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SPECIAL

Accident Compensation Act 1985 WorkCover Legal Costs Order 2001

The Governor in Council, under section 134AG of the **Accident Compensation Act 1985**, makes the following Order:

Dated 18 December 2001

Responsible Minister:
BOB CAMERON MP
Minister for WorkCover

HELEN DOYE
Clerk of the Executive Council

1. Citation

This Order may be cited as the WorkCover Legal Costs Order 2001.

2. Application

This Order specifies the legal costs that may be recovered on a party and party basis by a legal practitioner acting on behalf of a worker in respect of any claim, application or proceedings under section 134AB of the **Accident Compensation Act 1985**.

3. Definitions

“*Act*” means the **Accident Compensation Act 1985**;

“*advice*” means the advice of the Authority or self-insurer referred to in sections 134AB(7) and (8) of the Act;

“*application*” mean an application in the form referred to in section 134AB(5)(a) of the Act;

“*attendances*” mean services provided by a legal practitioner including all work referred to in the Scales of Costs contained in the County Court Rules and in the Supreme Court Rules;

“*Authority*” means the Victorian WorkCover Authority established under section 18 of the Act;

“*claim*” means the proposed claim at common law, in respect of each cause of action which the worker seeks to maintain;

“*County Court Rules*” means the County Court Rules of Procedure in Civil Proceedings 1999 made under the **County Court Act 1958**;

“*legal practitioner*” has the same meaning as in the **Legal Practice Act 1996**;

“*medical report*” means a medical report as defined in section 134AB(37) of the Act;

“*offer*” means an offer in settlement or compromise of a claim and includes an offer of a nil amount;

“*Scales of Costs*” means the Scale of Costs contained in Appendix A to the County Court Rules or the Scale of Costs contained in Appendix A and B of Chapter 1 to the Supreme Court Rules.

“*section 134AB(12) conference*” means a meeting, discussion or series of meetings or discussions commenced in accordance with section 134AB(12) of the Act;

“*self-insurer*” means a body corporate or partnership approved as a self-insurer under Part V of the Act;

“*statutory offer*” and “*statutory counter offer*” mean the offers referred to in section 134AB(12) of the Act;

“*Supreme Court Rules*” means the Supreme Court (General Civil Procedure) Rules 1996 made under the **Supreme Court Act 1986**;

4. Legal Costs

- A. Where a worker settles or compromises a claim and recovers damages after making an application and after a section 134AB(12) conference has commenced, and prior to commencing proceedings in accordance with section 134AB(12) of the Act, the worker's legal practitioner is entitled to recover on a party and party basis the costs of the application and the section 134AB(12) conference as follows:-
- (1) legal practitioner's professional costs, \$6,500 (inclusive of counsel's fees);
 - (2) for medical reports relied upon and exchanged on behalf of the worker, the worker's legal practitioner is entitled to recover as a disbursement the reasonable costs of:
 - (a) all medical reports from each medical practitioner who has treated the worker;
 - (b) one medico legal report per speciality relevant to the injury or injuries alleged to be and accepted as or determined to be serious. The Authority or self-insurer may allow the cost of more than one medico legal report per speciality;
 - (3) for non-medical expert reports, the worker's legal practitioner is entitled to recover as a disbursement reasonable fees for relevant and necessary reports;
 - (4) in addition to the costs and fees referred to in paragraphs (2) and (3), the worker's legal practitioner is entitled to recover reasonable interpreters' fees and travel allowances payable in accordance with the Scale of Costs contained in the County Court Rules.
- B. Where a worker settles or compromises a claim and recovers damages, or obtains judgment and is awarded damages after instituting proceedings under section 134AB (12) of the Act and if section 134AB(28)(b) of the Act applies, the worker's legal practitioner is entitled to costs on a party and party basis as follows:-
- (1) legal practitioner's professional costs and disbursements of the application and section 134AB(12) conference in accordance with the entitlement set out in Part A, paragraphs (1) – (4); and
 - (2) legal practitioner's professional costs of the proceeding (including counsel's fees), calculated in accordance with the Scale of Costs that would in the absence of this Order have applied (but as if the amounts in the scale were reduced by 20 per cent), plus disbursements, but excluding any amount in respect of attendances or disbursements incurred prior to rejection of the statutory counter offer by the Authority or self-insurer or before the expiration of 21 days from receipt of the statutory counter offer, whichever is earlier.
- C. In addition to the sums specified at Parts A and B above, where proceedings are instituted by a worker pursuant to section 134AB(16)(b) of the Act, and costs are awarded to the worker, the worker's legal practitioner shall be entitled to legal practitioner's professional costs on a party and party basis of the proceeding (including counsel's fees), calculated in accordance with the Scale of Costs that would in the absence of this Order have applied (but as if the amounts in the scale were reduced by 20 per cent) plus disbursements, but excluding any amount in respect of attendances and disbursements incurred prior to the delivery of the advice by the Authority or self-insurer.
- D. Where a worker settles or compromises a claim and recovers damages prior to making an application, the worker's legal practitioner shall be entitled to costs on a party and party basis as follows:-
- (1) legal practitioner's professional costs, \$1,900 (inclusive of counsel's fees);
 - (2) disbursements in accordance with Part A, paragraphs (2) – (4).

