



# Know Your Rights: Workplace Discrimination is Illegal

The U.S. Equal Employment Opportunity Commission (EEOC) enforces Federal laws that protect you from discrimination in employment. If you believe you've been discriminated against at work or in applying for a job, the EEOC may be able to help.

## Who is Protected?

- Employees (current and former), including managers and temporary employees
- Job applicants
- Union members and applicants for membership in a union

## What Organizations are Covered?

- Most private employers
- State and local governments (as employers)
- Educational institutions (as employers)
- Unions
- Staffing agencies

## What Types of Employment Discrimination are Illegal?

Under the EEOC's laws, an employer may not discriminate against you, regardless of your immigration status, on the bases of:

- Race
- Color
- Religion
- National origin
- Sex (including pregnancy and related conditions, sexual orientation, or gender identity)
- Age (40 and older)
- Disability
- Genetic information (including employer requests for, or purchase, use, or disclosure of genetic tests, genetic services, or family medical history)
- Retaliation for filing a charge, reasonably opposing discrimination, or participating in a discrimination lawsuit, investigation, or proceeding.

## What Employment Practices can be Challenged as Discriminatory?

All aspects of employment, including:

- Discharge, firing, or lay-off
- Harassment (including unwelcome verbal or physical conduct)
- Hiring or promotion
- Assignment
- Pay (unequal wages or compensation)
- Failure to provide reasonable accommodation for a disability or a sincerely-held religious belief, observance or practice
- Benefits
- Job training
- Classification
- Referral
- Obtaining or disclosing genetic information of employees
- Requesting or disclosing medical information of employees
- Conduct that might reasonably discourage someone from opposing discrimination, filing a charge, or participating in an investigation or proceeding.

## What can You Do if You Believe Discrimination has Occurred?

Contact the EEOC promptly if you suspect discrimination. Do not delay, because there are strict time limits for filing a charge of discrimination (180 or 300 days, depending on where you live/work). You can reach the EEOC in any of the following ways:

**Submit** an inquiry through the EEOC's public portal:  
<https://publicportal.eeoc.gov/Portal/Login.aspx>

**Call** 1-800-669-4000 (toll free)  
1-800-669-6820 (TTY)  
1-844-234-5122 (ASL video phone)

**Visit** an EEOC field office (information at [www.eeoc.gov/field-office](http://www.eeoc.gov/field-office))

**E-Mail** [info@eeoc.gov](mailto:info@eeoc.gov)

Additional information about the EEOC, including information about filing a charge of discrimination, is available at [www.eeoc.gov](http://www.eeoc.gov).



## EMPLOYERS HOLDING FEDERAL CONTRACTS OR SUBCONTRACTS

The Department of Labor's Office of Federal Contract Compliance Programs (OFCCP) enforces the nondiscrimination and affirmative action commitments of companies doing business with the Federal Government. If you are applying for a job with, or are an employee of, a company with a Federal contract or subcontract, you are protected under Federal law from discrimination on the following bases:

### Race, Color, Religion, Sex, Sexual Orientation, Gender Identity, National Origin

Executive Order 11246, as amended, prohibits employment discrimination by Federal contractors based on race, color, religion, sex, sexual orientation, gender identity, or national origin, and requires affirmative action to ensure equality of opportunity in all aspects of employment.

### Asking About, Disclosing, or Discussing Pay

Executive Order 11246, as amended, protects applicants and employees of Federal contractors from discrimination based on inquiring about, disclosing, or discussing their compensation or the compensation of other applicants or employees.

### Disability

Section 503 of the Rehabilitation Act of 1973, as amended, protects qualified individuals with disabilities from discrimination in hiring, promotion, discharge, pay, fringe benefits, job training, classification, referral, and other aspects of employment by Federal contractors. Disability discrimination includes not making reasonable accommodation to the known physical or mental limitations of an otherwise qualified individual with a disability who is an applicant or employee, barring undue hardship to the employer. Section 503 also requires that Federal contractors take affirmative action to employ and advance in employment qualified individuals with disabilities at all levels of employment, including the executive level.

### Protected Veteran Status

The Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended, 38 U.S.C. 4212, prohibits employment discrimination against, and requires affirmative action to recruit, employ, and advance in employment, disabled veterans, recently separated veterans (i.e., within three years of discharge or release from active duty), active duty wartime or campaign badge veterans, or Armed Forces service medal veterans.

### Retaliation

Retaliation is prohibited against a person who files a complaint of discrimination, participates in an OFCCP proceeding, or otherwise opposes discrimination by Federal contractors under these Federal laws.

Any person who believes a contractor has violated its nondiscrimination or affirmative action obligations under OFCCP's authorities should contact immediately:

The Office of Federal Contract Compliance Programs (OFCCP)  
U.S. Department of Labor  
200 Constitution Avenue, N.W.  
Washington, D.C. 20210  
1-800-397-6251 (toll-free)

If you are deaf, hard of hearing, or have a speech disability, please dial 7-1-1 to access telecommunications relay services. OFCCP may also be contacted by submitting a question online to OFCCP's Help Desk at <https://ofccphelpdesk.dol.gov/s/>, or by calling an OFCCP regional or district office, listed in most telephone directories under U.S. Government, Department of Labor and on OFCCP's "Contact Us" webpage at <https://www.dol.gov/agencies/ofccp/contact>.

## PROGRAMS OR ACTIVITIES RECEIVING FEDERAL FINANCIAL ASSISTANCE

### Race, Color, National Origin, Sex

In addition to the protections of Title VII of the Civil Rights Act of 1964, as amended, Title VI of the Civil Rights Act of 1964, as amended, prohibits discrimination on the basis of race, color or national origin in programs or activities receiving Federal financial assistance. Employment discrimination is covered by Title VI if the primary objective of the financial assistance is provision of employment, or where employment discrimination causes or may cause discrimination in providing services under such programs. Title IX of the Education Amendments of 1972 prohibits employment discrimination on the basis of sex in educational programs or activities which receive Federal financial assistance.

### Individuals with Disabilities

Section 504 of the Rehabilitation Act of 1973, as amended, prohibits employment discrimination on the basis of disability in any program or activity which receives Federal financial assistance. Discrimination is prohibited in all aspects of employment against persons with disabilities who, with or without reasonable accommodation, can perform the essential functions of the job.

If you believe you have been discriminated against in a program of any institution which receives Federal financial assistance, you should immediately contact the Federal agency providing such assistance.

## EMPLOYEE RIGHTS AND RESPONSIBILITIES

The Nevada Occupational Safety and Health Act was created to allow you to do your job in a safe and healthy workplace. But it is up to you to make sure that job safety works. Here are some tips to help you stay safe on the job.



