

# IL Workers' Compensation

Series 163 – Vers. 7.0.2

Form Number	Form Name
IC1	Application for Adjustment of Claim
IC4	Notice of Motion and Order
IC5	Settlement Contract Lump Sum Petition/Order
IC6	Appearance of Representative
IC7	Petition for Immediate Hearing Under Sec 19(b)
IC8	Response to Petition for Immediate Hearing
IC9	Request for Hearing
IC10	Attorney Representation Agreement
IC11	Petition for Review of Arbitration Decision
IC11a	Petition for Review of Arbitration Decision/Sec 19(b-1)
IC14	Petition for Review Under Sec 19(h)/8(a)
IC14a	Petition for Immediate Hearing Under Sec 19(b-1)
IC14b	Response to Petition for Immediate Hearing Sec 19(b-1)
IC14d	Order to Dismiss/Withdraw Petition Under Sec 19(b-1)
IC15	Proof of Service
IC16	Subpoena
IC17	Motion to Voluntarily Dismiss
IC19	Order to Dismiss Case for Want of Prosecution
IC23	Petition to Reinstate Case
IC26	Notice of Change of Address
IC27	Motion to Dismiss Attorney of Record
IC28	Motion to Withdraw as Attorney of Record
IC29	Stipulation to Substitute Attorneys
IC31	Rehabilitation Plan
IC32	Notice of Rejection of Settlement Contract
IC33	Dedimus Potestatum
IC34d	Decision (short form – appealable)
IC34o	Order (short form – interlocutory)
IC34s	Order Removing Settled Case from Call
IC36	Request for Voluntary Arbitration
IC41	Arbitration Info Sheet
IC42	Request for Investigation Into Employer's Insurance Coverage
IC43	Request to Certify Lack of Insurance Coverage
IC44	Injured Workers' Benefit Fund: Request for Benefits and Affidavit
IC45	Employer's First Report
IC85	Employer's Supplementary Report of Injury
ICArbDec	Arbitration Decision
ICArbDec19(b)	19(b)Arbitration Decision
ICArbDec19(b-1)	19(b-1)Arbitration Decision
ICArbDecFatal	Arbitration Decision Fatal
ICArbDecN&E	Arbitration Decision Nature & Extent Only
ICPN	Notice to Employees from the State of IL
ICTR	Transcript Receipt Form