

Notice of Representation

Section 1: Representation

from the date it	is sigi ıthoriz	ned. ze	u must submit this No				rm is valid for two (2) years ive to act on my behalf in the
Name of Last N Representative:		Last Nam	ne	Given Name(s)			
Company Nai	ne:						
Address	Street			Apartment, Suite, Unit Number or PO Box #			
	City/Town			Province		Postal Code	
Work Phone			Cell Phone		Fax Number		Messages Only
Email Address							
If the contact information changes, you must update the Appeals Commission immediately.							
Section 2: What this representation applies to							
This Notice of Representation applies to applications or appeals under the following WCB claims:							
		Claim/Ac	count #		Name of Worker/Employer		
Section 3: Authorization Signature							
Signature					Date (DD/MM/YYYY)		
Print the name	of th	e person	signing:				

You can file this form by:

- · submitting it online through our website;
- e-mail addressed to AC.AppealsCommission@gov.ab.ca;
- mail;
- fax; or
- courier or personal delivery to one of our two offices.

Edmonton

Appeals Commission for Alberta Workers' Compensation 1100,10405 Jasper Avenue Edmonton AB T5J 3N4

Tel: 780-412-8700 Fax: 780-412-8701

Calgary

Appeals Commission for Alberta Workers' Compensation 2300, 801 – 6th Avenue SW Calgary AB T2P 3W2

Tel: 403-508-8800 Fax: 403-508-8822

You can view our web site at: www.appealscommission.ab.ca

Collection, Use and Disclosure of Personal Information:

- The personal information that you are being asked to provide is collected under the authority of section 33(c), and managed in accordance with the *Freedom of Information and Protection of Privacy Act*.
- The information will be used for the purpose of processing your request for a hearing with the Appeals Commission for Alberta Workers' Compensation.
- It is important that every party to the appeal knows the case that is to be heard and has an opportunity to respond.
- Because of this, we share all documents related to the appeal with all other parties to the appeal and the Workers' Compensation Board.
- The information you provide may also be used for quality assurance and training purposes.
- If you have any questions regarding the collection, use or disclosure of your personal information, please contact the Appeals Commission.



