

**FLORIDA RULES OF  
WORKERS'  
COMPENSATION  
PROCEDURE**

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# FLORIDA RULES OF WORKERS' COMPENSATION PROCEDURE

## PART I. TRIAL PROCEEDINGS

### RULE 4.010. GENERAL PROVISIONS

These rules, adopted with the authority of sections 440.271 and 440.29(3), Florida Statutes, shall govern all workers' compensation proceedings before the judges of compensation claims and in the District Court of Appeal, First District.

These rules shall be cited as Florida Rules of Workers' Compensation Procedure and may be abbreviated Fla. R. Work. Comp. P.

#### Committee Notes

**1979 Adoption.** This replaces rule 1, W.C.R.P. There is no substantive change except to the changed title of trial forum from "judge of industrial claims" to "deputy commissioner," and "industrial relations commission" to "District Court of Appeal, First District."

**1992 Amendment.** The rules are amended throughout to reflect the change in the title "deputy commissioner" to "judge of compensation claims."

**1996 Amendment.** Editorial changes only.

### RULE 4.020. DEFINITIONS

The following definitions apply to all workers' compensation proceedings.

(a) "Carrier" means any licensed insurance carrier, self-insured employer, self-insurance fund, or pool providing workers' compensation insurance coverage under chapter 440, Florida Statutes, and includes the servicing agents of self-insureds.

(b) "Chief judge" means the chief judge of compensation claims appointed by the Governor, serving in the Department of Labor and Employment Security under chapter 440, Florida Statutes.

(c) "Claim" means any element of a petition for benefits or other entitlement for which judicial relief is sought. A claim not contained in a petition for benefits may be made only under rule 4.025.

(d) "Clerk" means the clerk of the District Court of Appeal, First District.

(e) "Department" means the Florida Department of Labor and Employment Security.

(f) "District Court" means the District Court of Appeal, First District.

(g) "Division" means the Division of Workers' Compensation of the Florida Department of Labor and Employment Security.

(h) "Docketing judge" means one or more judges designated by the chief judge pursuant to section 440.45(3), Florida Statutes.

(i) "EAO" means the Employee Assistance and Ombudsman Office created by section 440.191, Florida Statutes.

(j) "Facsimile" means the electronic transmission of documents by electronic signal that, when received, can be transformed by electronic means and stored on paper, microfilm, magnetic storage device, optical disk, or other storage media.

(k) "Filing" means delivery to the division, the judge, or the clerk of the district court as the context of chapter 440, Florida Statutes, or these rules requires.

(l) "Forms" means forms incorporated in these rules and promulgated pursuant to chapter 440, Florida Statutes.

(m) "Impasse" means the parties' inability to reach a mutually acceptable and voluntary agreement as to any matter at the mediation conference.

(n) "Informal dispute resolution" means the procedure established by section 440.191, Florida Statutes.

(o) "Joint petition" means a pleading filed jointly by the parties seeking approval of the stipulation in which the claimant receives a lump-sum payment of past or future benefits, or a combination of both, or

a release of a lien against a third party, in exchange for releasing the carrier from liability for certain benefits as allowed under section 440.20(11), Florida Statutes.

(p) "Judge" means judge of compensation claims pursuant to chapter 440, Florida Statutes.

(q) "Mediation agreement," also known as a "mediation settlement agreement," means a mutually acceptable and voluntary written or recorded agreement reached by the parties at a mediation conference, with the assistance of a mediator, resolving completely or partially a workers' compensation dispute or claim.

(r) "Mediation conference" means an informal, nonadversarial negotiation or settlement conference attended by the interested parties and supervised and conducted by a mediator.

(s) "Mediator" means the person who conducts a mediation conference.

(t) "Parties" include the employee, claimant, employer, carrier, health care provider, and division.

(u) "Petition for benefits" means a pleading meeting, specifically but not limited to, the requirements of sections 440.192(1)–(4), Florida Statutes, that invokes the jurisdiction of the judge.

(v) "Petitioner" or "claimant" means any person making a claim. A "petitioner" or "claimant" is a party within the meaning of these rules.

(w) "Pleading" means any paper or document filed under these rules invoking the jurisdiction of or seeking relief from the judge or any court under chapter 440, Florida Statutes. The request for assistance or other contact with the EAO is not a pleading that invokes the jurisdiction of the judge.

(x) "Procedural motion" means a motion relating to procedure or discovery that does not seek adjudication of entitlement to benefits. Motions that do not seek adjudication of entitlement to benefits and are based upon stipulated facts requiring no other evidence also shall be treated as procedural motions.

(y) "Request for assistance" means the initiation of the informal dispute resolution procedure established by section 440.191, Florida Statutes.

(z) "Verified pleading" means a pleading the facts of which are attested to under oath.

#### Committee Notes

**1979 Adoption.** These definitions adapt to the 1979 legislation by which, for instance, the Bureau of Workmen's Compensation was upgraded to a Division [of Workers' Compensation]. This replaces rule 2, 1977 W.C.R.P.

**1988 Amendment.** This rule is revised to include definitions of "carrier" (to include self-insureds and servicing agents) and "claimant" (to include any party with standing to bring a claim under chapter 440, Florida Statutes).

**1996 Amendment.** Many new definitions were added and the list was alphabetized.

#### RULE 4.022. PLEADINGS AND PROPOSED ORDERS

(a) **Generally.** All pleadings shall substantially conform to these rules. All pleadings including notices shall

(1) be typewritten or printed on 8½" by 11" bond paper;

(2) be signed by the party in interest or the party's attorney of record; and

(3) contain the mailing address and telephone number of the party or attorney filing the pleading. Attorneys shall include their Florida Bar number.

(b) **Proposed Orders.** Proposed orders, unless otherwise directed by the judge, shall be accompanied by an original, one copy for the judge, and enough copies and pre-addressed postage-paid envelopes to permit service on all parties and counsel of record. A copy of any proposed order shall be sent to opposing counsel and any party not represented.

#### Committee Notes

**1988 Adoption.** This rule is intended to standardize the form of pleadings and the preparation of documents by counsel for the use of the deputy commissioner.

**1996 Amendment.** Aligns pleadings in workers' compensation matters with those in the court system.

Section 440.32(3), Florida Statutes, requires that every pleading be signed by the attorney of record regardless of whether the claimant or petitioner executes the pleading.

#### **RULE 4.023. CONTRACT OF REPRESENTATION**

##### **(a) Approval of Contract.**

(1) The claimant and the attorney for the claimant may jointly apply to the judge having jurisdiction of the industrial accident to approve the contract of representation and enforce its provisions.

(2) The judge may approve the contract of representation without a formal hearing if it appears to be in substantial compliance with these rules and the provisions of chapter 440, Florida Statutes.

(3) Upon approval of the contract of representation without a formal hearing, the judge shall enter an order and serve a copy of the order on the attorney for the claimant.

(4) The attorney for the claimant shall promptly serve a copy of the order on all parties and counsel of record using the certificate of service provided in form 4.902.