Know and follow all safety rules set by:

- + Your employer
- + The Nevada Occupational Safety and Health Act
- + State of Nevada Occupational and Health Administration (NVOSHA)

You can get copies of all Nevada safety and health standards from the Safety Consultation and Training Section of the Division of Industrial Relations or on the web at [www.4safenv.state.nv.us](http://www.4safenv.state.nv.us).

Also, your employer may be required to have a written workplace safety program.

If your employer requires personal protective equipment, such as hard hats, safety shoes, safety glasses, respirators, or hearing protection, you are responsible to wear and/or use the equipment.

If you do not know how to safely use tools, equipment or machinery, be sure to ask your supervisor.

If you see something that's unsafe, report it to your supervisor. That's part of your job. Give your employer a chance to fix the problem. If you think the unsafe condition still exists, it is your right to file a complaint with NVOSHA. The Division will not give your name to your employer.



### Stop and Learn Your Rights and Responsibilities

The Division of Industrial Relations of the Nevada Department of Business & Industry helps employers provide a safe and healthful workplace. This document explains the rights and responsibilities of both employers and employees in creating a safe working environment.



### WORKPLACE SAFETY IS EVERYONE'S RESPONSIBILITY.

I have (check one) \_\_\_ read this document or \_\_\_ viewed the video, entitled "Nevada Workplace Safety: Your Rights and Responsibilities" and I understand my rights and responsibilities for safety in the workplace.

Employee Name (please print) \_\_\_\_\_ Date \_\_\_\_\_

Employee's Signature \_\_\_\_\_

Place of Viewing Video \_\_\_\_\_

Employer's Name (please print) \_\_\_\_\_

Employer's Signature (or representative) \_\_\_\_\_

Any employee who does not understand this document should contact his or her supervisor, employee representative or the Division of Industrial Relations of the Nevada Department of Business & Industry.

Las Vegas: (702) 486-9140

Reno: (775) 688-3730

Elko: (775) 778-3312

Toll-Free: (877) 472-3368

Note: This portion must be maintained in the employee's personnel file

There are laws that protect you if you are punished for filing a safety and health complaint. If you feel you have been treated unfairly for making a safety and health complaint, you have 30 days from the date of the punishment to file a discrimination complaint with NVOSHA.

Whistle Blower Hotline - (702) 486-9097

Most on-the-job injuries are covered by Workers' Compensation Insurance. From cuts and bruises to serious accidents, coverage begins the first minute you're on the job.

It is your responsibility to report any on-the-job injury or occupational disease immediately to your supervisor or foreman using the "Notice of Injury or Occupational Disease," C-1 Form. You have 7 days from the date of injury or knowledge of the occupational disease to turn in the completed C-1 Form to your employer. If you seek medical treatment for a work-related injury you must complete a "Claim for Compensation" C-4 Form at the emergency room or medical provider's office to initiate a claim for workers compensation.

But remember, filing a false claim will result not only in a loss of benefits, but could mean costly fines and/or jail time.

If there is a dangerous situation at work and an employee, with no reasonable alternative, refuses in good faith to expose themselves to a dangerous condition, they would be protected from subsequent retaliation. The condition must be of such a nature that a reasonable person would conclude that there is a real danger of death or serious harm and that there is not enough time to contact NVOSHA and for NVOSHA to inspect. Where possible, the employee must have also sought from the employer, and been unable to obtain, a correction of the condition.

During a NVOSHA inspection, you have the right to talk privately with the inspector and take part in meetings with the inspector before and after the inspection. You are encouraged to point out hazards, describe injuries and illnesses from these hazards, discuss past worker complaints and inform the inspector of working conditions that are not normal during the inspection. If after the inspection citations are proposed to the employer, the employer is required to post the citations where employees can see them.

## EMPLOYER RIGHTS AND RESPONSIBILITIES

The Safety Consultation and Training Section (SCATS) was created to assist employers in complying with Nevada laws which govern occupational safety and health. They are available to provide a workplace hazard assessment. This service can assist employers in minimizing on-the-job hazards, and is provided at no charge. The Division also offers no cost safety training and informational programs for Nevada employers.

**A Nevada employer with 11 or more employees must establish a written workplace safety program. A safety committee is required if you have more than 25 employees or if an employer's employees are engaged in the manufacturing of explosives.**

**You must maintain a workplace that is free from unsafe conditions.**

**As an employer you are responsible for complying with all Nevada safety and health standards and regulations found in the:**

- + Nevada Occupational Safety and Health Act
- + Occupational Safety and Health Standards and Regulations

Copies of all occupational safety and health standards and regulations are available from the Division of Industrial Relations (SCATS and NVOSHA) or on the web at [www.4safenv.state.nv.us](http://www.4safenv.state.nv.us).



**You are also responsible for ensuring that your employees comply with these same rules, standards and regulations. You must select someone to administer and enforce occupational safety and health programs in your workplace.**

**Before assigning an employee to a job, you must provide proper training in a language and format that is understandable to each employee:**

- + Safe use of equipment and machinery
- + Personal protective gear
- + Hazard recognition
- + Emergency procedures
- + Hazardous chemicals and substances found at the jobsite or in the workplace

**You must also inform all employees of the safety rules, regulations and standards which apply to their respective duties.**

**It is your responsibility to maintain accurate accident, injury and safety records and reports. These files must be made available, upon request, to the affected employee and representatives of NVOSHA.**

**The Nevada Safety and Health Poster, provided by the Division of Industrial Relations, must be posted in a prominent place on the job site.**

**Any accident or motor vehicle crash occurring in the course of employment which results in the inpatient hospitalization of one or more employees, the amputation of a part of an employee's body or an employee's loss of an eye must be reported by the employer orally to the nearest office of NV OSIA within 24 hours after the time that the accident or crash is reported to any agent or employee of the employer.**

## ADDITIONAL INFORMATION

**If you require further information or would like to obtain copies of safety and health standards, videos of this pamphlet in English and Spanish or more copies of the pamphlet, contact the following:**

State of Nevada Department of Business & Industry, Division of Industrial Relations, Safety Consultation and Training Section

**Southern Nevada**  
3360 W. Sahara Avenue  
Suite 100  
Las Vegas, NV 89102  
(702) 486-9140  
Fax: (702) 486-8711

**Northern/Central Nevada**  
4600 Kietzke Lane  
Suite E-144  
Reno, NV 89502  
(775) 688-3730  
Fax: (775) 688-1478

**Northeastern Nevada**  
350 West Silver Street  
Suite 210  
Elko, NV 89801  
(775) 778-3312  
Fax: (775) 778-3412

**Or Call, Toll-Free**  
1 (877) 4SAFE NV (472-3368)  
[www.4safenv.state.nv.us](http://www.4safenv.state.nv.us)

State of Nevada Department of Business & Industry, Division of Industrial Relations NVOSHA

**Southern Nevada**  
3360 W. Sahara Avenue  
Suite 200  
Las Vegas, NV 89102  
(702) 486-9020  
Fax: (702) 486-8714

**Northern Nevada**  
4600 Kietzke Lane  
Suite F-153  
Reno, NV 89502  
(775) 688-3700  
Fax: (775) 688-1378

A video of this information is available in English and Spanish through the Division of Industrial Relations, Safety Consultation and Training Section. This document may be copied. For additional copies, contact the Division of Industrial Relations or visit [www.4safenv.state.nv.us](http://www.4safenv.state.nv.us).

