may be cited as the Workers' Compensation Reciprocal Arrangements (Zimbabwe) Rules. Title

2. In these Rules, unless the context otherwise requires- Interpretation

"Zimbabwean worker" means a worker ordinarily resident in Zimbabwe

"Zambian worker" means a worker ordinarily resident in Zambia.

(As amended by No. 156 of 1965)

3. In any case where a worker is entitled to compensation both under the law of Zambia and under the law of Zimbabwe, such worker or his dependants shall be entitled to recover compensation under the law of one country only. Compensation under one law only

(As amended by No. 156 of 1965)

4. In the case of an employer carrying on business in Zambia whose Law of Zambia

Zambian worker is temporarily employed by such employer in Zimbabwe the law in respect of compensation applicable to such worker during the whole of any continuous period not exceeding twelve months during which he is so employed in Zimbabwe shall be the law of Zambia. If the employment in Zimbabwe continues after such period of twelve months, the law applicable after such period shall be the law of Zimbabwe

to apply to
Zambian
worker
temporarily in
Zimbabwe

(As amended by No. 156 of 1965)

5. In the case of an employer carrying on business in Zimbabwe whose Zimbabwean worker is temporarily employed by such employer in Zambia, the law in respect of compensation applicable to such worker during the whole of any continuous period not exceeding twelve months during which he is so employed in Zambia shall be the law of Zimbabwe. If the employment in Zambia continues after such period of twelve months, the law applicable after such period shall be the law of Zambia.

Zimbabwe law
to apply to
Zimbabwean
workers
temporarily in
Zambia

(As amended by No. 156 of 1965)

6. In the case of an employer who ordinarily carries on business both in Zambia and in Zimbabwe and who transfers a worker temporarily from the one country to the other, the following provisions shall apply:

Rules where
employer
carries on
business in both
countries

(a) in the case of a worker temporarily transferred from Zambia to Zimbabwe, the law in respect of compensation applicable to such worker during the whole of any continuous period not exceeding twelve months during which he is so employed in Zimbabwe shall be the law of Zambia. If the employment in Zimbabwe continues after such period of twelve months, the law applicable after such period shall be the law of Zimbabwe.

(b) in the case of a worker temporarily transferred from Zimbabwe to Zambia, the law in respect of compensation applicable to such worker during the whole of any continuous period not exceeding twelve months during which he is so employed in Zambia shall be the law of Zimbabwe. If the employment in Zambia continues after such period of twelve months, the law applicable after such period shall be the law of Zambia.

For the purposes of this rule, a worker shall not be considered to have been temporarily transferred but shall be considered to have been permanently transferred if, in the opinion of the Workers' Compensation Commissioner in Zambia or in Zimbabwe as the case may be, the transfer is made in accordance with the ordinary terms of the employment from a branch of the employer's business in the one country

to a branch of the employer's business in the other country.

(As amended by No. 156 of 1965)

7. In any proceedings for the recovery of compensation the High Court or the magistrate or the Commissioner, as the case may be, may admit evidence taken in Zimbabwe before a magistrate in regard to any matter relating to compensation if such evidence is taken on oath and is certified by such magistrate as having been duly taken by him. Nothing in this rule contained shall be deemed to prevent the High Court or a magistrate from ordering the taking of evidence in any manner provided under any other law.

Admission of
evidence in
High Court

8. (1) A magistrate or the Commissioner, as the case may be, shall have the power to procure and take evidence for use in Zimbabwe or otherwise for the purpose of facilitating proceedings for the recovery of compensation under the laws of Zimbabwe.