##### **(b) Motion to Modify or Vacate Order Approving Contract.**

(1) Any party, for good cause, may object to and move to modify or vacate any order approving a contract of representation at any time.

(2) The filing and service of a motion to modify or vacate an order approving a contract of representation shall suspend the operation and effect of the order until the motion is heard and decided.

(3) The judge shall hear such motions promptly.

(c) **Modification or Disapproval.** Nothing in this rule shall preclude the judge from modifying or disapproving any contract of representation for good cause or to avoid undue hardship to any party.

#### **Committee Notes**

**1996 Adoption.** From former rule 4.061(a). Approval of any contract of representation by the judge of compensation claims is discretionary and not mandatory.

#### **RULE 4.024. REPRESENTATION AND APPEARANCE OF COUNSEL**

(a) **Appearance of Counsel.** An attorney who undertakes representation of a party in a workers' compensation matter shall file promptly a notice of appearance and serve copies to all parties including counsel of record. The notice of appearance shall be one page in length, bear the style and caption provided in form 4.901, and include the name, address, telephone number, and Florida Bar number of counsel.

The following shall suffice as notice of appearance:

(1) the service by the claimant's attorney of the order approving the contract of representation under rule 4.023;

(2) the filing of a notice of appearance with the division if no claim, application for hearing, request for assistance, or petition has been filed; and

(3) the filing of a notice of appearance with the presiding judge after a claim, application for hearing, request for assistance, or petition has been filed.

(b) **Substitution of Counsel.** Co-counsel or any successor attorney shall file a notice of appearance in accordance with the rules. Substitution of counsel may be made:

(1) by the filing and service of a stipulation, which does not require the approval of the judge;

(2) by motion, which requires approval of the judge.

(c) **Withdrawal of Counsel.** An attorney of record shall remain attorney of record and not be permitted to withdraw unless:

(1) the attorney files a written motion for withdrawal setting forth the reasons for the motion;

(2) the motion is served on the client and counsel for all parties; and

(3) an order is entered granting the motion of withdrawal.

(d) **Hearing.** If requested by any party, or on the judge's own motion, a hearing may be held to protect the rights of all parties.

(e) **Order.** The judge may, without a hearing, enter an order substantially the same as form 4.907.

#### Committee Notes

**1996 Adoption.** This replaces rule 4.060 and further clarifies existing procedure as to appearance and substitution of counsel.

### **RULE 4.025. CLAIMS NOT CONTAINED IN PETITION**

(a) **Generally.** Claims not contained in a petition shall be filed with the division at its office in Tallahassee and served under rule 4.030. Claims shall be subject to adjudication by the judge or reviewing court but shall not be subject to the informal dispute resolution process or review by the docketing judge. Claims shall be limited to the following subjects:

(1) **Modification of Prior Compensation Order.** Application for modification of an order under section 440.28, Florida Statutes, shall be substantially in the form of a petition under section 440.192(2), Florida Statutes, and shall include a request for a hearing. Adjudication shall be in the manner provided in rules 4.045, 4.075, and 4.085.

(2) **Claim for Reimbursement from Special Disability Trust Fund.** A claim for reimbursement from the Special Disability Trust Fund filed under section 440.49(7), Florida Statutes, shall be made under the administrative rules promulgated by the division. Adjudication of such a claim shall be in the manner provided in rules 4.045, 4.075, and 4.085.

(3) **Claims against Third Parties.** The employer or its carrier may at any time file a claim seeking reimbursement, contribution, indemnification, or exoneration from any third party. Adjudication of

such a claim shall be in the manner provided in rules 4.045, 4.075, and 4.085.

(4) **Claims Limited to Attorney Fees and/or Taxable Costs.** Claims limited to attorney fees and/or taxable costs when benefits have been paid previously and provided or awarded shall be handled under rule 4.144.

(5) **Substantive Motions.** Substantive motions shall be governed as provided by rule 4.065(a).

(b) **Consolidation of Claims.** On the judge's own motion, or on the motion of any party, the judge may consolidate any of the aforementioned claims, except for a claim for reimbursement from the Special Disability Trust Fund referred to in subdivision (a)(2), with any pending petition for the purpose of a hearing or for any other purpose.

#### Committee Notes

**1996 Adoption.** This rule defines the types of claims not included in a petition for benefits filed under section 440.192, Florida Statutes, that bypass the request-for-assistance process in section 440.191(2)(a), Florida Statutes, and the docketing judge's review under section 440.45(3), Florida Statutes.

**2000 Amendment.** Subdivision (5) was added to (a) to clarify that substantive motions under rule 4.065(a) are filed with the division when there is no petition pending with the judge of compensation claims. If a petition is pending with the judge of compensation claims, the motion should be filed with the presiding judge.

### **RULE 4.026. EXEMPTIONS FOR COLLECTIVE BARGAINING AGREEMENTS**

If authorized by a collective bargaining agreement filed with the division under section 440.211, Florida Statutes, the informal dispute resolution process, review by the docketing judge, or adjudication by a judge may be replaced by an alternative dispute resolution system that may supplement, modify, or replace the provisions of chapter 440, Florida Statutes.

#### Committee Notes

**1996 Adoption.** This rule recognizes an alternative dispute process other than that expressed in chapter 440, Florida

Statutes.

#### **RULE 4.027. VENUE**

(a) **Generally.** Venue shall be governed by section 440.25(4)(d), Florida Statutes.

(b) **Consolidated Petitions.** If a party's entitlement to benefits arises or may arise from two or more accidents in different venues against one or more employer/carriers, the party may file a consolidated petition or claim against both or all employer/carriers. Venue shall be determined by order of the chief judge or by agreement of the parties.

(c) **Motion.** A motion for consolidation shall be made to a presiding judge who shall forward the motion to the chief judge for determination.

#### **Committee Notes**

**1996 Adoption.** This rule intends to avoid the confusion as to the proper venue when there are two or more accidents in different venues involving the same or different employer/carriers.

#### **RULE 4.028. PETITION FOR BENEFITS**

(a) **Generally.**

(1) **Service.** A petition under chapter 440, Florida Statutes, shall be served by certified mail upon the employer, carrier, and the division in Tallahassee. Counsel for each party and any unrepresented party shall be served under rule 4.030. Upon receipt of the petition, the division shall forward it immediately to the docketing judge pursuant to section 440.192(2), Florida Statutes.

(2) **Form.** A petition shall meet the specificity requirements of sections 440.192(2) and (3), Florida Statutes, shall include a request for a hearing, and shall be in substantial compliance with the forms of these rules. The judge may request the EAO to assist unrepresented employees in filing a petition, as provided in section 440.192(2), Florida Statutes.

(3) **Notice.** A petition shall contain the fraud notice contained in section 440.105(7), Florida Statutes, and shall personally be signed and attested to by the petitioner.

