



EMPLOYER REGISTRATION 2025-2026

PO Box 757, 14 Weymouth Street, Charlottetown, PE C1A 7L7 wcb.pe.ca
 Phone: 902-368-5680 Toll-free: 1-800-237-5049 Fax: 902-368-5705
 Email: safetymatters@wcb.pe.ca

To register as a new employer with the Workers Compensation Board (WCB), please complete this form and submit it to the address above by mail, fax, email or in person. You can also register using WCB Online Services at wcb.pe.ca

SECTION (A) EMPLOYER INFORMATION

WCB Employer #:	Contact Person:
Business Name:	Phone:
Mailing Address:	Email:
City/Town:	Trade Name:
Province:	CRA Business Number:
Postal Code:	Fax:
Description of business activities:	
How often do you want to file your payroll with the WCB? Monthly <input type="checkbox"/> Annually <input type="checkbox"/>	Starting month of workers:

SECTION (B) PAYROLL RECORDS

Address where your payroll records are kept:

SECTION (C) PROPRIETORS AND PARTNERS (of non incorporated business) or OWNERS AND DIRECTORS (of corporations)

Name	Title	Phone	Email

SECTION (D) PERSONAL COVERAGE ACKNOWLEDGEMENT

I acknowledge that independent operators, proprietors or partners of a non-incorporated business, and owners, shareholders or directors of a corporation do not meet the definition of a “worker” under the Act. Therefore, they are not included in assessable payroll and not automatically covered under the WCB. To have the same coverage as workers, a Personal Coverage application must be made separately as set out in POL-22.

Please select **only one** of the following options:

<input type="checkbox"/> I intend to purchase WCB Personal Coverage for 2026 and will complete and submit the separate Personal Coverage application form to the WCB.	<input type="checkbox"/> I do not intend to purchase WCB Personal Coverage for 2026.
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SECTION (E) FOR OUT OF PROVINCE EMPLOYERS ONLY

Do you employ PEI resident workers? Yes No

Do you intend to work a total of 10 or more days in PEI in this calendar year? Yes No

Please note: Non-PEI resident employees who do not work at total of 10 or more days in a calendar year are not considered workers under policy POL-19, Employer Registration, and are not subject to assessment.

SECTION (F) OPERATIONS

**Calculate payroll based on maximum assessable earnings per worker: 2025 - \$82,900; 2026 - \$89,300
(Refer to Payroll Reporting Guidelines for instructions on how to calculate Actual Assessable Gross Payroll)**

Operation Name	Description of Business	2025 Number of Workers	2025 Actual Assessable Gross Payroll	2026 Number of Workers	2026 Estimated Assessable Gross Payroll	Seasonal? (Yes/No)	Starting Month for Seasonal Workers

SECTION (G) APPLICATION DECLARATION

By submitting this application, I confirm that I have read and understood the content and requirements of this application. I confirm that the information provided is complete and accurate to the best of my knowledge. I understand that it is an offence to provide false or misleading information or to omit relevant information from this application.

Signature	Date

Information on this form is collected for the purposes of administering and enforcing the *Workers Compensation Act* and is collected under the authority of that *Act* and section 31 of the *Freedom of Information and Protection of Privacy Act*. If you have any questions about this collection of information, please contact: FOIPP Coordinator, Workers Compensation Board of PEI, PO Box 757, 14 Weymouth Street, Charlottetown, PE,C1A7L7, 902-368- 5680, toll-free at 1-800-237-5049 or accessandprivacy@wcb.pe.ca.

Your opinion is important to us. To improve services, the WCB may contract an independent survey company to survey a sample of employers. The WCB does not know which employers will be contacted. If you are contacted, we encourage you to participate. The research company does not share your personal responses with the WCB.