

**IRONWORKERS WORKERS' COMPENSATION  
ALTERNATIVE DISPUTE RESOLUTION SYSTEM**

**STIPULATIONS WITH REQUEST FOR AWARD**

Case No(s). \_\_\_\_\_

Social Security No. \_\_\_\_\_

\_\_\_\_\_  
Applicant (Employee)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Correct Name(s) of Employer(s)

\_\_\_\_\_  
Address(es)

\_\_\_\_\_  
Name(s) of Insurance Carrier(s) Claims Administrator(s)

\_\_\_\_\_  
Address(es)

The parties hereto stipulate to the issuance of an Award and/or Order, based upon the following facts, and waive the requirements of Labor Code section 5313:

1. \_\_\_\_\_, born \_\_\_\_\_, while employed within the State of California as \_\_\_\_\_, \_\_\_\_\_ on \_\_\_\_\_, by \_\_\_\_\_  
(Occupation) (Group) (Date of injury) (Employer)

whose compensation insurance carrier was \_\_\_\_\_ sustained injury arising out of and in the course of employment to \_\_\_\_\_.  
(Parts of Body injured)

2. The injury caused additional temporary disability for the periods \_\_\_\_\_ through \_\_\_\_\_ for which indemnity has been paid at \$ \_\_\_\_\_ per week.

2(a). The injury caused additional temporary disability for the period \_\_\_\_\_ through \_\_\_\_\_ at the rate of \$ \_\_\_\_\_, and in the amount of \$ \_\_\_\_\_.

3. The injury caused permanent disability of \_\_\_\_\_%, for which indemnity is payable at \$\_\_\_\_\_ per week beginning \_\_\_\_\_, in the sum of \$\_\_\_\_\_, less credit for such payments previously made.

\_\_\_ And a life pension of \$\_\_\_\_\_ per week thereafter.

4. There is/is not a need for medical treatment to cure or relieve from the effects of said injury.

5. Medical-legal expenses are payable by defendant as follows:

6. Applicant's attorney requests a fee of \$\_\_\_\_\_

\_\_\_ Fees to be commuted.

7. Liens against compensation are payable as follows:

8. Other stipulations:

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Attorney for Applicant

\_\_\_\_\_  
Attorney or Authorized Representative for Defendant

\_\_\_\_\_  
Address of Attorney for Applicant

\_\_\_\_\_  
Address of Attorney or Authorized Representative