(4) **Certificate of Good-Faith Effort.** A petition must include a certificate by the claimant or, if the claimant is represented by counsel, by the claimant's attorney stating the claimant or attorney has made a good-faith effort to resolve the dispute and the claimant or attorney was unable to resolve the dispute with the carrier.

(5) **Certificate of Completion of Informal Administrative Remedies.** A petition shall also include a certificate that one of the following has occurred:

(A) The informal dispute resolution process required by section 440.191, Florida Statutes, has been concluded.

(B) The EAO has declined to consider the matter.

(C) The parties were unable to resolve the dispute within 30 days after a request for assistance was made to the EAO.

(D) If medical care is being provided to the employee through managed care and the petition includes a claim for medical care under section 440.13(2)(a) and (b), Florida Statutes, the certificate must indicate that the grievance procedures required by section 440.134(15), Florida Statutes, were exhausted before filing the petition under section 440.192(3), Florida Statutes.

(b) **Amended Petition for Benefits.** A petition cannot be amended except by stipulation of the parties and approval by the judge. Such an amended petition shall not be subject to the informal dispute process or review by the docketing judge.

(c) **Employer/Carrier Petition for Benefits.** The employer or carrier may file a petition seeking an adjudication of any issue.

(d) **Consolidation.** Successive petitions may be consolidated by the judge on his or her own motion or on the motion of any party for purposes of any proceeding under chapter 440, Florida Statutes.

#### **Committee Notes**

**1996 Adoption.** Replaces rules 4.050 and 4.070. This rule

is intended to standardize the form for a petition for benefits and the preparation of such forms by counsel resulting from the 1993 amendments to chapter 440, Florida Statutes. The request or application for hearing is now incorporated in the petition and no longer is a separate pleading.

The grievance procedures referred to in subdivision (a)(5)(D) are the procedures required by section 440.134(15), Florida Statutes, and not chapter 120, Florida Statutes.

#### **RULE 4.029. REVIEW BY DOCKETING JUDGE**

(a) **Generally.** After receiving the petition, the division shall forward the petition immediately and all attachments filed with or received by the division to the docketing judge.

(b) **Review.** After receiving the petition from the division, the docketing judge shall promptly review the petition and attachments to determine if the requirements of sections 440.192 and 440.32(3), Florida Statutes, have been met and the matters in dispute have been acted on by the EAO.

(c) **Dismissal of Petitions Without Prejudice.** If the issues raised in the petition do not meet the requirements of sections 440.192(2)–(4), Florida Statutes, or the petitioner did not exhaust the EAO administrative remedies, the docketing judge shall summarily dismiss the petition without prejudice with leave to amend within 30 days.

(d) **Dismissal of Petitions With Prejudice.** If the petition does not meet the requirements of sections 440.192(2)–(4), Florida Statutes, and these rules, and the judge intends to dismiss the petition with prejudice, the judge may do so only after first giving the parties a reasonable opportunity to be heard.

(e) **Extension of Mediation, Pretrial, and Final Hearing Deadlines.** If the judge intends to dismiss the petition with prejudice, the judge must conduct a hearing on the matter after giving the parties 5 days' written notice. The parties may appear by telephone at any such hearing in accordance with procedures established under these rules for telephone hearings. Statutorily mandated mediation, pretrial, and final hearing deadlines shall be extended if a hearing under this subdivision is required.

(f) **Petition that Meets Statutory Requirements.**

If the docketing judge determines the petition meets all statutory requirements, the judge shall so indicate and immediately forward the petition to the appropriate district.

#### **Committee Notes**

**1996 Adoption.** The docketing judge's ruling on specificity under section 440.192, Florida Statutes, or on the issue of whether the allegations contained in the petition were well grounded as required under section 440.32(3), Florida Statutes, is not a final determination on either issue. Subject to the time limitations of section 440.192(5), Florida Statutes, a motion to dismiss for lack of specificity or for failure to exhaust EAO remedies may be filed with the presiding judge. The same is true for a motion to strike or dismiss the petition for lack of an appropriate signature or for a motion to impose a sanction under section 440.32(3), Florida Statutes.

#### **RULE 4.030. FILING AND SERVICE**

(a) **Filing.** Unless otherwise ordered or provided by these rules or chapter 440, Florida Statutes, any pleading or other papers filed in proceedings shall be served on each party.

(b) **Method of Service.**

(1) **How Service Is Made.** Delivery of a copy within this rule shall mean

(A) handing it to the attorney or party;

(B) leaving it at the attorney's office with a clerk or other person in charge thereof, or if there is no one in charge, leaving it in a conspicuous place therein;

(C) if the office is closed or the person to be served has no office, leaving it at the person's usual place of abode with a member of the person's family above 15 years of age and informing such person of the contents;

(D) placing it in the United States mail; or

(E) transmitting it by facsimile.

Service by delivery or by facsimile after 5:00 p.m. shall be deemed to have been made on the next day that is not a Saturday, Sunday, or legal holiday.

**(2) Service by Mail.**

(A) When service is made by mail, the copy shall be mailed by United States mail, postage prepaid, to the last known address of the party or attorney. Petitions must be sent by certified mail.

(B) Service by mail shall be complete upon mailing.

(C) Except for a petition, when service is made by mail, 5 days shall be added to the time allowed for the performance of any act required to be done, or allowed to be done, within a certain time after service. This does not apply to filing requirements for institution of appellate proceedings or notices of hearings.

**(3) Service by Facsimile Device.**

(A) When a facsimile device is used, a cover sheet or its equivalent providing the sender's name and telephone number shall be included and a copy of the document shall be sent simultaneously to the recipient by mail.

(B) The sending party shall retain proof of the transmission.

(C) Delivery shall be complete on transmission of a complete facsimile of the document.

(c) **Certificate of Service.** When required, any attorney or unrepresented party shall certify in substance:

“I certify that a copy has been furnished to .....(name or names and address or addresses)..... by .....(method of delivery)..... on .....(date).....

\_\_\_\_\_  
Attorney (or unrepresented party)”

The certificate shall be taken as prima facie proof of such service in compliance with these rules.

(d) **Subpoenas.** Issuance, service, and proof of service of subpoenas of the judge of compensation claims shall be in the form and manner provided by the Florida Statutes and the Florida Rules of Civil

Procedure.

**Committee Notes**

**1979 Adoption.** This replaces rule 2(h), 1977 W.C.R.P., which merely provided “‘Service’ shall be as provided in the Florida Rules of Civil Procedure.”

Subdivision (c) replaces rule 3(b), W.C.R.P. 1977. The caveat to the filing of appellate proceedings is to warn of the jurisdictional nature of section 440.25(4)(f), Florida Statutes (1979), which provides:

Beginning on October 1, 1979, procedures with respect to appeals from orders of deputy commissioners shall be governed by rules adopted by the Supreme Court. Such an order shall become final 30 days after mailing of copies of such order to the parties, unless appealed pursuant to such rules. The provisions of paragraphs (a)–(e) shall apply only until September 30, 1979.

