
GOVERNMENT NOTICE

DEPARTMENT OF LABOUR

No. 72

27 January 2006

Rules, forms and particulars which shall be furnished *in* terms of the Compensation for Occupational Injuries and Diseases Act, 1993 (Act 130 of 1993, as amended).

I, Nerine Beverlee Kahn, Acting Compensation Commissioner, hereby repeal under **Section 6 A (b)** of the Compensation for Occupational Injuries and Diseases Act, 1993 (Act 130 of 1993, as Amended) **item 3** of my prescription **as** published under Notice No. 278 in the following Government Gazette No. 27416 of 24 March 2005 and replace it with the following:

Return of Earnings [Section 82 (1)]

- 3. "The Return of Earnings shall be on form WAS 8 [ANNEXURE B] with the particulars required therein, as the case may be."**



N. B. Kahn

Acting Compensation Commissioner



The Hon., Prof., Dr., Rev., Messrs., Mr., Ms.,

RETURN OF EARNINGS DEPARTMENT OF LABOUR

COMPENSATION FUND
COIDA, 1993 (ACT NO. 130 OF 1993)
Section 82 (1)

W.As 8

2005

To be furnished by all employers to:
Assessments Division

Compensation House
Cnr Hamilton Street & Soutpansberg Road, Arcadia
4 (012) 319-9135/136/260/360 e-mail: cf-info@labour.gov.za
website at <http://www.labour.gov.za>

Year of assessment	01 March 2005 to 28 February 2006
Date of issue	
This return to be submitted on or before	March 31, 2006

***Consult the enclosed guidelines before completing the return**

Fill in the white blocks only where particulars have changed.
Use block letters where applicable, or mark with an X

PART 1: EMPLOYER PARTICULARS

1.1 Trading Name														
1.2 Name of owner, Co / CC														
1.3 Co / CC number														
1.4 Employer's ID number														
1.5 Postal address														
1.6 Physical address		Postal code:												
1.7 Telephone number		Code: Number:												
1.8 Fax number		Code: Number:												
1.9 Cell phone number														
1.10 E- Mail address														
1.11 Particulars of operation														
a) Describe the nature of goods sold/manufactured / or services rendered														
b) Describe the materials used in the manufacturing of goods														
c) Describe the nature and extent of construction/erection undertaken														
d) In case of farming, indicate the nature thereof														
e) Do you use tractors and/or power-driven saws														
		<table border="1"> <tr> <td>Livestock</td> <td></td> <td>Tillage</td> <td></td> </tr> <tr> <td>Mixed farming:</td> <td>%Livestock</td> <td>% Tillage</td> <td></td> </tr> <tr> <td>Yes <input type="checkbox"/></td> <td>No <input type="checkbox"/></td> <td></td> <td></td> </tr> </table>	Livestock		Tillage		Mixed farming:	%Livestock	% Tillage		Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Livestock		Tillage												
Mixed farming:	%Livestock	% Tillage												
Yes <input type="checkbox"/>	No <input type="checkbox"/>													
1.12 Status of business														
a) Ceased		Date: Y Y Y Y M M D D												
b) Sold		Date: Y Y Y Y M M D D												
With all assets		Yes: <input type="checkbox"/> No: <input type="checkbox"/>												
With all liabilities		Yes: <input type="checkbox"/> No: <input type="checkbox"/>												
Name & Address of new owner														
c) Liquidated		Date: Y Y Y Y M M D D												
d) Owner passed away		Date: Y Y Y Y M M D D												