**Any accident or motor vehicle crash occurring in the course of employment which is fatal to one or more employees must be reported by the employer orally to the nearest office of NV OSHA within 8 hours after the time that the accident or crash is reported to any agent or employee of the employer.**

**Nevada employers are required to secure and maintain workers' compensation insurance unless excluded by Nevada Revised**

**Statute (NRS).** There are few exceptions to this requirement. In the event of an injury or at the onset of an occupational disease, the employer must provide the C-1 Form, "Notice of Injury or Occupational Disease - Incident Report" to the injured worker. The employer is also responsible for filing an "Employer's Report of Injury" (C-3 Form) within six working days with your insurer after the receipt of a "Claim for Compensation" (C-4 Form) from a physician or chiropractor.

**Additional employer responsibilities:**

- + Perform tests such as air sampling and noise monitoring.
- + Prevent employee exposure to harmful substances to include chemicals, lead, asbestos, and sharps.
- + Provide hearing exams, medical testing, fall protection, machine guarding, cave-in and confined space safety equipment and protection, respirators, personal protective equipment, etc., as required by NVOSHA and OSHA standards.

**The law requires that employers shall provide newly-hired employees with a copy of this document or with a video setting forth the rights and responsibilities of employers and employees to promote safety in the workplace.**



**Employers shall keep a signed copy of the attached receipt in the employee's personnel file to show he or she has been made aware of these rights and responsibilities.**



**OSHA**<sup>®</sup>  
Occupational Safety  
and Health Administration

# Job Safety and Health IT'S THE LAW!

## All workers have the right to:

- A safe workplace.
- Raise a safety or health concern with your employer or OSHA, or report a work-related injury or illness, without being retaliated against.
- Receive information and training on job hazards, including all hazardous substances in your workplace.
- Request a confidential OSHA inspection of your workplace if you believe there are unsafe or unhealthy conditions. You have the right to have a representative contact OSHA on your behalf.
- Participate (or have your representative participate) in an OSHA inspection and speak in private to the inspector.
- File a complaint with OSHA within 30 days (by phone, online or by mail) if you have been retaliated against for using your rights.
- See any OSHA citations issued to your employer.
- Request copies of your medical records, tests that measure hazards in the workplace, and the workplace injury and illness log.

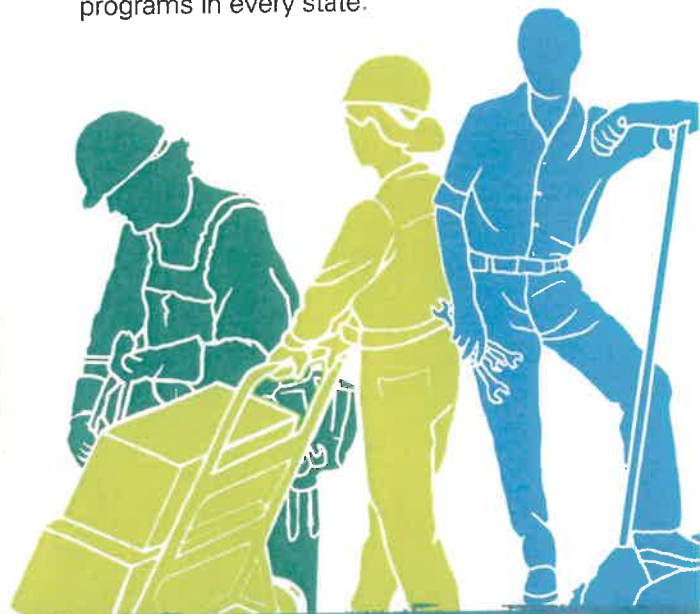
*This poster is available free from OSHA.*

**Contact OSHA. We can help.**

## Employers must:

- Provide employees a workplace free from recognized hazards. It is illegal to retaliate against an employee for using any of their rights under the law, including raising a health and safety concern with you or with OSHA, or reporting a work-related injury or illness.
- Comply with all applicable OSHA standards.
- Notify OSHA within 8 hours of a workplace fatality or within 24 hours of any work-related inpatient hospitalization, amputation, or loss of an eye.
- Provide required training to all workers in a language and vocabulary they can understand.
- Prominently display this poster in the workplace.
- Post OSHA citations at or near the place of the alleged violations.

On-Site Consultation services are available to small and medium-sized employers, without citation or penalty, through OSHA-supported consultation programs in every state.



1-800-321-OSHA (6742) • TTY 1-877-889-5627 • [www.osha.gov](http://www.osha.gov)

# Summary of Work-Related Injuries and Illnesses

Year 20 22

U.S. Department of Labor  
Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write "0."

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

### Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
0	2	9	1
(G)	(H)	(I)	(J)

### Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
14	226
(K)	(L)

### Injury and Illness Types

Total number of . . .	(4) Poisonings	(5) Hearing loss	(6) All other illnesses
(1) Injuries	8	1	1
(2) Skin disorders	1	1	1
(3) Respiratory conditions	0	0	0

Post this Summary page from February 1 to April 30 of the year following the year covered by the form.

Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments on these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA, Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

### Establishment information

Your establishment name Tahoe Douglas Fire Protection District

Street 193 Elks Point Rd

City Zephyr Cove State NV ZIP 89448

Industry description (e.g., *Manufacture of motor truck trailers*)  
Fire Protection

Standard Industrial Classification (SIC), if known (e.g., 3715)  
\_\_\_\_\_

OR \_\_\_\_\_

North American Industrial Classification (NAICS), if known (e.g., 336212)  
922160

Employment information (If you don't have these figures, see the Worksheet on the back of this page to estimate.)

Annual average number of employees 104

Total hours worked by all employees last year 280,050.20

### Sign here

Knowingly falsifying this document may result in a fine.