Footnote

The entitlement to costs and disbursements under this Order replaces any other entitlement of a worker to be awarded legal practitioners' professional costs and disbursements for or incidental to an application, a section 134AB(12) conference or proceedings commenced in accordance with section 134AB(12) or section 134AB(16) of the Act, and has full force and effect notwithstanding anything to the contrary in the **Legal Practice Act 1996**, the **Supreme Court Act 1986** or the **County Court Act 1958** or in any regulation, rules, order or other document made under any of those Acts.

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MINISTERIAL DIRECTIONS

1. Preamble

These are Directions with respect to procedures under Section 134AB of the **Accident Compensation Act 1985** (the "Act") and are made pursuant to Section 134AF and Section 20C of the Act. Pursuant to the provisions of the Act, employers, the Authority, authorised agents, self-insurers, workers and the legal representatives of each must comply with these Directions.

2. Objectives of these Directions

The objectives of these Directions are to ensure that:

- (a) procedures under Section 134AB of the Act are as efficient a means as possible of delivering appropriate damages to injured workers, managed in a consistent manner by the Authority, authorised agents and self-insurers;
- (b) all applications under the Act are the subject of quality decision making by the Authority, authorised agents and self-insurers;
- (c) in applications where "serious injury" is granted, every attempt is made by the Authority, authorised agents, self-insurers, the worker and all legal representatives to settle or compromise claims for the appropriate amount of damages, without resort to legal processes.

3. Definitions

In these Directions:

"Act" means the **Accident Compensation Act 1985**;

"advice" means the advice of the Authority or self-insurer referred to in Sections 134AB(7) and (8) of the Act;

"application" means an application in the form referred to in Section 134AB(5)(a) of the Act;

"application and supporting documents" means an application in the form referred to in Section 134AB(5)(a) of the Act, and the accompanying documents referred to in Section 134AB(5)(b) of the Act;

“*authorised agent*” means a person appointed as an authorised agent under Section 23 of the Act;

“*Authority*” means the Victorian WorkCover Authority established under Section 18 of the Act;

“*claim*” means the proposed claim for damages at common law, in respect of each cause of action which the worker seeks to maintain;

“*claim for compensation*” means a claim for compensation made under Section 98C or Section 98E of the Act;

“*County Court Rules*” means the County Court Rules of Procedure in Civil Proceedings 1999;

“*medical report*” means a medical report as defined in Section 134AB(37) of the Act;

“*offer*” means an offer in settlement or compromise of a claim and includes an offer of a nil amount;

“*response date*” means the response date as defined in Section 134AB(37) of the Act;

“*Section 134AB(12) conference*” means a meeting, discussion or series of meetings or discussions as are commenced in accordance with Section 134AB(12) of the Act;

“*self-insurer*” means a body corporate or partnership approved as a self-insurer under Part V of the Act;

“*statutory offer*” and “*statutory counter offer*” mean the offers referred to in Section 134AB(12) of the Act.