**1984 Amendment.** Clarifies rules 3(c) and 8(a) by specifically excluding 15-day hearing notice from operation of rule 3(c).

**1988 Amendment.** This rule is not intended to confer standing to sue on any person not accorded such standing by Florida Statutes.

**1996 Amendment.** Further clarifies method of service of pleadings and specifically includes service by facsimile device.

**RULE 4.040. COMPUTATION OF TIME**

In computing any period of time prescribed or allowed by these rules, by order, or by applicable statute, the day of the act or event from which the designated period of time begins to run shall not be included. The last day of the period so computed shall be included. If any act required to be done, or allowed to be done, falls on a Saturday, Sunday, or legal holiday, performance of that act shall be required on the next regular working day.

**Committee Notes**

**1979 Adoption.** This replaces rule 3(a), 1977 W.C.R.P.

**RULE 4.045. PRETRIAL PROCEDURE**

(a) **Generally.** The judge shall, on a motion by any party, hold a pretrial hearing. If no pretrial hearing has been noticed previously, the judge shall

schedule a pretrial hearing after receiving a notice of impasse from the mediator.

(b) **Notice of Pretrial.** The judge shall give parties at least 7 days' notice of a pretrial hearing and may combine the notice of the pretrial hearing with the other notices. Unless the judge indicates otherwise, pretrial hearings will be held in the county where the judge's office is located.

(c) **Continuance.** Pretrial hearings may be continued or extended with prior approval of the judge.

(d) **Appearance of Counsel.** Counsel for the parties shall appear at the pretrial conference. If attendance is not waived by the judge following proper notice, nonlocal attorneys, as defined in the pretrial order, may appear by phone.

(e) **Telephone Hearing.** The judge may conduct the pretrial hearing by telephone at the request of any party or on the judge's own motion, provided all parties are represented by counsel.

(f) **Waiver of Hearing.** If all parties are represented by counsel, the judge may waive attendance or cancel the pretrial hearing if a written pretrial stipulation is filed with the judge before the date of the pretrial hearing. In such cases, all parties will be presumed to have a full and complete understanding of all issues involving benefits claimed, the defenses asserted, the witnesses to be presented, and the exhibits to be introduced into evidence.

(g) **Attendance.** If a party or a party's attorney fails to attend the hearing without good cause, the judge may dismiss the petition or claim, strike defenses, or take such other action as may be authorized by law or rule 4.150.

(h) **Purpose of Pretrial.** At the pretrial conference, the parties shall:

(1) state and simplify the claims, defenses, and issues;

(2) stipulate and admit to such facts and documents as will avoid unnecessary proof;

(3) present, examine, and mark all exhibits for identification, including all impeachment and rebuttal exhibits;

(4) furnish the opposing party the names and addresses of all witnesses, including impeachment and rebuttal witnesses. A party may be required to provide a statement of subject matter of the expected testimony of one or more witnesses;

(5) exchange all available written reports of experts when expert opinion is to be offered at trial. The reports should clearly disclose the expert opinion and its basis on all subjects on which the expert will testify. If stipulated into evidence, the reports shall be presented to the judge to be so marked. The parties shall consider and determine a limitation of the number of expert witnesses;

(6) estimate trial time and schedule the final hearing; and

(7) consider and determine, as appropriate, such other matters as may aid in the disposition of the case, including, but not limited to, referral to additional mediation or appointment of an expert medical advisor under section 440.13(9)(c), Florida Statutes.

(i) **Forms of Stipulations.** The appropriate pretrial stipulation and pretrial compliance questionnaire shall be used. Exhibits shall be attached to the pretrial stipulation.

(j) **Final Witness Lists, Final Exhibit Lists, Supplements, and Amendments.** Final witness lists, final exhibit lists, supplements, and amendments to the pretrial stipulation shall be served no later than 30 days before the final hearing. Witness lists, exhibit lists, supplements, and amendments served less than 30 days before the final hearing must be approved by the judge or stipulated to by the parties. A motion seeking such approval is a procedural motion.

(k) **Motion Hearings at Time of Pretrial.** At the discretion of the judge and on filing and service of motion and notice of hearing not less than 5 days before the date of the pretrial hearing, procedural motions may also be heard at the time of the pretrial hearing.



**(l) Pretrial of Penalty Hearings.**

(1) When an employer or carrier has protested an assessment by the division of penalties, fines, or interest under sections 440.185 or 440.20, Florida Statutes, the judge shall cancel and waive attendance at a pretrial hearing regarding a hearing on such penalties, fines, or interest if a written pretrial stipulation is filed with the judge before the date of any scheduled pretrial hearing.

(2) Pretrial stipulations regarding penalties, fines, or interest assessed against an employer or carrier shall be substantially the same as form 4.916.

(3) The division shall complete its portion of the pretrial stipulation and mail or otherwise deliver the original and one copy to the employer or carrier. The division shall file a notice of filing with the judge indicating the stipulation has been delivered to the employer or carrier for completion. The employer or carrier shall complete its portion of the pretrial stipulation and file the original with the judge and simultaneously mail or otherwise deliver a copy to the division and to the general counsel of the department.

(m) **Record.** The judge shall record the pretrial hearing by stenographic or electronic means at the request of any party or by a written stipulation signed by the parties.

**(n) Pretrial Order.**

(1) At the request of any party or by his or her own motion, the judge promptly shall enter an order reciting the actions taken at the pretrial hearing and the agreements made by the parties about any of the matters considered and limiting the issues for trial to those not disposed of by admissions or stipulations of parties.

(2) The order shall control the subsequent course of the action unless the judge modifies it to prevent injustice.

(3) The judge shall serve the order on the attorneys for the parties and on any party not represented by counsel.

(4) Unless otherwise specified in the notice of hearing, the judge may consider and determine all issues pending as of the date of the pretrial hearing.

(o) **Setting and Noticing Final Hearing.** If the date is not already set, the judge shall set the date of the final hearing at the pretrial hearing. The notice of the final hearing may be set forth in the pretrial order accompanying the pretrial stipulation or may be mailed separately by the judge to all interested parties.

**Committee Notes**

**1996 Adoption.** Replaces rule 4.100, but includes many of the provisions of the previous rule. Requires a judge of compensation claims to schedule a pretrial hearing after receipt of a mediator's report declaring an impasse as per section 440.25(4)(a), Florida Statutes.

Provides for pretrial of protested penalty assessment orders and the method thereof. Clarifies when personal appearances may be waived and prescribes the form of the pretrial stipulation. Requires furnishing names and addresses of all witnesses to be used at trial, including impeachment and rebuttal witnesses.

**2000 Amendment.** Subdivision (h) (7) was amended to include the appointment of an expert medical advisor as one of the matters to be addressed at the time of the pretrial conference. Subdivision (i) was shortened and a new subdivision (j) was added to require stipulation of the parties or approval by the judge if final witness lists, final exhibit lists, supplements, and amendments to the pretrial stipulation are served less than 30 days before the final hearing.