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

Megan McCarthy HR Specialist  
Company name 775-588-3591 Title \_\_\_\_\_  
Phone \_\_\_\_\_ Date 03/21/2023

# Your Employee Rights Under the Family and Medical Leave Act

## What is FMLA leave?

The Family and Medical Leave Act (FMLA) is a federal law that provides eligible employees with **job-protected leave** for qualifying family and medical reasons. The U.S. Department of Labor's Wage and Hour Division (WHD) enforces the FMLA for most employees.

Eligible employees can take **up to 12 workweeks** of FMLA leave in a 12-month period for:

- The birth, adoption or foster placement of a child with you.
- Your serious mental or physical health condition that makes you unable to work,
- To care for your spouse, child or parent with a serious mental or physical health condition, and
- Certain qualifying reasons related to the foreign deployment of your spouse, child or parent who is a military servicemember.

An eligible employee who is the spouse, child, parent or next of kin of a covered servicemember with a serious injury or illness **may take up to 26 workweeks** of FMLA leave in a single 12-month period to care for the servicemember.

You have the right to use FMLA leave in **one block of time**. When it is medically necessary or otherwise permitted, you may take FMLA leave **intermittently in separate blocks of time, or on a reduced schedule** by working less hours each day or week. Read Fact Sheet #28M(c) for more information.

FMLA leave is **not paid leave**, but you may choose, or be required by your employer, to use any employer-provided paid leave if your employer's paid leave policy covers the reason for which you need FMLA leave.

## Am I eligible to take FMLA leave?

You are an **eligible employee** if **all** of the following apply:

- You work for a covered employer,
- You have worked for your employer at least 12 months,
- You have at least 1,250 hours of service for your employer during the 12 months before your leave, and
- Your employer has at least 50 employees within 75 miles of your work location.

Airline flight crew employees have different "hours of service" requirements.

You work for a **covered employer** if **one** of the following applies:

- You work for a private employer that had at least 50 employees during at least 20 workweeks in the current or previous calendar year,
- You work for an elementary or public or private secondary school, or
- You work for a public agency, such as a local, state or federal government agency. Most federal employees are covered by Title II of the FMLA, administered by the Office of Personnel Management.

## How do I request FMLA leave?

Generally, to request FMLA leave you **must**:

- Follow your employer's normal policies for requesting leave,
- Give notice at least 30 days before your need for FMLA leave, or
- If advance notice is not possible, give notice as soon as possible.

You do **not** have to share a medical diagnosis but must provide enough information to your employer so they can determine whether the leave qualifies for FMLA protection. You **must also inform your employer if FMLA leave was previously taken** or approved for the same reason when requesting additional leave.

Your employer **may request certification** from a health care provider to verify medical leave and may request certification of a qualifying exigency.

The FMLA does not affect any federal or state law prohibiting discrimination or supersede any state or local law or collective bargaining agreement that provides greater family or medical leave rights.

State employees may be subject to certain limitations in pursuit of direct lawsuits regarding leave for their own serious health conditions. Most federal and certain congressional employees are also covered by the law but are subject to the jurisdiction of the U.S. Office of Personnel Management or Congress.

## What does my employer need to do?

If you are eligible for FMLA leave, your employer **must**:

- Allow you to take job-protected time off work for a qualifying reason,
- Continue your group health plan coverage while you are on leave on the same basis as if you had not taken leave, and
- Allow you to return to the same job, or a virtually identical job with the same pay, benefits and other working conditions, including shift and location, at the end of your leave.

Your employer **cannot interfere with your FMLA rights** or threaten or punish you for exercising your rights under the law. For example, your employer cannot retaliate against you for requesting FMLA leave or cooperating with a WHD investigation.

After becoming aware that your need for leave is for a reason that may qualify under the FMLA, your employer **must confirm whether you are eligible** or not eligible for FMLA leave. If your employer determines that you are eligible, your employer **must notify you in writing**:

- About your FMLA rights and responsibilities, and
- How much of your requested leave, if any, will be FMLA-protected leave.

## Where can I find more information?

Call **1-866-487-9243** or visit [dol.gov/fmla](https://www.dol.gov/fmla) to learn more.

If you believe your rights under the FMLA have been violated, you may file a complaint with WHD or file a private lawsuit against your employer in court. **Scan the QR code to learn about our WHD complaint process.**



**WAGE AND HOUR DIVISION**  
UNITED STATES DEPARTMENT OF LABOR





# YOUR RIGHTS UNDER USERRA THE UNIFORMED SERVICES EMPLOYMENT AND REEMPLOYMENT RIGHTS ACT

USERRA protects the job rights of individuals who voluntarily or involuntarily leave employment positions to undertake military service or certain types of service in the National Disaster Medical System. USERRA also prohibits employers from discriminating against past and present members of the uniformed services, and applicants to the uniformed services.

## REEMPLOYMENT RIGHTS

You have the right to be reemployed in your civilian job if you leave that job to perform service in the uniformed service and:

- ☆ you ensure that your employer receives advance written or verbal notice of your service;
- ☆ you have five years or less of cumulative service in the uniformed services while with that particular employer;
- ☆ you return to work or apply for reemployment in a timely manner after conclusion of service; and
- ☆ you have not been separated from service with a disqualifying discharge or under other than honorable conditions.

If you are eligible to be reemployed, you must be restored to the job and benefits you would have attained if you had not been absent due to military service or, in some cases, a comparable job.

## RIGHT TO BE FREE FROM DISCRIMINATION AND RETALIATION

If you:

- ☆ are a past or present member of the uniformed service;
- ☆ have applied for membership in the uniformed service; or
- ☆ are obligated to serve in the uniformed service;

then an employer may not deny you:

- ☆ initial employment;
- ☆ reemployment;
- ☆ retention in employment;
- ☆ promotion; or
- ☆ any benefit of employment

because of this status.

In addition, an employer may not retaliate against anyone assisting in the enforcement of USERRA rights, including testifying or making a statement in connection with a proceeding under USERRA, even if that person has no service connection.

## HEALTH INSURANCE PROTECTION

- ☆ If you leave your job to perform military service, you have the right to elect to continue your existing employer-based health plan coverage for you and your dependents for up to 24 months while in the military.
- ☆ Even if you don't elect to continue coverage during your military service, you have the right to be reinstated in your employer's health plan when you are reemployed, generally without any waiting periods or exclusions (e.g., pre-existing condition exclusions) except for service-connected illnesses or injuries.

