

## APPLICATION FOR LUMP SUM REDEMPTION SECTION 137

			(Em	ployere's full name)
of				
				(Address)
acknowledge that I have read and understood Comcare's letter about lump sum reasonable safety Rehabilitation and Compensation Act 1988 (SRC Act).	demptior	n available	under th	e terms of the
After considering this information, I (please tick one box only):				
Accept Do not accept				
that a lump sum be paid to me under section 137 of the SRC Act.				
Signature	Date		/	/
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PRIVACY INFORMATION				
Your privacy is important to us. For information about how we handle your personal www.comcare.gov.au/privacy or contact us on 1300 366 979 and request a copy				