4. Application of these Directions

These Directions apply to an application made to the Authority or self-insurer after the date upon which they are published in the Government Gazette.

5. Contents of the application and supporting documents

5.1 An application cannot be made prior to completion of the requirements in Section 134AB(4) of the Act. The application should not be made until the worker:

- (a) has made a claim for compensation in accordance with the provisions of the Act, or alternatively the Authority or a self-insurer has made the request contained in Section 104B(1C) of the Act; and
- (b) has received an assessment under Section 104B of the Act; and
- (c) has advised the Authority or self-insurer whether or not he or she wishes to receive any entitlement to compensation under Section 98C or Section 98E of the Act.

5.2 The form approved by the Authority pursuant to Section 134AB(5) of the Act is “Form A”, as attached to these Directions (“Form A”).

5.3 The details required by these Directions to be specified in or included in or attached to an application must be specified in or included in or attached to the application itself, and any reference to other material or documents (whether or not they accompany the application) as constituting the details required to be specified or included shall constitute a failure to comply with these Directions.

5.4 An application must in respect of each claim:

- (a) specify the injury or injuries relied upon;
- (b) where the worker does not have a deemed serious injury within the meaning of Section 134AB(15) of the Act, specify:
 - (i) the sub-paragraph or sub-paragraphs of the definition of “serious injury” in Section 134AB(37) of the Act the worker relies upon to constitute each serious injury contended for; and
 - (ii) any body function or body functions alleged to be impaired, on which reliance is placed; and

- (iii) whether, for the purposes of Section 134AB(38)(b) of the Act, the worker relies upon consequences with respect to pain and suffering and/or loss of earning capacity;
 - (c) have attached to it a Statement of Claim naming each person against whom the worker claims to have a cause of action, which states each cause of action in a manner in compliance with Order 13 of the County Court Rules and which contains the particulars required by Rule 13.10 of the County Court Rules;
 - (d) have attached to it complete copies of the worker's taxation returns (along with returns of each partnership, corporation or trust in which the worker has a material interest), or other proof of income where such returns are unavailable and cannot be obtained, for the period of three years prior to each injury or injuries relied upon in the application to the date of the application;
 - (e) specify, for the periods referred to in Direction 5.4(d) above, the name and address of each employer of the worker, the period of employment with each employer and the worker's gross earnings with each employer in respect of each period referred to.
- 5.5 An application must be accompanied by:
- (a) a copy of all medical reports; and
 - (b) affidavits attesting to such other material, existing when the application is made and of which the worker or his or her legal representative is aware and on which the worker intends to rely, or the substance of which the worker intends to adduce in evidence.
- 5.6 The affidavit of the worker must contain the following information in respect of each claim:
- (a) the injury or injuries relied upon (including the date or dates the injury or injuries occurred);
 - (b) a description of the manner in which, and circumstances under which, the injury or injuries arose;
 - (c) when and from whom the worker has received treatment in relation to the injury or injuries;
 - (d) in respect of each body function or body functions alleged to be impaired, on which reliance is placed, the nature and extent of the pain and suffering, loss of amenity of life or loss of enjoyment of life suffered by the worker resulting from the impairment (including, if applicable, an explanation of the effect of the impairment on the worker's ability to engage in hobbies, recreation, sporting pursuits and domestic activities undertaken prior to the impairment);
 - (e) in respect of disfigurement, on which reliance is placed, the nature and extent of the pain and suffering, loss of amenity of life or loss of enjoyment of life suffered by the worker resulting from the disfigurement (including, if applicable, an explanation of the effect of the disfigurement on the worker's ability to engage in hobbies, recreation, sporting pursuits and domestic activities undertaken prior to the disfigurement);
 - (f) in respect of each behavioural disturbance or disorder, on which reliance is placed, the nature and extent of the pain and suffering, loss of amenity of life or loss of enjoyment of life suffered by the worker resulting from the behavioural disturbance or disorder (including, if applicable, an explanation of the effect of the behavioural disturbance or disorder on the worker's ability to engage in hobbies, recreation, sporting pursuits and domestic activities undertaken prior to the behavioural disturbance or disorder);