## ENFORCEMENT

- ☆ The U.S. Department of Labor, Veterans Employment and Training Service (VETS) is authorized to investigate and resolve complaints of USERRA violations.
- ☆ For assistance in filing a complaint, or for any other information on USERRA, contact VETS at 1-866-4-USA-DOL or visit its website at <https://www.dol.gov/agencies/vets/>. An interactive online USERRA Advisor can be viewed at <https://webapps.dol.gov/elaws/vets/userra>
- ☆ If you file a complaint with VETS and VETS is unable to resolve it, you may request that your case be referred to the Department of Justice or the Office of Special Counsel, as applicable, for representation.
- ☆ You may also bypass the VETS process and bring a civil action against an employer for violations of USERRA.

The rights listed here may vary depending on the circumstances. The text of this notice was prepared by VETS, and may be viewed on the internet at this address: <https://www.dol.gov/agencies/vets/programs/userra/poster> Federal law requires employers to notify employees of their rights under USERRA, and employers may meet this requirement by displaying the text of this notice where they customarily place notices for employees.



U.S. Department of Labor  
1-866-487-2365



U.S. Department of Justice



Office of Special Counsel



1-800-336-4590

Publication Date — May 2022



# EMPLOYEE RIGHTS UNDER THE FAIR LABOR STANDARDS ACT

## FEDERAL MINIMUM WAGE

# \$7.25

 PER HOUR

BEGINNING JULY 24, 2009

## STATE AND LOCAL GOVERNMENT EMPLOYEES

### OVERTIME PAY

At least 1½ times the regular rate of pay for all hours worked over 40 in a workweek.  
Law enforcement and fire protection personnel: You may be paid overtime on the basis of a "work period" of between 7 and 28 consecutive days in length, rather than on a 40-hour workweek basis.

### COMPENSATORY TIME

Employees may receive compensatory time off instead of cash overtime pay, at a rate of not less than 1½ hours for each overtime hour worked, where provided pursuant to an agreement or understanding that meets the requirements of the Act.

### EXEMPTIONS

The Act does not apply to persons who are not subject to the civil service laws of State or local governments and who are: elected public officials, certain immediate advisors to such officials, certain individuals appointed or selected by such officials to serve in various capacities, or employees of legislative branches of State and local governments. Employees of legislative libraries do not come within this exclusion and are thus covered by the Act.

Certain types of workers are exempt from the minimum wage and overtime pay provisions, including bona fide executive, administrative, and professional employees who meet regulatory requirements.

Any law enforcement or fire protection employee who in any workweek is employed by a public agency employing less than 5 employees in law enforcement or fire protection activities is exempt from the overtime pay provisions.

### YOUTH EMPLOYMENT

16 years old is the minimum age for most occupations. An 18-year old minimum applies to hazardous occupations. Minors 14 and 15 years old may work outside school hours under certain conditions. For more information, visit the YouthRules! Web site at [www.youthrules.dol.gov](http://www.youthrules.dol.gov).

### ENFORCEMENT

The Department has authority to recover back wages and an equal amount in liquidated damages in instances of minimum wage, overtime, and other violations. The Department may litigate and/or recommend criminal prosecution. Employers may be assessed civil money penalties for each willful or repeated violation of the minimum wage or overtime pay provisions of the law. Civil money penalties may also be assessed for violations of the FLSA's child labor provisions. Heightened civil money penalties may be assessed for each child labor violation that results in the death or serious injury of any minor employee, and such assessments may be doubled when the violations are determined to be willful or repeated. The law also prohibits retaliating against or discharging workers who file a complaint or participate in any proceeding under the FLSA.

### ADDITIONAL INFORMATION

- Some state laws provide greater employee protections; employers must comply with both.
- Employees under 20 years of age may be paid a youth minimum wage of not less than \$4.25 an hour during their first 90 consecutive calendar days after initial employment by an employer.
- Employers are required to display this poster where employees can readily see it.

The law requires employers to display this poster where employees can readily see it.



WAGE AND HOUR DIVISION  
UNITED STATES DEPARTMENT OF LABOR

1-866-487-9243  
TTY: 1-877-889-5627  
[www.dol.gov/whd](http://www.dol.gov/whd)



WH316 - BEV 02/16



Nevada Equal Rights Commission

a division of the Nevada Department of Employment,  
Training and Rehabilitation

1820 East Sahara Avenue  
Suite 314

Las Vegas, NV 89104

**(702) 486-7161**

1325 Corporate Blvd.  
Room 115,

Reno, NV 89502

**(775) 823-6690**



# Nevada Equal Rights Commission

## NEVADA LAW PROHIBITS DISCRIMINATION

- Employers may not discriminate based on race, color, national origin, age (40+), sex (including pregnancy), religion, disability, sexual orientation, genetic information, or gender identity or expression.
- Housing discrimination is prohibited based on race, color, national origin, sex, religion, disability, ancestry, familial status, sexual orientation, or gender identity or expression.
- Businesses offering services to the public may not discriminate based on race, color, national origin, sex, religion, disability, sexual orientation or gender identity or expression.

Persons who believe they have been discriminated against in employment, public accommodation or housing, may file a complaint with the Nevada Equal Rights Commission.

An equal opportunity employer/program

Auxiliary aids and services are available upon request for individuals with disabilities.

Relay 711 or 800.326.6868

# NEVADA PREGNANT WORKERS' FAIRNESS ACT



Pursuant to NRS 613.335 and sections 2 to 8, inclusive, of the Nevada Pregnant Workers' Fairness Act (effective October 1, 2017) employees have the right to be free from discriminatory or unlawful employment practices based on pregnancy, childbirth, or a related medical condition.

## **UNDER THE ACT, IT IS UNLAWFUL FOR EMPLOYERS TO:**

- Deny a reasonable accommodation to female employees and applicants, upon request, for a condition related to pregnancy, childbirth, or a related medical condition, unless an accommodation would impose an undue hardship on the business of the employer.
- Take adverse employment actions against a female employee because the employee requests or uses a reasonable accommodation.
- Deny an employment opportunity to a qualified female employee or applicant based on a need for a reasonable accommodation.
- Require a female employee or applicant to accept an accommodation that the employee or applicant did not request or chooses not to accept or to take leave from employment if an accommodation is available.

## **UNDER THE ACT, AN EMPLOYER MAY:**

Require a female employee to submit written medical certification from the employee's physician substantiating the need for an accommodation because of pregnancy, childbirth, or related medical conditions, and the specific accommodation recommended by the physician.

