



Infirmary Occupational Health

INFIRMARY HEALTH

305 North Water Street, Mobile, Alabama 36602

Phone: 251-433-3781 Fax: 251-433-3772

New Company Account Information

Company name: _____

(Doing business as): _____

Physical address: _____ City: _____ State: _____ Zip: _____

Mailing address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Company website: _____

Main Contact (Name): _____ Title: _____

Phone: _____ Fax: _____ Email: _____

Workman's Comp Information

Bill/Invoice Work Comp Claims To: _____ Insurance Carrier _____ Company _____

Name Of Carrier: _____

Carrier's Billing Address: _____

City: _____ State: _____ Zip: _____ Phone: _____ Fax: _____

Injury Treatment: Drug Screen? Yes No Breath Alcohol (Bat)? Yes No

If Yes, Type Of Drug Screen And/Or Bat: _____

Bill/Invoice Drug Sreen & Bat With Comp. Y / N Bill/Invoice Separate To Company Y / N Or Bill Third Party Y / N

Name Of Third Party: _____

Billing Address: _____

City: _____ State: _____ Zip: _____ Phone: _____ Fax: _____

Physical/Drug Screen Information

Services Requested: _____

Bill/Invoice Services To: Company/Third Party: _____

Address: _____ City: _____ State: _____ Zip: _____

Attn: _____ Phone: _____ Fax: _____