- (g) particulars of the worker's past and future economic loss, and loss of earning capacity;
- (h) an explanation of the effect of the injury or injuries on the worker's employment and earning capacity;
- (i) particulars of all absences from employment or periods of alternate or modified duties as a consequence of the injury or injuries;
- (j) details of all employment undertaken following the injury or injuries (including periods during which it was undertaken);
- (k) details of any rehabilitation and/or retraining which has been offered to the worker or which the worker has attempted or undertaken;
- (l) details of any attempts by the worker to obtain alternative employment or further or additional employment.

5.7 Affidavits from non-medical expert witnesses must contain the following information:

- (a) the qualifications of the witness to give evidence as an expert;
- (b) copies of all documents (including instructions) provided to the expert for the purpose of obtaining the expert's opinion;
- (c) where the expert's report is not exhibited to the affidavit, the substance of the evidence it is proposed to adduce from the witness as an expert, including the opinion of the witness and all facts on which the opinion is based.

5.8 (a) If, for the purposes of preparing an affidavit from a non-medical expert witness in accordance with this Direction on behalf of the worker, the worker's legal representative and the deponent require access to the premises of that worker's employer at the time of the injury or injuries, access on reasonable terms to that part of the employer's premises where the injury or injuries occurred should be granted by the employer;

- (b) A request for such access must be made in writing addressed to the Director, Common Law, Impairment and Dispute Management Division, Victorian WorkCover Authority, 222 Exhibition Street, Melbourne or, where the employer is a self-insurer, addressed to the self-insurer at the address for service referred to in Direction 6.2.

5.9 Any affidavits from other witnesses must contain the substance of any evidence of the deponent which the worker intends to adduce in evidence in support of the application.

6. Service of the application and supporting documents

6.1 Where the injury or injuries the subject of the application were sustained by the worker in his or her employment with an employer who is not a self-insurer, the application and supporting documents must be:

- (a) addressed to the Director, Common Law, Impairment and Dispute Management Division, Victorian WorkCover Authority, 222 Exhibition Street, Melbourne; and
- (b) served either by registered mail, or by hand delivery during business hours to the Victorian WorkCover Authority, at the reception, Level 24, 222 Exhibition Street, Melbourne.

6.2 Where the injury or injuries the subject of the application were sustained by the worker in his or her employment with an employer who is a self-insurer, the application and supporting documents must be:

- (a) addressed to the self-insurer at the address the self-insurer has notified to the Authority as its address for service in the State of Victoria; and
- (b) served either by registered mail or by hand delivery during business hours at that address.

- 6.3 The Authority must keep an up to date register of the address for service of each self-insurer and provide details of that address to the worker or the worker's legal representative on request.
- 6.4 In the event that a self-insurer wishes to alter its address for service such alteration will be effectively made upon receipt by the Authority of written notification addressed to the Director, Common Law, Impairment and Dispute Management Division, Victorian WorkCover Authority, 222 Exhibition Street, Melbourne.
- 6.5 The Authority or self-insurer will acknowledge receipt of the application and supporting documents, in writing, and will record the date on which they were received and the date by which the advice is to be provided.