[www.nvdetr.org](http://www.nvdetr.org)



**FOR FURTHER INFORMATION REGARDING THE ACT, CONTACT  
THE NEVADA EQUAL RIGHTS COMMISSION.**

An equal opportunity employer/program.  
Auxiliary aids and services are available upon request for individuals with disabilities  
Relay 711 or 800.326.6868

1820 East Sahara Avenue  
Suite 314  
Las Vegas, NV 89104

1325 Corporate Blvd.  
Room 115  
Reno, NV 89502

Phone (702) 486-7161

Phone (775) 823-6690

# STATE OF NEVADA

STEVE SISOLAK  
GOVERNOR

TERRY REYNOLDS  
DIRECTOR

SHANNON M. CHAMBERS  
LABOR COMMISSIONER



OFFICE OF THE LABOR COMMISSIONER 3300  
WEST SAHARA AVENUE, SUITE 225 LAS  
VEGAS, NEVADA 89102  
PHONE: (702) 486-2650  
FAX (702) 486-2660

OFFICE OF THE LABOR COMMISSIONER  
1818 COLLEGE PARKWAY, SUITE 102  
CARSON CITY, NV 89706  
PHONE: (775) 684-1890  
FAX (775) 687-6409

Department of Business & Industry  
OFFICE OF THE LABOR COMMISSIONER

[www.labor.nv.gov](http://www.labor.nv.gov)

## STATE OF NEVADA MINIMUM WAGE 2022 ANNUAL BULLETIN POSTED APRIL 1, 2022

PURSUANT TO ARTICLE 15, SECTION 16(A) OF THE CONSTITUTION OF THE STATE OF NEVADA AND ASSEMBLY BILL (AB) 456 PASSED DURING THE 80<sup>TH</sup> REGULAR SESSION OF THE NEVADA LEGISLATURE (2019), THE FOLLOWING MINIMUM WAGE RATES SHALL APPLY TO ALL EMPLOYEES IN THE STATE OF NEVADA UNLESS OTHERWISE EXEMPTED. THESE RATES ARE EFFECTIVE AS OF JULY 1, 2022, AND WILL INCREASE AS SET FORTH BELOW UNTIL JULY 1, 2024.

FOR EMPLOYEES TO WHOM QUALIFYING HEALTH BENEFITS HAVE BEEN OFFERED/MADE AVAILABLE BY THE EMPLOYER THE LOWER TIER RATE MAY BE PAID. PLEASE SEE SENATE BILL 192 PASSED DURING THE 80<sup>TH</sup> REGULAR SESSION OF THE NEVADA LEGISLATURE (2019).

FOR ALL OTHER EMPLOYEES, EMPLOYERS MUST PAY THE HIGHER TIER RATE AS SET FORTH BELOW:

Effective Date	Lower Tier	Higher Tier
July 1, 2022	\$9.50	\$10.50
July 1, 2023	\$10.25	\$11.25
July 1, 2024	\$11.00	\$12.00

Assembly Bill 456 <https://www.leg.state.nv.us/App/NELIS/REL/80th2019/Bill/6870/Text>

Senate Bill 192 <https://www.leg.state.nv.us/App/NELIS/REL/80th2019/Bill/6334/Text>

Copies of this notice may be obtained from our website at: [www.labor.nv.gov](http://www.labor.nv.gov) or by contacting the addresses and phone numbers listed above.



Your EAP and work-life solutions offer a wide variety of resources designed to improve wellness, enhance organization performance and improve financial outcomes. Our services help employees and family members resolve a wide range of issues to restore both personal and professional effectiveness. Kepro's services are confidential.

## EAP Products & Resources



### **AVAILABLE 24 HOURS, 7 DAYS A WEEK**

Toll-Free Phone: 1.833.430.6028  
EAP website: [www.EAPhelplink.com](http://www.EAPhelplink.com)  
Company Code: POOLPACTEAP



### **COUNSELING & SUPPORT**

Whether you are dealing with stress, worry, relationship issues, substance abuse issues or work issues, call for immediate support. We can also provide referrals for an in-person, phone or video session with a highly qualified counselor. You are eligible for up to four free confidential counseling sessions per issue.



### **ARTICLES & RESOURCES**

Kepro's EAP HelpLink website is your one-stop resource, available when you need it. EAP HelpLink provides you and your family with tools and information to address life's pressing concerns. You will find webinars, topics of interest and videos on many life issues. Additionally, you can access calculators and resources for childcare, eldercare, health issues and financial information.



### **MANAGEMENT & ORGANIZATIONAL SERVICES**

Kepro's Management Service Team (MST) provides unlimited telephonic consultations to leadership that help develop solutions to complex individual and team issues. MST offers guidance on how to address ways that reduce conflict, increase productivity, decrease attendance issues and address personal issues that may affect one's work performance. Additionally, on an organizational level, MST can support and provide guidance for a workplace trauma or other critical incidents. Available to you 24/7.



### **LEGAL SERVICES**

Legal concerns can be stressful, costly and often result in lost work time. Reach out to Kepro for a referral for a free 30-minute consultation with a lawyer for any issue, except work related issues. After the 30-minutes, you will receive a 25% discount for additional time and services. General legal information and forms, including a simple will form, can be found at [www.eaphelplink.com](http://www.eaphelplink.com) under the **Living** tab.



### **FINANCIAL SERVICES**

Sometimes we don't know where to start when we are having financial issues or just have questions. Reach out to Kepro for a free 30-minute phone consultation with a financial expert. Additional information on budgeting, debt management and getting ready for retirement can be found at [www.eaphelplink.com](http://www.eaphelplink.com) under the **Living** tab.



### **ELDERCARE SUPPORT & RESOURCES**

If you are worried about an older family member or friend, our eldercare specialists are available 24/7 to provide support and resources, regardless of geographic location. We can help provide guidance on Medicare, Medicaid, home health services, community resource and much more.



### **CHILDCARE SUPPORT & RESOURCES**

Are you looking to adopt, have a baby or need childcare resources for a special needs child? We can help. Reach out to Kepro and ask to talk to our childcare specialists. Available to you 24/7.

## ATTENTION

**Caution:** The information below is general in nature and is not intended to be legal advice. If you have any questions regarding your status as an employer or employee or your rights and qualification for specific benefits under an industrial injury or occupational disease claim, you should consult with an attorney experienced in industrial insurance.

### Brief Description of Whether the Employer is Required to Obtain Industrial Insurance and Whether a Person is a Covered Employee

Every employer ... shall provide and secure compensation ... for any personal injuries by accident sustained by an employee arising out of and in the course of the employment. See NRS 616B.612(1).

An **employer** is defined as, "Every person, firm, voluntary association and private corporation, including any public service corporation, which has in service any person under a contract of hire." See NRS 616A.230(2). "A person is not an employer ... if: (a) The person enters into a contract with another person or business which is an independent enterprise; and (b) The person is not in the same trade, business, profession or occupation as the independent enterprise." See NRS 616B.603(1).