**RULE 4.055. DISCOVERY**

(a) **Jurisdiction.** The judge shall have jurisdiction to take appropriate action to compel discovery, including the imposition of sanctions and, as circumstances warrant, may enlarge or shorten the applicable time for complying with discovery.

(b) **When Discovery May Be Had.** Discovery under this rule may be had before or after the filing of a claim or petition, in the same manner and for the same purpose as provided in the Florida Rules of Civil Procedure or section 440.30, Florida Statutes. At the pretrial hearing, the judge shall set a date for the final hearing that allows the parties at least 30 days to conduct discovery unless the parties consent to an

earlier hearing date.

(c) **Types of Discovery Not Permitted.** Interrogatories, requests for admission, and other forms of discovery not authorized by these rules shall not be permitted or used in workers' compensation proceedings.

(d) **Depositions.**

(1) Depositions of witnesses or parties may be taken and used in proceedings under chapter 440, Florida Statutes, in the same manner and for the same purposes as provided in the Florida Rules of Civil Procedure or as otherwise provided by law.

(2) For good cause shown, the judge may require taking a deposition by telephone.

(3) If a deposition is taken by telephone, the oath shall be administered in the physical presence of the witness by a notary public or officer authorized to administer oaths. A certificate of the notary public or officer, substantially the same as form 4.9105, shall be filed by the party offering the witness's deposition within 15 days.

(e) **Production of Documents and Entry on Land.**

(1) The parties shall be subject to discovery procedures seeking the production of records or other tangible things, including, but not limited to, all hospital and medical records pertaining to the industrial accident, all rehabilitation reports, all records pertaining to the claimant's average weekly wage at the time of the accident or earnings made subsequent to the industrial accident, and a transcript of any recorded statements of a party.

(2) The parties shall be subject to discovery procedures seeking entry on land or other property for inspection or other purposes within the scope of discovery.

(3) The parties shall have 30 days to serve a written response after service of any request under this rule.

(f) **Production of Documents from Nonparties.** The parties may seek the production of documents and other tangible things within the scope of discovery for inspection and copying from a person

who is not a party pursuant to applicable Florida Rules of Civil Procedure, except that the time for objection to production of documents under this rule is reduced to 5 days.

(g) **Surveillance.** The evidence of any investigator, adjuster, or other witness in the nature of surveillance shall be subject to discovery when such evidence will be used at trial, provided the party intending to use such evidence is first given a reasonable opportunity to depose the party or witness who is the subject of the surveillance.

**Committee Notes**

**1996 Adoption.** Replaces rule 4.090. Provides for deponent's oath when deposition taken by telephone. Limits objection to notice of production from nonparty to 5 days, rather than 10 days as required by Florida Rule of Civil Procedure 1.351.

**RULE 4.065. MOTION PRACTICE**

(a) **Substantive Motions.** A motion relating to the adjudication of entitlement to benefits, including, but not limited to, motions to vacate orders for lump-sum advances, motions for advances under sections 440.20(12)(c)2 and 440.20(12)(d), Florida Statutes, appeals of administrative fines or penalties under section 440.106, Florida Statutes, motions for appointment of guardians, motions to appoint expert medical advisors under section 440.13, Florida Statutes, requests for imposition of sanctions under these rules, motions to disqualify a judge or a mediator, motions to recuse counsel, motions to correct the appellate record, and motions to appoint independent medical examiners under section 440.13, Florida Statutes, shall be filed and handled in the manner as provided for a claim in rule 4.025, except the motion shall be filed with the presiding judge in cases where a petition is pending.

(b) **Procedural Motions.**

(1) Procedural motions include, but are not limited to, motions to consolidate, motions related to discovery, motions to dismiss for lack of prosecution, motions to dismiss for lack of specificity, motions to amend pretrial stipulations, motions for a continuance, motions to compel, motions for protective orders, motions to bifurcate the issues, and motions in limine. Procedural motions shall be heard

on not less than 5 days' written notice. The judge may require the moving party to serve written notice of the hearing on opposing counsel. No pretrial hearing shall be required.

(2) A procedural motion shall set forth in detail the facts giving rise to the motion, its legal basis, and the specific relief sought. Any documents relied on should be specifically referenced and attached.

(c) **Contents.**

(1) All motions shall contain a certificate of counsel that the motion is made in good faith and not for the purpose of delay.

(2) All motions, other than motions to dismiss for lack of prosecution under rule 4.075(e), shall contain a certificate of counsel that opposing counsel has been contacted in an effort to resolve the matter without a hearing, and despite those efforts, the opposing counsel objects to the motion.

(d) **Emergency Motions.** All emergency procedural motions shall be identified as such and shall identify the nature of the emergency including time constraints. Emergency procedural motions shall be heard promptly.

(e) **Response to Motions.** A written response to a contested motion is not required. If a written response is made, it shall specifically state the basis for the objection.

(f) **Hearing Location.** Unless the moving party obtains prior approval of the judge, all procedural motions shall be heard at the office of the judge. If the judge allows telephone appearances, the party wishing to appear by telephone shall be responsible to coordinate the appearance of counsel and other necessary participants and to notify the judge.

(g) **Notice of Hearing.** Notices of hearing shall be prepared and served on the parties under rule 4.030.

(h) **Motion Hearing at Pretrial Hearing.** Motions may be heard at pretrial hearing in accordance with rule 4.045.

(i) **Motions Seeking Affirmative Relief.** Judges,

at their own discretion, may treat any motion seeking affirmative relief or the adjudication of entitlement to any benefits in the manner provided for a claim or petition under these rules.

(j) **Motions to Dismiss.**

(1) In addition to meeting the requirements of subdivision (a), all motions to dismiss must state with particularity the basis for the motion. The judge shall enter an order on such motions without a hearing, unless good cause for the hearing is shown.

(2) Notwithstanding the entry of a docketing order under rule 4.029, any motion to dismiss for lack of specificity must be filed pursuant to section 440.192(5), Florida Statutes, and comply with the requirements of subdivisions (a) and (b) of this rule. The motion must be filed within 30 days after receipt of the petition or it is waived.

(k) **Motion to Receive Medical Records.** All medical records of authorized treating health care providers relating to the claimant and subject accident shall be received into evidence upon proper motion served on the opposing party at the time of the pretrial hearing or no later than 30 days before the final hearing. Such records shall be served with the motion.

**Committee Notes**

**1996 Adoption.** This rule clarifies existing procedure in various districts and defines procedural versus substantive motions that may require an evidentiary hearing. Replaces rule 4.140.

The motion to receive into evidence the medical records of authorized treating health care providers may be contained within the Uniform Pretrial Stipulation, Pretrial Compliance Questionnaire, and Order.