7. The advice

- 7.1 The advice of the Authority or self-insurer must be accompanied by:
 - (a) a copy of all medical reports; and
 - (b) affidavits attesting to such other material,
existing when the advice is given and of which the employer, Authority or self-insurer (or the legal representative of any of them) is aware and on which they intend to rely or the substance of which they intend to adduce in evidence.
- 7.2 An affidavit of the employer, Authority or self-insurer must contain the following information in respect of each claim relied upon by the worker:
 - (a) by way of exhibit, a Defence to the Statement of Claim attached to the worker's application and supporting documents which complies with Order 13 of the County Court Rules;
 - (b) particulars of all absences of the worker as a consequence of the injury or injuries from employment with the employer or self-insurer or periods on alternate or modified duties with the employer or self-insurer including a description of such duties;
 - (c) details of rehabilitation and/or retraining the worker has attempted or undertaken, or refused to attempt or undertake, and details of attempts by the worker to obtain alternative employment or further or additional employment;
 - (d) details of all requests made by or on behalf of the worker concerning retraining or the obtaining of alternative employment;
 - (e) a list of documents which the employer, Authority or self-insurer has in their possession and on which they intend to rely, copies of which will be exhibited, either separately or as a bundle, to the affidavit.
- 7.3 Any affidavits from non-medical expert witnesses must contain the following information:
 - (a) the qualifications of the witness to give evidence as an expert;
 - (b) copies of all documents (including instructions) provided to the expert for the purpose of obtaining the expert's opinion;
 - (c) where the expert's report is not exhibited to the affidavit, the substance of the evidence it is proposed to adduce from the witness as an expert, including the opinion of the witness and all facts on which the opinion is based.
- 7.4 Any affidavits from other witnesses must contain the substance of any evidence of the deponent which the employer or self-insurer intends to adduce in evidence, including the substance of any surveillance reports and exhibits of any surveillance film on which they intend to rely or the substance of which they intend to adduce in evidence.

8. Service of the advice

The advice is to be served:

- (a) in the event that the worker is legally represented, at the address of the legal representative as specified in Part G of Form A;
- (b) otherwise, by registered mail forwarded to the worker at the residential address of the worker as specified in Part A of Form A.

9. Application to the Court

In the event that:

- (a) the assessment of the degree of impairment of the worker as a result of the injury or injuries under Section 104B of the Act is less than 30 per centum; and
- (b) the Authority or self-insurer does not issue to the worker a certificate in writing consenting to the bringing of proceedings,

then (except in the circumstances specified in Section 134AB(20) of the Act) the worker cannot bring proceedings for the recovery of damages in respect of the injury or injuries unless he or she makes application to a court (other than the Magistrates' Court) within 30 days after receiving the advice.

10. Rebuttal affidavit of the worker

10.1 Section 134AB(10) of the Act provides that, within 28 days of receiving the advice, the worker may serve an affidavit attesting to further material (whether or not existing before the worker made the application) in rebuttal of material (other than medical reports) attested to in affidavits accompanying the advice.

10.2 An affidavit of a worker served pursuant to Section 134AB(10) of the Act is to include the following information:

- (a) identification of the affidavit which it seeks to rebut;
- (b) the material in the affidavit which it seeks to rebut, and the matters relied upon in respect of that rebuttal.

10.3 The affidavit must be served:

- (a) when the employer the subject of the application is not a self-insurer, in the manner specified in Direction 6.1 above;
- (b) when the employer the subject of the application is a self-insurer, in the manner specified in Direction 6.2 above.

11. Conferences

11.1 The worker, or his or her legal representative, shall arrange a Section 134AB(12) conference to commence within 21 days after the response date;

11.2 Whenever practicable, a Section 134AB(12) conference shall be attended by the worker, a representative of the Authority, authorised agent or self-insurer able to give instructions in relation to the claim, the legal representatives of each, and a representative of the employer.

12. Offers

12.1 A statutory offer by the Authority or self-insurer must be recorded by the Authority or self-insurer's legal representative in accordance with Form B attached to these Directions and is to be open for acceptance for 21 days and a copy is to be served on the worker or the worker's legal representative;¹

¹ Section 134AB(12)(b) of the Act provides that the Authority or self-insurer makes a statutory offer in writing in settlement or compromise of the claim at the conference, or after the conference begins, but no later than 60 days after the response date. Section 134AB(12)(c) of the Act provides that if the worker does not accept that offer within 21 days after it is made, the worker before the expiration of that period must make a statutory counter offer in writing in settlement or compromise of the claim.