An **employee** is broadly defined as, "... every person in the service of an employer under any appointment or contract of hire or apprenticeship, express or implied, oral or written, whether lawfully or unlawfully employed" (See NRS 616A.105), but excludes casual employees not in the same trade, business, profession or occupation; musicians not lasting more than 2 consecutive days; household servants, farming and ranching employees; voluntary ski patrol; sports officials paid a nominal fee; clergy; rabbi or lay readers; real estate brokers or sales persons; and commissioned sales persons (See NRS 616A.110).

An **independent contractor** is a person who is hired and paid solely to produce a result. It is defined as, "... any person who renders service for a specified recompense for a specified result, under the control of the person's principal as to the result of the person's work only and not as to the means by which such result is accomplished." See NRS 616A.255.

### Brief Description of Your Rights and Benefits If You Are Injured on the Job or have an Occupational Disease

**Notice of Injury or Occupational Disease (Incident Report Form C-1)** If an injury or occupational disease (OD) arises out of and in the course of employment, you must provide written notice to your employer as soon as practicable, but no later than 7 days after the accident or OD. Your employer shall maintain a sufficient supply of the forms.

**Claim for Compensation (Form C-4):** If medical treatment is sought, the form C-4 is available at the place of initial treatment. A completed "Claim for Compensation" (Form C-4) must be filed within 90 days after an accident or OD. The treating physician or chiropractor must, within 3 working days after treatment, complete and mail to the employer, the employer's insurer and third-party administrator, the Claim for Compensation.

**Medical Treatment:** If you require medical treatment for your on-the-job injury or OD, you may be required to select a physician or chiropractor from a list provided by your workers' compensation insurer, if it has contracted with an Organization for Managed Care (MCO) or Preferred Provider Organization (PPO) or providers of health care. If your employer has not entered into a contract with an MCO or PPO, you may select a physician or chiropractor from the Panel of Physicians and Chiropractors. Any **medical costs** related to your industrial injury or OD will be paid by your insurer.

**Temporary Total Disability (TTD):** If your doctor has certified that you are unable to work for a period of at least 5 consecutive days, or 5 cumulative days in a 20-day period, or places restrictions on you that your employer does not accommodate, you may be entitled to TTD compensation.

**Temporary Partial Disability (TPD):** If the wage you receive upon reemployment is less than the compensation for TTD to which you are entitled, the insurer may be required to pay you TPD compensation to make up the difference. TPD can only be paid for a maximum of 24 months.

**Permanent Partial Disability (PPD):** When your medical condition is stable and there is an indication of a PPD as a result of your injury or OD, within 30 days, your insurer must arrange for an evaluation by a rating physician or chiropractor to determine the degree of your PPD. The amount of your PPD award depends on the date of injury, the results of the PPD evaluation, your age and wage.

**Permanent Total Disability (PTD):** If you are medically certified by a treating physician or chiropractor as permanently and totally disabled and have been granted a PTD status by your insurer, you are entitled to receive monthly benefits not to exceed 66 2/3% of your average monthly wage. The amount of your PTD payments is subject to reduction if you previously received a lump-sum PPD award.

**Vocational Rehabilitation Services:** You may be eligible for vocational rehabilitation services if you are unable to return to the job due to a permanent physical impairment or permanent restrictions as a result of your injury or occupational disease.

**Transportation and Per Diem Reimbursement:** You may be eligible for travel expenses and per diem associated with medical treatment.

**Reopening:** You may be able to reopen your claim if your condition worsens after claim closure.

**Appeal Process:** If you disagree with a written determination issued by the insurer or the insurer does not respond to your request, you may appeal to the **Department of Administration, Hearing Officer**, by following the instructions contained in your determination letter. You must appeal the determination within 70 days from the date of the determination letter at 1050 E. William Street, Suite 400, Carson City, Nevada 89701, or 2200 S. Rancho Drive, Suite 210, Las Vegas, Nevada 89102. If you disagree with the Hearing Officer decision, you may appeal to the **Department of Administration, Appeals Officer**. You must file your appeal within 30 days from the date of the Hearing Officer decision letter at 1050 E. William Street, Suite 450, Carson City, Nevada 89701, or 2200 S. Rancho Drive, Suite 220, Las Vegas, Nevada 89102. If you disagree with a decision of an Appeals Officer, you may file a **petition for judicial review with the District Court**. You must do so within 30 days of the Appeal Officer's decision. You may be represented by an attorney at your own expense or you may contact the NAIW for possible representation.

**Nevada Attorney for Injured Workers (NAIW):** If you disagree with a hearing officer decision, you may request that NAIW represent you without charge at an Appeals Officer hearing. NAIW is an independent state agency and is not affiliated with any insurer. For information regarding denial of benefits, you may contact the NAIW at: 1000 E. William Street, Suite 208, Carson City, NV 89701, (775) 684-7555, or 2200 S. Rancho Drive, Suite 230, Las Vegas, NV 89102, (702) 486-2830.

**To File a Complaint with the Division:** If you wish to file a complaint with the Administrator of the Division of Industrial Relations (DIR), please contact Workers' Compensation Section, 400 West King Street, Suite 400, Carson City, Nevada 89703, telephone (775) 684-7270, or 3360 W. Sahara Ave., Suite 250, Las Vegas, NV 89102, telephone (702) 486-9080.

**For Assistance with Workers' Compensation Issues:** You may contact the State of Nevada Office for Consumer Health Assistance, 3320 West Sahara Avenue, Suite 100, Las Vegas, Nevada 89102, **Toll Free** 1- 888-333-1597, Web site: <http://dhhs.nv.gov/Programs/CHA>, E-mail [cha@govcha.nv.gov](mailto:cha@govcha.nv.gov)

*The information in this publication is derived from Chapters 616A through 616D, inclusive, and 617 of the Nevada Revised Statutes and is provided for informational purposes only. If you have any questions, regarding your injury or workers' compensation claim, please call the following:*

Insurer/Administrator: \_\_\_\_\_ Contact Person: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_  
City State Zip  
MCO/Health Care Provider: \_\_\_\_\_ Contact Person: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_  
City State Zip

EMPLOYER: THIS NOTICE IS TO BE POSTED AT EACH WORK PLACE (NRS 612.455)

State of Nevada  
Department of Employment, Training & Rehabilitation  
EMPLOYMENT SECURITY DIVISION

# NOTICE TO EMPLOYEES

The employees of this establishment are protected by Unemployment Insurance. This employer is required by law to contribute to the Nevada Unemployment Compensation Fund. No part of the contribution is deducted from the wages of employees.

