

Workers Compensation and Injury Management Act 2023

APPROVED FORM [s. 496]

Intention to Reduce or Discontinue Income Compensation – Return to Work

In accordance with section 496 of the *Workers Compensation and Injury Management Act 2023* the approved form for the information that must be given to a worker for the purposes of section 63(1) of the Act and regulation 27 of the *Workers Compensation and Injury Management Regulations 2024* is **Intention to Reduce or Discontinue Income Compensation – Return to Work** in Appendix 1.

The **Intention to Reduce or Discontinue Income Compensation – Return to Work** in Appendix 1 is effective 1 July 2025 and registered as WorkCover WA Approved Form CN2 – v2 [D2025/26363].

The **Intention to Reduce or Discontinue Income Compensation – Return to Work** in Appendix 1 replaces WorkCover WA Approved Form CN2 – v1 [D2024/36875] approved on 26 March 2024 and effective from 1 July 2024.



CHRIS WHITE
CHIEF EXECUTIVE OFFICER

9 May 2025

Workers Compensation and Injury Management Act 2023

**INTENTION TO REDUCE OR DISCONTINUE INCOME
COMPENSATION — RETURN TO WORK**

Worker

Name:

Address:

Employer

Name:

Claim

Insurer:

Insurer claim number:

Date of injury:

Proposed Action

Your employer intends to make the following change to your income compensation due to your return to work:

Reduce: ☐

Discontinue: ☐

Date of proposed action:

Return to work

Date of return to work:

Position:

Capacity: ☐ Full ☐ Partial

Compensation to be paid

Current income compensation: \$

Proposed income compensation: \$

Declaration

I confirm that you have returned to work in the position described above and that all information provided in this notice and any attachments are correct and complete.

I am authorised to complete and sign this declaration.

Penalties may apply for illegally reducing or discontinuing a worker's income compensation

Authorised person
signature:

Date:

Authorised person name:

Authorised person position:

Note: Prior to making this declaration an employer or insurer must have evidence of the worker's return to remunerated work which may include pay slips, or correspondence from the worker or employer or a notice provided by the worker under section 32 of the *Workers Compensation and Injury Management Act 2023*.

This approved form cannot be used to reduce or discontinue compensation 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.

Further information

If you wish to dispute an aspect of this decision, the matter can be reconsidered under our internal dispute resolution process. Information on this process is available by contacting the person below.

The decision can also be disputed through WorkCover WA's Conciliation and Arbitration Services.

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, trade unions, or legal practitioners.

Notice Details

Notice issued by:

Email address:

Phone number:

Web: