

Section 1: Representation

If you have a representative, you must submit this *Notice of Representation* form to our office. This form is valid for two (2) years from the date it is signed.

I appoint and authorize _____ as my representative to act on my behalf in the appeal. My representative's contact information is below

Name of Representative:	Last Name		Given Name(s)	
Company Name:				
Address	Street		Apartment, Suite, Unit Number or PO Box #	
	City/Town		Province	Postal Code
Work Phone	Cell Phone	Fax Number	Alternate Phone	
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/Account #	Name of Worker/Employer

Section 3: Authorization Signature

 Signature

 Date (DD/MM/YYYY)

Print the name of the 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.

For Appeals Commission
Use Only