If you are separated from your job or if your hours have been substantially reduced, immediately:

- File an unemployment insurance claim online or by calling the nearest Nevada Telephone Claim Center, as shown below, for full or partial unemployment benefits.
- Request employment services from the nearest Nevada JobConnect Career Center or find employment information online at [www.NevadaJobConnect.com](http://www.NevadaJobConnect.com). If you are disabled and require assistance, contact the Nevada JobConnect Career Center prior to your visit to arrange special accommodations.

To be eligible for unemployment benefits an unemployed person must:

1. Be unemployed through no fault of your own and meet all other conditions of the law regarding unemployment benefits.
2. File a claim online or with the Nevada Telephone Claim Center.
3. Be physically able to work.
4. Be available and willing to accept suitable employment if offered.
5. Make a reasonable and sincere effort to find a job.

Reasons an unemployed person may not be eligible for unemployment benefits are:

1. Separation from employment due to quitting without good cause.
2. Being discharged for misconduct in connection with your work.
3. Refusal of an offer of suitable work without good cause.
4. Giving misinformation or withholding information about the reason for separation from your job.
5. Failure to properly report wages.



- An equal opportunity employer/program
- Auxiliary aids and services available upon request for individuals with disabilities
- Relay Nevada 711 or (800) 326-6868 (TTY)

To file a claim for unemployment benefits call the Telephone Claim Center:  
In Southern Nevada call (702) 486-0350  
In Northern Nevada call (775) 684-0350  
In Rural Nevada call toll-free (888) 890-8211  
OR File online at <http://ui.nv.gov/>

To report suspected fraud, go to:  
<https://uifraud.nvdetr.org>  
OR call (775) 684-0475



# Clean Indoor Air Act – No Smoking Signage

Blue with NRS



Nevada Division of Public and Behavioral Health  
4150 Technology Way  
Carson City, NV 89706-2009  
Monday – Friday  
8 am – 5 pm



# NEVADA SAFETY AND HEALTH PROTECTION ON THE JOB

The Nevada Occupational Safety and Health Act, NRS Chapter 618, provides job safety and health protection for workers through the promotion of safe and healthful working conditions throughout the State of Nevada. Requirements of the Act include the following:

## **EMPLOYERS:**

Each employer shall furnish to each of his employees employment and a place of employment free from recognized hazards that are causing or are likely to cause death or serious physical harm to his employees; and shall comply with occupational safety and health standards adopted under the Act.

## **EMPLOYEES:**

Each employee shall comply with all occupational safety and health standards, rules, regulations and orders issued under the Act that apply to his own actions and conduct on the job.

The Nevada Occupational Safety and Health Administration (Nevada OSHA) of the Division of Industrial Relations, Department of Business and Industry, has the primary responsibility for administering the Act. Nevada OSHA enforces occupational safety and health standards, and its Safety and Health Representatives/ Industrial Hygienists conduct jobsite inspections to ensure compliance with the Act.

## **INSPECTION:**

The Act requires that a representative of the employer and a representative authorized by the employees be given an opportunity to accompany the Nevada OSHA inspector for the purpose of aiding the inspection.

Where there is no authorized employee representative, the Nevada OSHA Safety and Health Representative/ Industrial Hygienist must consult with a reasonable number of employees concerning safety and health conditions in the workplace.

## **COMPLAINT:**

Employees, public or private, or their representatives have the right to file a complaint with the nearest Nevada OSHA office requesting an inspection if they believe unsafe or unhealthful conditions exist in their workplace. Nevada OSHA will hold confidential names of employees complaining.

The Act provides that employees may not be discharged or discriminated against in any way for filing safety and health complaints or otherwise exercising their rights under the Act.

An employee, public or private, who believes he has been discriminated against may file a complaint within thirty (30) days of the alleged discrimination with the nearest Nevada OSHA office or with Occupational Safety and Health Administration, U.S. Department of Labor, 90 7th Street, Suite 18100, San Francisco, CA 94103.

## **CITATIONS:**

If upon inspection Nevada OSHA believes an employer has violated the Act, a citation alleging such violations will be issued to the employer. Each citation will specify a time period within which the alleged violation must be corrected.

The Nevada OSHA citation must be prominently displayed at or near the place of alleged violation for three days, or until it is corrected, whichever is later, to warn employees of dangers that may exist there.

## **PROPOSED PENALTY:**

The Act provides for mandatory penalties against employers of up to \$15,625 for each serious violation and for optional penalties of up to \$15,625 for each nonserious violation. Penalties of up to \$15,625 per day may be proposed for failure to correct violations within the proposed time period. Also, any employer who willfully or repeatedly violates the Act may be assessed penalties of up to \$156,259 for each such violation.

Criminal penalties are also provided for in the Act. Any willful violation resulting in death of an employee, upon conviction, is punishable by a fine of not more than \$50,000 or by imprisonment for not more than six months, or by both. Conviction of any employer after a first conviction doubles these maximum penalties. Penalties may be proposed for public employers.

## **VOLUNTARY ACTIVITY:**

While providing penalties for violations, the Act also encourages efforts by labor and management, before a Nevada OSHA inspection, to reduce injuries and illnesses arising out of employment.

The Nevada Occupational Safety and Health Administration of the Division of Industrial Relations, Department of Business and Industry, encourages employers and employees to reduce workplace hazards voluntarily and to develop and improve safety and health programs in all workplaces and industries.

Such cooperative action would initially focus on the identification and elimination of hazards that could cause death, injury, or illness to employees and supervisors.

Further information and assistance will be provided by Nevada OSHA to employees and employers upon request.

## **MORE INFORMATION:**

Additional information and copies of the Act, specific Nevada OSHA safety and health standards, and other applicable regulations may be obtained by calling or writing the nearest Nevada OSHA district office in the following locations:

**Southern Nevada**  
3360 W. Sahara Avenue, Suite 200  
Las Vegas, Nevada 89102  
Telephone: (702) 486-9020  
Fax: (702) 486-8714

**Northern Nevada**  
4600 Kietzke Lane, Suite F-153  
Reno, Nevada 89502  
Telephone: (775) 688-3700  
Fax: (775) 688-1378

## **NOTE:**

Persons wishing to register a complaint alleging inadequacy in the administration of the Nevada Occupational Safety and Health Plan may do so at the following address:

OSHA, U.S. Department of Labor  
90 7th Street  
Suite 18100  
San Francisco, CA 94103  
Telephone: (415) 625-2547

**EMPLOYERS: This poster must be displayed prominently in the workplace.**