Approved form AF2002-129

made under the

Workers Compensation Rules 1938

Workers Compensation Rules 1938—Form 5

(see r 13)

Application for arbitration in relation to the review, termination, diminution, increase, or redemption of a weekly payment

C.D., of [address] [description] Applicant,

and

A.B. of

[address] [description]

[or as the case may be]

An arbitration under the *Workers Compensation Act 1951*, is requested between C.D. and A.B.

[or as the case may be]

in relation to the review and termination [or diminution, or increase, or redemption, as the case may be] of the weekly payment payable to A.B. under the Act in relation to personal injury arising out of and in the course of his or her employment.

Particulars are appended [or annexed.]

Particulars

- 1 Name and address of injured worker.
- Name and place of business of employer by whom compensation is payable.

- 3 Date and nature of injury.
- Date of agreement, decision, or award fixing weekly payment, amount of such payment, and date from which it commenced.
- 5 Relief sought by applicant, whether termination, diminution, increase, or redemption.
- 6 Grounds on which termination, diminution, or increase is claimed.

The names and addresses of the applicant and his or her solicitor or agent are:

Of the applicant,

Of his or her solicitor,

(Or, Agent.)

The name and address of the respondent to be served with this application are:

Dated:

(Signed)

Applicant.

[Or Applicant's solicitor.]

[Or Agent.]

Endnotes

- This form was originally in the *Workers Compensation Rules 1938*, schedule 1. Under amendments made by the *Legislation (Consequential Amendments) Act 2001*, the form was omitted from the rules and became a form approved under the rules, rule 89 (see amdt 1.2805, amdt 1.2807).
- This republication includes amendments made under the *Legislation Act 2001*, part 11.3 (Editorial changes).

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