**2000 Amendment.** The Committee notes that although the various motions under this rule have been categorized as either substantive or procedural, there are circumstances, including the agreement of the parties, when substantive motions may be treated as procedural and procedural motions may be treated as substantive. The latter occurs when evidence must be presented to assure due process rights. The judge has discretion to determine whether and when an evidentiary hearing is necessary. Subdivision (a) was amended to clarify that substantive motions should be treated as a "claim not contained in a petition." In order to reduce the

time for judicial determination, the motion now should be filed with the presiding judge once a petition is pending. A motion to bifurcate the issues was added to the list of procedural motions because of the change in the appellate rules addressing the appeal of nonfinal orders. Finally, it was recognized that the requirement to contact opposing counsel before the filing of a motion to dismiss for lack of prosecution negated the possibility that the petition would be dismissed.

**RULE 4.075. PROSECUTION OF CLAIM AND PETITION FOR BENEFITS BEFORE JUDGE**

(a) **Generally.** To protect the interest of any party and to advance the proceedings, the judge may:

- (1) sever any issue;
- (2) continue a scheduled hearing as to any or all issues;
- (3) reserve jurisdiction of any issue;
- (4) dismiss any issue without prejudice;
- (5) refer any issue to the EAO in the event a petition filed by an unrepresented claimant is found to be nonspecific or a party has failed to exhaust the EAO administrative remedies; or
- (6) refer any issue to mediation.

(b) **Prosecution of Claim or Petition.** After a final hearing has been set, all parties shall diligently prosecute or defend the claim or petition.

(c) **Continuances.**

(1) Continuances of hearings will not be freely granted and will be granted only upon a showing of good cause.

(2) The judge may cancel or continue a trial on his or her own motion or on the motion of a party if the judge finds that the cancellation or continuance is for good cause and has not resulted from lack of diligence in the prosecution or defense of the petition or claim.

(3) A request for a continuance shall be made by motion or stipulation of the parties and shall specify the reason that the continuance is necessary.

(4) Unless otherwise ordered by the judge, continuance of a trial or pretrial hearing shall automatically extend the time provided for the completion of any subsequent act.

(5) If there is a pretrial stipulation or pretrial order in place and the final hearing is continued, an additional pretrial hearing will not be set unless requested in writing by a party.

(d) **Voluntary Dismissal.** A claim or petition may be dismissed by the claimant or petitioner without an order by filing a notice or stipulation of voluntary dismissal at any time before the final hearing begins, or during the final hearing before the claimant or petitioner rests by stating on the record such notice of voluntary dismissal. Unless otherwise stated in the notice or stipulation, the dismissal is without prejudice, except that a second notice of voluntary dismissal shall operate as an adjudication of denial of any claim or petition for benefits previously the subject of a voluntary dismissal.

(e) **Motion to Dismiss for Lack of Prosecution.**

(1) A motion to dismiss for lack of prosecution may be filed if it appears that no action has been taken on any claim or petition by request for hearing, filing of pleading, order of the judge, payment of compensation, provision of medical care, or otherwise, for a period of one year.

(2) The judge shall serve notice of hearing on the parties by regular mail at their last known address.

(3) The motion to dismiss shall be granted unless a party shows good cause why the claim or petition should remain pending.

(f) **Proceedings by Telephone.**

(1) The judge may conduct any proceedings permitted under these rules or under chapter 440, Florida Statutes, by telephone conference, provided a means of recording the proceedings is available, if

requested by any party.

(2) No live testimony, other than that of an expert witness as defined by the applicable statutes, shall be taken by telephone without the agreement of all parties.

(3) In the event that trial testimony is taken by telephone, the oath shall be administered in the physical presence of the witness, by a notary public or officer authorized to administer oaths. A certificate of the notary public or officer, substantially the same as form 4.9105, shall be filed by the party offering the witness's trial testimony within 15 days.

#### Committee Notes

**1996 Adoption.** This rule replaces and expands rule 4.110. Subdivision (d) is in response to the First District Court of Appeal pronouncements in *Eastern Airlines v. Granese*, 631 So. 2d 365 (Fla. 1st DCA 1994), and Judge C. J. Kahn's suggestion in his concurring opinion in *Perez v. Winn-Dixie*, 639 So. 2d 109 (Fla. 1st DCA 1994), that the Committee examine this subdivision to accurately reflect its intent that voluntary dismissals in workers' compensation matters conform to Florida Rule of Civil Procedure 1.420(a)(1), as the Committee stated in its 1984 Committee Note to prior rule 4.110.

**2000 Amendment.** The First District Court of Appeal has stated that the requirements of subdivision (f)(3) may be waived by agreement of counsel. *E-Z Serve Convenience Stores, Inc. v. Paul*, 720 So. 2d 301 (Fla. 1st DCA 1998).

#### RULE 4.085. FINAL HEARING

(a) **Notice.** The judge shall give 30 days' notice of the final hearing to all parties by mail. The notice of the final hearing may be set forth in the pretrial order accompanying the notice of mediation, notice of pre-trial hearing, and pretrial order, or may be issued separately by the judge.

(b) **Form and Service of Notice.** The notice shall state clearly the questions at issue or in dispute that the judge will hear.

(c) **Attendance.**

(1) Unless excused by the judge, counsel for all parties shall attend the final hearing in person.

(2) Except as authorized under the Florida Rules of Civil Procedure, the claimant shall attend the final hearing in person. As provided under rule 4.075, a witness may appear by telephone, provided communication equipment is available at the location of the final hearing and prior arrangements have been made for administering the oath to the witness.

(3) Witnesses appearing by telephone must be identified at the time of the pretrial hearing or specifically designated in the witness list or pretrial stipulation.

(d) **Witnesses.**

(1) Only those witnesses listed in the pretrial stipulation or in the witness list served no later than 30 days before the final hearing will be allowed to testify.

(2) Witnesses may be added after the 30-day witness deadline only by stipulation of the parties or by approval by the judge.

#### Committee Notes

**1996 Adoption.** In most circumstances the petitioner/claimant will appear at the final hearing, particularly if his or her testimony is needed. However, under Florida Rule of Civil Procedure 1.330(a)(3), the deposition of a party may be used at trial under certain circumstances. This rule is intended to conform to Florida Rule of Civil Procedure 1.330(a)(3).

**2000 Amendments.** Subdivisions (e), (f), (g), and (h) are deleted to avoid duplication with rule 4.120. Procedural rules involving admissibility of evidence, proffers, exhibits, and post-hearing evidence now are contained in one rule and are applicable to all proceedings before judges of compensation claims.

#### RULE 4.095. EMERGENCY CONFERENCES

(a) **Generally.** An emergency conference may be held if there is a bona fide emergency involving the health, safety, or welfare of an employee as provided for in section 440.25(4)(h), Florida Statutes.

(b) **Requests.** A request for an emergency conference shall be handled in the same manner as provided for a procedural motion in rule 4.065. A written request for an emergency conference shall be filed

with the judge and served on the parties in accordance with rule 4.030. It shall set forth in detail the facts giving rise to the request, its legal basis, the factual or medical basis for the claim that there is a bona fide emergency involving the health, safety, or welfare of an employee, and the specific relief sought. Any documents relied upon should be specifically referenced and attached.

