



APPLICATION FOR REIMBURSEMENT OF EXPENSES

- Travel Expenses
- Medication
- Meals and Accommodation
- Clothing
- Other Expenses

INSTRUCTIONS :

Please read carefully before filling in form. In order to be reimbursed, the worker must have notified the CSST, using the Worker's Claim form, of the incident giving rise to this application for reimbursement.

IMPORTANT

Fill out the appropriate section(s) based on the type of expenses for which you are claiming reimbursement.

Attach **originals** of all receipts and prescriptions (essential for reimbursement). Securely attach them to the form, ensuring that the CSST file number is indicated on each document.

If the person accompanying the worker because of the worker's state of health is claiming expenses, he or she must properly fill out section 2 and provide the information required concerning the worker. The medical prescription authorizing the accompanying person must also be attached to the form.

If the CSST has granted an advance on travel expenses, the amount of the advance must be entered in space provided.

For quick processing, forward the claim to the CSST regional office handling the file.

Claims for travel, meals or accommodation expenses must be made within 6 months of the date on which the expenses were incurred.

TRAVEL EXPENSES

Public transport

Travel by public transport (bus, subway, train, ferry) is reimbursed on an actual cost basis. Attach receipts if the carrier issues one as a matter of practice.

Automobile

The costs of using an automobile are reimbursed at the rate of \$0.145 per kilometer.

Note. Please contact if you are unable to use public transport or if you have special needs that could result in an additional expense for you.

Taxi

If travel by taxi is authorized by the CSST and required under medical prescription, the actual cost of the taxi fare is reimbursed upon presentation of receipts.

Parking and tolls

Parking and tolls are reimbursable on an actual cost basis.

Travelling more than 100 kilometres from home

If you decide to travel more than 100 kilometer from your home for treatment that is available closer, **contact us before you undertake such a trip.** We may authorize the trip if it is the most economical appropriate solution. Otherwise, you would be entitled to be reimbursed for the equivalent of a 200 kilometer round trip.

MEDICATION

Clearly indicate the name of each drug and the name of the prescribing physician. Attach originals of all receipts.

MEALS AND ACCOMMODATION EXPENSES

Meals

As a general rule, meal expenses are reimbursed only if the destination is more than 16 kilometres from the worker's home.

Meals actually taken will be reimbursed upon presentation of original receipts and under the following conditions:

- If the worker must leave home before 7:30 a.m., breakfast is reimbursed up to \$10.40;
- If the worker must leave home before 11:30 a.m., and return home after 1:30 p.m., lunch is reimbursed up to \$14.30;
- If the worker must leave home before 5:30 p.m., and return home after 6:30 p.m., dinner is reimbursed up to \$21.55.

Accommodation

Expenses for staying in a hotel or with a relative or friend must be authorized by the CSST. These expenses are reimbursed upon presentation of receipts according to the following rates :

- Hotel Accommodation
 - **Island of Montreal:** to a maximum of \$126* per night
 - **Communauté urbaine de Québec:** to a maximum of \$106 per night
 - **Hull, Laval, Longueuil :** to a maximum of \$102* per night
 - **Elsewhere in Quebec :** to a maximum of \$83* per night
- Allowance granted for each day of travel requiring hotel accommodation: \$5.85.
- Lodging with a relative or friend: \$22.25 per night.

* Between January 1 and October 31 of each year, the \$126, the \$102 and the \$83 maximums are increased to \$138, to \$110 and to \$87 respectively.

CLOTHING

Briefly describe any damage to your clothing at the time of the accident.

Specify the type of expenses incurred (cleaning, repair, replacement) and attach the bills. When claiming replacement of clothing, indicate the purchase price of the damaged item.

Note. Under the Act, cleaning, repair, or replacement of clothing is not fully reimbursable. In this case, reimbursement is subject to a deductible amount, amended on January 1 of each year.

OTHER EXPENSES

Use section 7 to claim all other expenses incurred as a result of the work-related accident, and which are not mentioned elsewhere in the form.

For reimbursement of expenses for services, clearly indicate the following:

- the period during which the service was provided;
- the supplier's name;
- the type of service;
- the number of children (in the case of childcare services);
- the amount of the expenses incurred (amount claimed)

Attach the original medical prescription, if any, and all receipts. Contact your local CSST office if you require further information.





APPLICATION FOR REIMBURSEMENT OF EXPENSES

For worker For person accompanying the worker Other

① Person applying for reimbursement				② Worker reference			
Family name and first name <i>Tremblay, Pierre</i>				CSST File No. <i>103 940 33812</i>		Date of event Year Month Day <i>2 0 0 9 0 1 0 3</i>	
Address <i>1151 Hill Street</i>				Social Insurance Number <i>9 9 9 9 9 9 9 9 9</i>			
Postal code <i>Quebec</i>		Téléphone No. Area code <i>G.1.Y 2.N.K 9.9.9 9.9.9 9.9.9</i>					

③ Travel Expenses (attach original receipts)										
Date		From	To	Reason for travel			Method of transportation used	Distance of round trip (km)	Amount Claimed	
Month	Day			Physio (v)	Occ. Therapy (v)	Other (Specify)			Transportation	Parking and tolls
<i>01</i>	<i>22</i>	<i>Home</i>	<i>physio-Clinic</i>	<input checked="" type="checkbox"/>			<i>bus</i>		<i>5,20</i>	
<i>01</i>	<i>23</i>	<i>Home</i>	<i>Hospital</i>			<i>Doctor appointment</i>	<i>car</i>	<i>32</i>	<i>4,64</i>	<i>2,50</i>