Obtaining
evidence from
witnesses for
use in
Zimbabwe

(2) Whenever such evidence is required from a witness who resides or then is in Zambia and it is certified by the High Court or a Magistrate's Court of Zimbabwe to the Commissioner or, as the case may be, to the magistrate of the district in which such witness resides or then is, that the evidence of such witness is required for use in Zimbabwe for the purpose of facilitating proceedings for the recovery of compensation under the laws of Zimbabwe, and that interrogatories to be put to such witness have been duly framed, it shall be the duty of the Commissioner or, as the case may be, the magistrate of the district in which such witness resides or then is, upon the receipt of such interrogatories together with the reasonable expenses of such witness in accordance with the rates prescribed under the Subordinate Courts Act, to summon such witness to appear before him and upon the appearance of such witness to take his evidence as though such witness were a witness in an application under the Act, and to put to such witness the interrogatories aforesaid and all other questions calculated to obtain full and true answers to such interrogatories, and to take down or cause to be taken down in writing the evidence of such witness and to transmit the same certified as having been duly taken to the High Court or Magistrate's Court, as the case may be, in Zimbabwe.

Cap. 28

(As amended by No. 156 of 1965)

9. (1) Compensation awarded in Zimbabwe to any person resident or

Compensation

becoming resident in Zambia may be transferred to and administered by the Commissioner. may be transferred

(2) Compensation awarded under the Act to any person resident or becoming resident in Zimbabwe may be transferred to and administered by the Workers' Compensation Commissioner of Zimbabwe.

(3) Where the Commissioner to whom compensation has been transferred in terms of sub-rule (1) is unable for any reason to pay such compensation to the person to whom it has been awarded within a period of twelve months from the date on which it was so transferred, then in such event the Commissioner shall refund such compensation to the Workers' Compensation Commissioner in Zimbabwe.

(As amended by No. 156 of 1965)

10. The obligation in regard to insurance imposed upon employers in regard to the workers to whom the provisions of rules 3, 4 and 5 apply, shall be determined by the law which is applicable to such workers by virtue of the provisions of the said rules. Obligation to insure under the respective laws

SECTIONS 59, 125-THE WORKERS' COMPENSATION (LUMP SUM COMPENSATION CALCULATION BASIS) ORDER

Statutory Instrument 146 of 1977

1. This Order may be cited as the Workers' Compensation (Lump Sum Compensation Calculation Basis) Order. Title

2. Where a worker suffers permanent disablement but the degree of disablement does not exceed ten per centum, the basis upon which the lump sum compensation payable to such worker shall be calculated shall be such proportion of the capitalised value as determined by the Commissioner of the pension and children's allowances which would have been payable had the worker suffered permanent disablement to a degree of one hundred per centum as the percentage of his permanent disablement bears to one hundred per centum. Basis of calculation of lump sum in certain cases

SECTIONS 125 AND 107(5)-THE WORKERS' COMPENSATION (ASSESSMENT OF EARNINGS) REGULATIONS

Statutory Instrument 121 of

Regulations by the Minister

1992

- | | |
|--|-----------------------------------|
| 1. These Regulations may be cited as the Workers' Compensation (Assessment of Earnings) Regulations. | Title |
| 2. The Commissioner shall not assess an employer for any earnings in excess of K1,200,000 per annum of any worker in respect of the period to which the statement submitted under section <i>one hundred and six</i> relate. | Earnings in excess of K1,200,000 |
| 3. The earnings for assessment purposes shall include-
(a) worker's annual basic wages or salary up to K1,200,000;
(b) overtime payments;
(c) shift differential payment;
(d) leave pay if not included in (a) above;
(e) payment made to casual workers employed in connection with employer's nature of business; and
(f) add 12.5 per centum to the total of items (a) to (e) to cover food and quarters. | Earnings for assessment |
| 4. The Workers' Compensation (Assessment of Earnings) Regulations, 1994, are hereby revoked. | Revocation of S.I. No. 39 of 1994 |

CHAPTER 272 THE PUBLIC HOLIDAYS ACT

ARRANGEMENT OF SECTIONS

Section

1. Short title
2. Days in the Schedule to be public holidays
3. Power to declare additional public holidays

SCHEDULE-Public holidays