(c) **Certificate of Counsel.** The request shall contain the certificate of counsel that:

(1) the request is made in good faith and not for the purpose of delay;

(2) the opposing party or counsel, if represented, has been contacted in an effort to resolve the matter without a hearing, and despite those efforts a hearing is required; and

(3) to the best of counsel's knowledge, information, and belief, formed after inquiry reasonable under the circumstances, a bona fide emergency exists involving the health, safety, or welfare of the employee.

(d) **Notice of Emergency Conference.** The judge may require the appearance of the parties and counsel without written notice for such an emergency conference.

(e) **Attendance.** Parties, counsel, and witnesses may appear by telephone if telephone equipment is available.

(f) **Orders.** An emergency conference under this rule may result in the entry of an order or the rendering of an adjudication by the judge that shall be limited to those issues and relief sought in the request.

#### **Committee Notes**

**1996 Adoption.** This rule is intended to provide some structure, notice, and procedure in requesting emergency conferences that may result in the entry of an order or the rendering of an adjudication by the judge of compensation claims.

This rule replaces rule 4.112, which allowed compulsory advisory conferences.

#### **RULE 4.105. EXPEDITED HEARINGS**

(a) **Generally.** If a petition filed in accordance with section 440.192, Florida Statutes, involves a claim or petition of \$5,000 or less, excluding attorney fees and costs, it shall be considered for resolution under section 440.25(4)(j), Florida Statutes. The application for expedited hearing shall be substantially the same as form 4.9091. A copy of this application shall be filed with the judge and served on all interested parties.

(b) **Other Claims.** On written agreement of all parties and application of any party, any claim or petition filed in accordance with section 440.192, Florida Statutes, may be resolved as provided for in subdivision (a).

(c) **Motion to Dispense.** Any motion to dispense with expedited hearing shall comply with rule 4.065 and must be based on compelling evidence that the claim or petition is not appropriate for expedited resolution.

(d) **Expedited Docketing and Notice.** The judge shall serve written notice of the hearing on the parties not less than 45 days before the hearing.

(e) **Discovery.** The parties shall have at least 30 days to conduct discovery, which shall be completed 15 days before the hearing.

(f) **Pretrial Outline.** At least 15 days before the hearing, a pretrial outline shall be filed with the judge and served on all parties. The following shall be attached:

(1) **Statement of the Facts.** The statement shall include references to the specific pages in the deposition testimony of witnesses as well as a suggestion of the expected testimony of those witnesses who will be called to testify at the hearing.

(2) **Memorandum of Law.** The memorandum shall include relevant case citations and copies of the cases cited.

(3) **Attachments.** A complete composite of the records of the medical advisor appointed by the judge or the division, any independent medical examination (IME) physicians, and any other

authorized providers shall be attached. There shall also be attached any depositions or other documentary items on which a party will rely to establish the case. The pages of the composite shall be numbered and the composite shall be preceded by an abstract referencing and synthesizing those portions of the records on which the filing party relies. No additional records, depositions, or documentary evidence will be admitted at the time of the hearing.

(g) **Witness and Subpoenas.** At the final hearing, the parties must arrange to have all witnesses present or available to testify promptly at the time and place noticed. Subpoenas will be issued on request of the parties or their counsel. If any party or legally subpoenaed witness fails to appear at the time and place set for the hearing, sanctions under rule 4.150 may be imposed or punitive actions authorized under sections 440.32 and 440.33, Florida Statutes, may be initiated.

(h) **Final Hearing Procedure.** The final hearing will not exceed 30 minutes. The employer/carrier may be represented by an adjuster or other qualified representative. All previously scheduled final hearings and pretrial conferences shall be canceled.

(i) **Post-hearing Evidence.** Post-hearing evidence shall be considered in the same manner as provided in rule 4.085.

#### **Committee Notes**

**1996 Adoption.** This rule codifies the procedure to follow when requesting a 30-minute expedited hearing as authorized by section 440.25(4)(j), Florida Statutes, for claims of \$5,000 or less, or if stipulated to by the parties.

**2000 Amendment.** The changes were made to make rule 4.105 consistent with section 440.25(4)(j), Florida Statutes.

#### **RULE 4.113. EFFECT OF CONTINUANCES**

An agreement by the parties to post-trial proceedings, including the post-trial presentation or submission of evidence, or to a continuance of the trial or the pretrial conference shall constitute a waiver by the parties of the requirements of section 440.25, Florida Statutes, as to the timeliness of hearings and the entry of orders.

#### **RULE 4.115. ORDERS**

##### **(a) Generally.**

(1) The order of the judge shall set forth findings of fact, conclusions of law, and the judge's determination of the claim or other ruling.

(2) The order shall be signed by the judge and shall include a certificate of service to all parties and counsel of record.

##### **(b) Amending or Vacating Order.**

(1) A judge may, at his or her own discretion or pursuant to a motion for rehearing, vacate or amend an order not yet final pursuant to section 440.25, Florida Statutes.

(2) Grounds for vacating an order may include circumstances in which it appears to the judge that due consideration of a motion for rehearing may not be practicable before the order becomes final.

(c) **Effect of Appeal.** Nothing in these rules shall be construed to interfere with the judge's jurisdiction to either approve settlements or correct clerical errors, as specified under Fla. R. App. P. 9.180(c)(2).

#### **Committee Notes**

**1996 Adoption.** This rule incorporates former rules 4.080(c) and 4.141(b)-(d).

Subdivision (b) codifies the long-established practice in workers' compensation litigation: A judge of compensation claims retains jurisdiction over an order that has not yet become final. The rule implicitly adopts the majority view in *Drexel Properties, Inc. v. Brown*, 443 So. 2d 150 (Fla. 1st DCA 1983), giving the deputy commissioner wide latitude in determining whether to amend or vacate an order.

**2000 Amendment.** The cross-reference to the appellate rules was corrected in subdivision (c). Subdivision (d) was deleted because the First District Court of Appeal noted that the circuit court has exclusive jurisdiction to determine the amounts past due in a rule nisi proceeding. *Metropolitan Dade County v. Rolle*, 661 So. 2d 124 (Fla. 1st DCA 1995).

#### **RULE 4.120. ADMISSIBILITY OF EVIDENCE; PROFFERS; EXHIBITS; POST-HEARING EVIDENCE**

##### **(a) Admissibility of Evidence.**

(1) The judge shall rule promptly on a question of the admissibility of evidence.

(2) If an objection is made and not ruled on by the judge, the ruling shall be presumed to be adverse to the party making the objection.

(b) **Proffers.** Evidence which has been offered but ruled inadmissible may be proffered but shall be clearly identified as such by the judge of compensation claims.

(c) **Exhibits.**

(1) The contents of the division file with respect to a claim or petition shall not be admissible evidence as such, absent the stipulation of all parties, but individual portions of the file shall be admitted if admissible under the rules of evidence.