12.2 A statutory counter offer must be recorded by the worker or the worker's legal representative in accordance with Form C attached to these Directions and a copy is to be served on the Authority or self-insurer or their legal representatives;

12.3 Where a claim or proceeding under Section 134AB is settled or compromised, the worker must execute a release if and when called upon to do so by the employer, authorised agent, Authority or self-insurer (or their legal representatives). Such a release must be forwarded to the worker or the worker's legal representative within one business day of such settlement or compromise.

13. Commencement of common law proceedings

In accordance with Section 134AB(12)(e) of the Act, and subject to Section 134AB(20) of the Act, the worker must not commence proceedings (except as there specified) earlier than 21 days or more than 51 days after a counter offer is made, or, if a counter offer is deemed to have been made under section 134AB(14) of the Act, more than 30 days after the counter offer is deemed to have been made.

14. Employer's responsibilities

14.1 Employers who are not self-insurers and who are respondents to an application or a proceeding under Section 134AB of the Act must:

- (a) make available to the Authority and its authorised agent (or their legal representative) all documents and information reasonably required for the purposes of such application or proceeding;
- (b) upon request, forward to the Authority and its authorised agent (or their legal representative) any documents relevant to the application or proceeding received from the worker or his or her legal representative;
- (c) co-operate with and assist the Authority and the authorised agent (and their legal representative) in the defence of the application or proceeding.

14.2 Failure by an employer to comply with Direction 14.1 above is a breach of the terms of the WorkCover Insurance Policy and a breach of the terms of that Policy may result in the Authority denying indemnity to an employer under the Policy.

15. Failure to comply with these Directions

15.1 Where, within 21 days of receiving the application and supporting documents, the Authority or self-insurer (or their legal representatives) gives notice to the worker or worker's legal representative that any part of the application and supporting documents do not comply with Direction 5 above, the period referred to in Section 134AB(7) of the Act is altered so that time ceases to run until the Direction has been complied with.

15.2 A notice served under Direction 15.1 above must:

- (i) specify why that part of the application and supporting documents do not comply with Direction 5; and
- (ii) state that the period within which the application is to be dealt with ceases to run from the date of the notice, and that time under Section 134AB(7) will commence to run from the date the Authority or self-insurer (or their legal representatives) gives notice in writing that it is satisfied that Direction 5 above has been complied with.

15.3 Except where the notice served under Direction 15.1 above is served by the Authority, a copy of any notice served must be provided to the Authority within seven days, addressed in the manner specified in Direction 6.1(a) above.

16. Costs

Costs on applications or proceedings under Section 134AB of the Act shall be the subject of a legal costs order made pursuant to Section 134AG of the Act.

BOB CAMERON MP
Minister for WorkCover

FORM A

FORM OF APPLICATION APPROVED BY THE AUTHORITY UNDER SECTION 134AB(5)(a) OF THE ACCIDENT COMPENSATION ACT 1985 (the "Act").

This form of application is to be used in making an application under Section 134AB(4) of the Accident Compensation Act 1985.

In making an application under Section 134AB(4) of the Act the requirements of the Ministerial Directions published in the Government Gazette on the 20th day of December 2001 must be complied with.

