



## NOTES FOR SERVING PARTY

- Complete this form if you are giving documents pursuant to rule 66 and rule 68 of the *Workers Compensation and Injury Management Arbitration Rules 2024*.
- WorkCover WA provides an electronic document system (EDS) for the lodgement of applications and documents related to disputes called **WorkCover WA Online**. Unless a party is exempt from using the EDS, all documents must be lodged via WorkCover WA Online. Exempt parties can also use the EDS if they wish. Registration as a user of WorkCover WA Online is easy and can be done via our website.
- Further information is available in the **Guide to the Workers Compensation Arbitration Service** and can be found on our website or by contacting WorkCover WA's Advice and Assistance line of 1300 794 744.
- Exempt applicants can lodge this form by:

Email

arbitration@workcover.wa.gov.au

In Person

**WorkCover WA**  
2 Bedbrook Place  
Shenton Park WA 6008  
(Monday to Friday 8am to 4:30pm)

By Post

**Workers Compensation Arbitration Service  
WorkCover WA**  
2 Bedbrook Place  
Shenton Park WA, 6008

## SECTION A - CASE DETAILS

- Case number
- Applicant
- Respondent
- Lodged by (*tick relevant box*)
 

Worker	<input type="checkbox"/>	Employer	<input type="checkbox"/>	Insurer	<input type="checkbox"/>	Dependant	<input type="checkbox"/>
Worker representative	<input type="checkbox"/>	Employer representative	<input type="checkbox"/>	Insurer representative	<input type="checkbox"/>	Service provider	<input type="checkbox"/>

Other (*please specify*)

## SECTION B – GIVING OF DOCUMENTS

- Certificate that document was given

I,

(*Full name*)

of,

(*Address*)

(*Occupation*)

did on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_ at \_\_\_\_\_

at

(*Address*)

gave to

(*Name of person or corporation*)

(*The applicant or respondent*)

in this case

(*Title and form number of document(s) given*)

- Tick the relevant boxes (*continued over the page*)

By leaving the document(s) with (*name*)

(*indicate the status of*

*person given to*)

By putting the document down  
in the presence of *(name)*

*(indicate the status of person  
given to)*

and advising them of the nature of  
the document

By handing the document to a legal practitioner or authorised agent who is representing the partnership in the proceedings

By delivering the document  
to *(address)*

being the

persons usual place of residence **OR** principal place of business

By sending the document by  
pre-paid post to *(address)*  
postal address provided under rule 67

being the

By sending the document by  
pre-paid post to *(address)*

being the

persons usual or last known place of residence **OR** principal or last known place of business

With the consent of *(name)*

in the following manner

Other

*(describe any other lawful means of giving)*

## **SECTION C – SIGNATURE OF THE PERSON CERTIFYING THE GIVING OF DOCUMENTS**

Signature

Date