CSST Regional Offices
Just one number for the CSST :
1 866 302-CSST (2778)

Abitibi-Témiscamingue
 33, rue Gamble Ouest
Rouyn-Noranda
 (Québec) J9X 2R3
 Téléc. 819 762-9325

2e étage
 1185, rue Germain
Val-d'Or
 (Québec) J9P 6B1
 Téléc. 819 874-2522

Bas-Saint-Laurent
 180, rue des Gouverneurs
 Case postale 2180
Rimouski
 (Québec) G5L 7P3
 Téléc. 418 725-6237

Capitale-Nationale
 425, rue du Pont
 Case postale 4900
 Succursale Terminus
Québec
 (Québec) G1K 7S6
 Téléc. 418 266-4015

Chaudière-Appalaches
 835, rue de la Concorde
Saint-Romuald
 (Québec) G6W 7P7
 Téléc. 418 839-2498

Côte-Nord
 Bureau 236
 700, boulevard Laure
Sept-Îles
 (Québec) G4R 1Y1
 Téléc. 418 964-3959

235, boulevard La Salle
Baie-Comeau
 (Québec) G4Z 2Z4
 Téléc. 418 294-7325

Estrie
 Place-Jacques-Cartier
 Bureau 204
 1650, rue King Ouest
Sherbrooke
 (Québec) J1J 2C3
 Téléc. 819 821-6116

Gaspésie-Îles-de-la-Madeleine
 163, boulevard de Gaspé
Gaspé
 (Québec) G4X 2V1
 Téléc. 418 368-7855

200, boulevard Perron Ouest
New Richmond
 (Québec) G0C 2B0
 Téléc. 418 392-5406

Île-de-Montréal
 1, complexe Desjardins
 Tour Sud, 31e étage
 Case postale 3
 Succursale Place-Desjardins
Montréal
 (Québec) H5B 1H1
 Téléc. 514 906-3200

Lanaudière
 432, rue De Lanaudière
 Case postale 550
Joliette
 (Québec) J6E 7N2
 Téléc. 450 756-6832

Laurentides
 6e étage
 85, rue De Martigny Ouest
Saint-Jérôme
 (Québec) J7Y 3R8
 Téléc. 450 432-1765

Laval
 1700, boulevard Laval
Laval
 (Québec) H7S 2G6
 Téléc. 450 668-1174

Longueuil
 25, boulevard La Fayette
Longueuil
 (Québec) J4K 5B7
 Téléc. 450 442-6373

Mauricie et Centre-du-Québec
 Bureau 200
 1055, boulevard des Forges
Trois-Rivières
 (Québec) G8Z 4J9
 Téléc. 819 372-3286

Outaouais
 15, rue Gamelin
 Case postale 1454
Gatineau
 (Québec) J8X 3Y3
 Téléc. 819 778-8699

Saguenay-Lac-Saint-Jean
 Place-du-Fjord
 901, boulevard Talbot
 Case postale 5400
Chicoutimi
 (Québec) G7H 6P8
 Téléc. 418 545-3543

Complexe du Parc
 6e étage
 1209, boulevard du Sacré-Cœur
 Case postale 47
Saint-Félicien
 (Québec) G8K 2P8
 Téléc. 418 679-5931

Saint-Jean-sur-Richelieu
 145, boulevard Saint-Joseph
 Case postale 100
Saint-Jean-sur-Richelieu
 (Québec) J3B 6Z1
 Téléc. 450 359-1307

Valleyfield
 9, rue Nicholson
Salaberry-de-Valleyfield
 (Québec) J6T 4M4
 Téléc. 450 377-8228

Yamaska
 2710, rue Bachand
Saint-Hyacinthe
 (Québec) J2S 8B6
 Téléc. 450 773-8126

Bureau RC-4
 77, rue Principale
Granby
 (Québec) J2G 9B3
 Téléc. 450 776-7256

Bureau 102
 26, place Charles-De Montmagny
Sorel-Tracy
 (Québec) J3P 7E3
 Téléc. 450 746-1036

For information : Call CSST office.
 Always give your name, telephone number, health insurance card number, the date of the work-related event and your CSST file number.

You can print this form our website www.csst.qc.ca, by clicking on *Forms*.



APPLICATION FOR REIMBURSEMENT OF EXPENSES

For worker
 For person accompanying the worker
 Other

① Person applying for reimbursement				② Worker reference			
Family name and first name				CSST File No.		Date of event	
Address				Year		Month Day	
			Postal code	Téléphone No. Area code			
				Social Insurance Number			

③ Travel Expenses (attach original receipts)										
Date		From	To	Reason for travel			Method of transportation used	Distance of round trip (km)	Amount Claimed	
Month	Day			Physio (✓)	Occ. Therapy (✓)	Other (Specify)			Transportation	Parking and tolls

If the worker must be accompanied, attach the medical prescription to that effect and indicate: ▼

Family name and first name of person accompanying the worker		Advance received (if applicable) ▶	\$
Address	Telephone	Signature of person applying for reimbursement ▶	Year Month Day



