

ERO2

**Employer's Representative's  
Request for Photocopy of File(s)**

**ATTENTION: CLIENT SERVICE REPRESENTATIVE**

Workers' Compensation Board Claim number(s) \_\_\_\_\_

Injured Worker's Name \_\_\_\_\_

Date of Decision Being Appealed \_\_\_\_\_

I request photocopies of the above file(s) on the above claim(s) in which the disputable issue is:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I confirm that I have been duly authorized to do so and to represent \_\_\_\_\_

\_\_\_\_\_, as per attached authorization.

I understand the Board must notify the worker of this request and consider any objections he has to it.

In accordance with the provisions of Section 171.2(1) of The Workers' Compensation Act, 1979, I will not use any information contained in the said file(s) publicly or for any purpose other than of pursuing the disputable issue with the Workers' Compensation Board.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_\_\_\_

Signed \_\_\_\_\_

Position/Title \_\_\_\_\_

Address \_\_\_\_\_