

POSTING NOTICE

Form 16-NJ A

the law requires every insured employer to post and maintain notices naming the company insuring its compensation liability "in a conspicuous place or places in and about the employer's place of business." The form of notice is prescribed by the Commissioner of Banking and Insurance and shall be clearly printed on a minimum of 90# index or on standard stock copy paper, 8 1/2" by 11" in size. The company insuring its compensation liability may, upon request, send the notice electronically to the employer. The content and arrangement of items must be consistent with the layout shown below. In accordance with 3:2-1 a duplicate filing must be made before the form is placed in use.

NOTICE

The undersigned employer hereby gives notice that the payment of compensation to employees and their dependents has been secured in accordance with the provisions of the Employer's Liability Insurance Law , Title 34, Chapter 15, Article 5, Revised Statutes New Jersey, by insuring with the

THE PMA COMPANIES
380 SENTRY PARKWAY
PO BOX 3031
BLUE BELL PA
19422-0754
(888)476-2669

for the period

Beginning 07/01/2026 Ending 07/01/2027

Employer LEHIGH UNIVERSITY

In accordance with the above cited law, notice of compliance must be posted and maintained conspicuously in and about the employer's workplaces.

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AVISO

El empleador abajo firmante, notifica que el pago de compensación a empleados y sus dependientes ha sido asegurado de acuerdo con las disposiciones de la ley de seguros de responsabilidad del empleador, Título 34, Capítulo 15, Artículo 5, Estatutos Revisados del estado New Jersey, asegurándolos con el

(THE PMA COMPANIES 380) **Compañía de Seguros**
SENTRY PARKWAY
PO BOX 3031
BLUE BELL PA 19422-0754
(888) 476-2669

por el periodo

Comenzando 07-01-2026
Finalizando 07-01-2027
Empleador LEHIGH UNIVERSITY

De acuerdo con la ley citada anteriormente, aviso de cumplimiento deben publicarse y mantenerse de manera visible en y alrededor los lugares de trabajo del empleador.