

## Approved form AF2002-182

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made under the

**Workers Compensation Rules 1938**

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### **Workers Compensation Rules 1938— Form 57**

(see r 57 (15))

#### **Notice by registrar to employer of receipt of medical certificate and declaration of identity**

*[Heading as in award or memorandum.]*

TAKE NOTICE, that I have received proof of identity and of continuance of incapacity in this matter.

And I request you to forward the sum of \_\_\_\_\_, being the amount of weekly payments payable to A.B. \_\_\_\_\_ under the award [or memorandum] from [the date to which they were last paid \_\_\_\_\_] to \_\_\_\_\_ [13 weeks from that date] to me, to be by me transmitted to A.B.

Dated:

Registrar of the Magistrates Court.

To [name and address of employer].

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## Endnotes

- 1 This form was originally in the *Workers Compensation Rules 1938*, schedule 1. Under amendments made by the *Legislation (Consequential Amendments) Act 2001*, the form was omitted from the rules and became a form approved under the rules, rule 89 (see amdt 1.2805, amdt 1.2807).
- 2 This republication includes amendments made under the *Legislation Act 2001*, part 11.3 (Editorial changes).

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