



**Workers Compensation
Arbitration Service**
2 Bedbrook Place
Shenton Park WA 6008
workcover.wa.gov.au

Switchboard **9388 5555**
Advice and Assistance **1300 794 744**

Memorandum of Consent Order

NOTES FOR PARTIES

- This form is issued pursuant to rule 38 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 on 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

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

Worker

Employer

Insurer

Dependent

Worker representative

Employer representative

Insurer representative

Service provider

Other (please specify)

SECTION B - CONSENT

5. The parties consent to the following order(s)

SECTION C - SIGNATURES

Signature of Applicant

Signature of Respondent

Name

Name

Date

Date

SECTION D – REGISTRAR/ARBITRATOR

The order is made in the terms outlined above

Date

Registrar/Arbitrator