



NOTICE CONSENTING OR OPPOSING APPLICATION FOR ORDER AND/OR ASSESSMENT OF COSTS Form 164A

NOTES FOR PARTIES

- This form is to be completed in response to an Application for Order and/or Assessment of Costs, pursuant to rules 61 and 62 of the Workers' Compensation and Injury Management Arbitration Rules 2011.
- This form must be lodged and served within 14 working days after the service of the Application for Order and/or Assessment of Costs.
- · Attach a separate page(s) to this form if you do not have enough space.
- This form must be signed.
- Completed forms must be lodged lodged online at https://online.workcover.wa.gov.au, or if you are an exempt party and choose
 not to lodge online, by either:

POST

Workers' Compensation Arbitration Service WorkCover WA 2 Bedbrook Place SHENTON PARK WA 6008

OR

EMAIL

Documents may be lodged by email subject to conditions. See the WorkCover WA website.

OR

IN PERSON

Workers' Compensation Arbitration Service 2 Bedbrook Place SHENTON PARK WA 6008 Monday to Friday, 8am to 5pm

- If lodging by post or in person, you must file the original notice and attachments with the Workers' Compensation Arbitration Service, plus a copy for each party to the dispute.
- · Sealed copies will be returned to you for service on the other parties.

For further information, please contact WorkCover WA's Advice and Assistance Unit on 1300 794 744 or (08) 9388 5537 (TTY).

SECTION A - CASE DETAILS

- 1. Case number
- 2. Applicant
- 3. Respondent
- 4. Lodged by (tick relevant box)

Worker Employer Insurer Dependant

Worker representative Employer representative Insurer representative Service provider

Other (please specify)

SECTION B - CONSENTING OR OPPOSING APPLICATION

5. Please indicate by ticking the relevant box(es) if

The party responding to the Application for Order and/or Assessment of Costs consents to the Order as to costs

The party responding to the Application for Order and/or Assessment of Costs consents to the Assessment of costs

The party responding to the Application for Order and/or Assessment of Costs opposes the Order as to costs

The party responding to the Application for Order and/or Assessment of Costs opposes the Assessment of costs

If the Application is opposed, state the reason(s) the Application for Order and/or Assessment of Costs is opposed

SECTION C - SIGNATURES

Signature	
	Name
	Date