PART A. Details of Parties**1. Worker Details:**

Name: _____

Date of Birth: _____

Residential Address: _____

(post office box will not suffice)

Telephone No: _____

2. Employer Details:

(at date of injury or injuries)

Name of Employer: _____

Address: _____

Telephone No: _____

(if more than one complete for all)

3. Details of each company, firm or individual against whom the worker claims to have a cause of action

Name: _____

Address: _____

Telephone No: _____

(if more than one complete for all)

PART B. Injuries and body function alleged to be impaired and the limb of Section 134AB (37) of the Act relied upon**As to each cause of action**

1. Specify the injury or injuries relied upon.
2. Where the worker does not have a deemed serious injury within the meaning of Section 134AB(15) of the Act, specify:
 - (a) the sub-paragraph or sub-paragraphs of the "serious injury" definition in Section 134AB(37) of the Act the worker relies upon to constitute each serious injury contended for:
 - **permanent serious impairment or loss of a body function:**
Yes No
 - **permanent serious disfigurement:**
Yes No
 - **permanent severe mental or permanent severe behavioural disturbance or disorder:**
Yes No
 - **loss of a foetus:**
Yes No

- (b) the body function or functions alleged to be impaired on which reliance is placed;
- (c) whether the worker relies upon consequences with respect to:
- **pain and suffering:**
Yes No
 - **loss of earning capacity:**
Yes No

PART C Employment details

Details of the name and address of each employer of the worker; the period of employment with each employer and the worker's gross earnings with each employer for the periods referred to in Direction 5.4(e) of the Ministerial Directions.

Employer Details

Name: _____
 Address: _____
 Period of employment: _____
 Gross earnings: _____

(if more than one, complete for all)

PART D List of documents accompanying the application as required by Section 134AB(5)(b) of the Act and the Ministerial Directions

1. Medical reports naming the authors and dates of each report:
 - (i)
 - (ii)
 - (iii)
 - (iv)
2. Affidavit(s) of the worker and the date upon which each affidavit was sworn.
3. Affidavit(s) (if any) from non-medical expert witnesses, naming each deponent and the date upon which each affidavit was sworn.
4. Other affidavit(s) (if any), naming each deponent and the date upon which each affidavit was sworn.

PART E Documents required to be included with the application pursuant to Direction 5 of the Ministerial Directions

1. A Statement of Claim naming each person against whom the worker claims to have a cause of action, which states each cause of action in a manner in compliance with Order 13 of the County Court Rules and which contains the particulars required by Rule 13.10 of the County Court Rules.
2. Complete copies of the worker's taxation returns (along with returns of each partnership, corporation or trust in which the worker has a material interest), or other proof of income where such returns are unavailable and cannot be obtained, for the period of three years prior to each injury or injuries relied upon in the application and for the period of three years after each injury or injuries relied upon or where the application is made before the expiration of three years from the date of the injury or injuries to the date of the application.

PART F Acknowledgment by the worker

The worker acknowledges that he/she is aware that the information contained in this application, accompanying it and included with it must comply with the Ministerial Directions.

The worker further acknowledges that he/she is aware that a failure to comply with the Ministerial

Directions can result in the Authority or self insurer giving notice of any non compliance pursuant to Direction 15 of the Ministerial Directions. This may result in a delay in deciding the outcome of the application until the non compliance has been rectified.

Worker's Name

Worker's Signature

Date of Signature

Interpreter's Signature

PART G Legal representation

If the worker is legally represented state:-

Solicitor's Name: _____

Firm Name: _____

Postal Address: _____

Facsimile Number: _____

Reference: _____

SIGNED: (Legal Representative) _____

DATE OF SIGNATURE: _____

FORM B

SECTION 134AB(12)(b) STATUTORY OFFER

Worker: _____

Employer : _____

Self-Insurer : _____

**Date of Worker's Application
under Section 134AB:** _____

Statutory offer for the purposes of Section 134AB(12)(b)

(Amount in words)

(\$ _____)

(Figure)

**Legal Representative of the Authority
or Self-Insurer:**

Date:

FORM C
SECTION 134AB(12)(c) STATUTORY
COUNTER OFFER

Worker: _____

Employer : _____

Self-Insurer : _____

**Date of Worker's Application
under Section 134AB:** _____

Statutory counter offer for the purposes of Section 134AB(12)(c)

(Amount in words)

(\$ _____)

(Figure)

Worker :

Worker's Legal Representative:

Date:

Gazette Services

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