Workers Compensation and Injury Management Act 2023

Intention to reduce or discontinue income compensation — Consent

## Worker

|  |  |
| --- | --- |
| Name: |   |
| Address: |   |

## Employer

|  |  |
| --- | --- |
| Name: |   |

## Claim

|  |  |
| --- | --- |
| Insurer: |   |
| Insurer claim number: |   |
| Date of injury: |   |

## Proposed Action

Your employer seeks your consent to the following change to your income compensation:

|  |
| --- |
| Reduce: |[ ]
| Discontinue: |[ ]
| Date of proposed action: |   |

## Reason

|  |
| --- |
|   |

## Compensation to be paid

|  |  |
| --- | --- |
| Current income compensation: | $  |
| Proposed income compensation: | $  |

## Signed

I consent to the proposed action by my employer.

|  |  |  |  |
| --- | --- | --- | --- |
| Worker: |   | Date: |   |

## Further information

Advice or assistance on workers compensation claims and disputes can be provided by WorkCover WA Advisory Services on 1300 794 744 or [www.workcover.wa.gov.au](https://www.workcover.wa.gov.au/), trade unions, or legal practitioners.

## Notice Details

|  |  |
| --- | --- |
| Notice issued by: |   |
| Email address: |   |
| Phone number: |   |
| Web: |   |

**Employer and insurer take notice**

**Note:** This approved form cannot be used to seek a worker’s consent to reduce or discontinue compensation in the following circumstances:

* If a worker takes leave. Section 61 of the Act provides the worker’s entitlement is not affected by the worker taking leave
* If a worker has returned to work. Section 63 of the Act requires approved form CN2 to be given in these circumstances
* On the basis of medical evidence about a worker’s capacity for work. Section 64 of the Act requires CN3 to be given in these circumstances
* If a settlement agreement has been lodged for registration. Section 156 of the Act provides that compensation ceases on the date of registration.