(2) Legible copies may be substituted for original documents when reasonably necessary.

(3) Voluminous or cumbersome exhibits shall not be received into evidence unless their use is unavoidable.

(d) **Post-hearing Evidence.** Except in extraordinary circumstances and only on specific motion, post-hearing evidence, including exhibits and depositions, will not be allowed. However, the judge on his or her own motion may consider post-hearing evidence.

**Committee Notes**

**1979 Adoption.** This replaces rule 12, 1977 W.C.R.P.

**2000 Amendment.** The changes incorporate the language formerly contained in rule 4.085(e), (f), (g) and (h) regarding evidentiary procedural matters in all proceedings before judges of compensation claims.

**RULE 4.141. MOTION FOR REHEARING**

(a) **Generally.** A motion for rehearing shall state specifically the grounds on which it is based and should not be used to reargue issues already determined. A motion for rehearing may be served only within 10 days from the date of an order not yet final under section 440.25, Florida Statutes.

(b) **Purpose.** The purpose of the motion shall be limited to:

(1) call attention to typographical, technical, and scrivener's errors;

(2) challenge rulings that were outside the scope of the issues presented; or

(3) seek clarification in matters of law or fact that the judge overlooked or misapprehended.

(c) **Effect on Timeliness.** A motion for rehearing does not toll the time within which either an order becomes final or an appeal may be filed.

(d) **Disposition.** The judge shall summarily rule on the motion, conduct a hearing and rule on the motion, or vacate the order within 30 days after the order is mailed to the parties.

**Committee Notes**

**1984 Adoption.** This new rule affords parties a rehearing process in response to such First District Court of Appeal pronouncements as are found in *Acosta Roofing Company v. Gillyard*, 402 So. 2d 1321 (Fla. 1st DCA 1981), and *Dade American Hospital Supply v. Perez*, 417 So. 2d 296 (Fla. 1st DCA 1982). Though time for filing appeal is not tolled by the filing of a motion for rehearing, subdivision (b) specifically invites use of a deputy's power to vacate as a means of affording the parties additional time for processing a motion for rehearing where circumstances warrant. This flexible process was deemed preferable to the tolling of the appellate filing period in every case of motion for rehearing.

Subdivision (b) codifies the long established practice in workers' compensation litigation: A deputy commissioner retains jurisdiction over an order that has not yet become final. The rule implicitly adopts the majority view in *Drexel Properties, Inc. v. Brown*, 443 So. 2d 150 (Fla. 1st DCA 1983), giving the deputy commissioner wide latitude in determining whether to amend or vacate an order.

**1996 Amendment.** Subdivisions (b), (c), and (d) were moved to new rule 4.115, Orders. New subdivision (c) was added.

**2000 Amendment.** The time for serving a motion for rehearing has been shortened to 10 days to bring the workers' compensation procedure more in line with the civil rules. The responsibility has been shifted to the judge of



compensation claims as to the manner in which the motions are to be addressed.

#### **RULE 4.142. AGREEMENTS OR STIPULATIONS**

(a) **Scope.** Agreements or stipulations not involving settlements under section 440.20(11), Florida Statutes, shall comply with this rule.

(b) **Generally.** No agreement or stipulation shall be enforceable unless it is:

(1) in writing and signed by the parties or their attorney; or

(2) dictated on the record; or

(3) in the case of a settlement agreement resulting from a conference under section 440.191(2)(c), Florida Statutes, approved in writing by a judge.

(c) **Form.** All agreements or stipulations submitted to a judge for approval and entry of an order shall include a detailed statement of the issues in dispute and how the issues were resolved, including a description of the benefits provided.

(d) **Reliance.** Any agreement or stipulation under this rule may be expressly relied on by the judge in any proceeding, unless a party seeks to be relieved of the agreement or stipulation for good cause shown.

(e) **Abrogation.** The judge may abrogate any stipulation that appears to be manifestly contrary to the evidence on due notice to the parties; however, the judge need not inquire beyond the stipulation or agreement.

#### **Committee Notes**

**1996 Adoption.** This replaces and clarifies rule 4.130. Subdivision (c) requires that an order approving an agreement or stipulation under this rule also include a detailed statement of the issues, their resolution, and the benefits to be provided as reflected in the agreement or stipulation.

**2000 Amendment.** The word “or” was added following the word “attorney” at the conclusion of subdivision (b)(1) to

clearly indicate that agreements or stipulations may be made under this rule using any one of the three alternative provisions noted. In other words, the three subdivisions of the rule are to be read disjunctively. An agreement or stipulation reached under the first alternative need not be approved by a judge to be binding. An agreement or stipulation also is binding if it is dictated on the record. Again, specific approval by a judge is not required. The third alternative involves cases in which an agreement has been reached during an EAO conference held under section 440.191(2)(c), Florida Statutes, and the agreement has been submitted to a judge. The agreement or stipulation is binding when it is approved in writing by a judge.

#### **RULE 4.143. SETTLEMENT UNDER SECTION 440.20(11), FLORIDA STATUTES**

(a) **Scope.** This rule applies in any proceeding in which the parties undertake to compromise or release any class of benefits under section 440.20(11), Florida Statutes.

(b) **Uniform Stipulation Forms.** The parties shall submit their agreement in writing executed by all attorneys of record and the employee. The parties will use the standard forms published by the Office of the Judges of Compensation Claims, or the equivalent, when submitting an agreement.

(c) **General Release Language Prohibited.** Joint petition and stipulation documents shall not purport to settle matters outside the subject matter jurisdiction of the judge of compensation claims and may include only accidents and injuries disclosed to the judge.

(d) **Required Documents.** A joint petition seeking the approval of a lump-sum settlement under section 440.20(11), Florida Statutes, shall be filed with the judge's office with:

(1) a stipulation using the standard forms published by the Office of the Judges of Compensation Claims, or the equivalent, signed by the claimant, all attorneys of record, unrepresented parties, or representatives of the employer/carrier;

(2) an affidavit of the claimant in which the claimant shall acknowledge the agreement and its material provisions under oath in writing or before the judge, unless all relevant information is incorporated in the verified stipulation;

(3) a maximum medical improvement report, documentation of the permanent impairment rating, information concerning the need for future medical care, and other essential medical information;

(4) any other evidence in the possession of the parties and their attorneys that is material to the consideration and disposition of the settlement;

(5) a notice letter to the employer as required under section 440.20(11)(b), Florida Statutes;

(6) an attorney-fee data sheet;

(7) an attorney's affidavit seeking approval of an attorney fee and specifying the statutory factors forming the basis for a variance, if the requested fee exceeds the statutory guidelines under sections 440.34(1)(a)–(1)(h), Florida Statutes; and

(8) the notice(s) of denial and the report to the chief judge for settlements under section 440.20(11)(a), Florida Statutes.

(e) **Orders.** The order of the judge approving or disapproving the proposed settlement shall set forth findings of fact and conclusions of law to support the approval or disapproval of the proposed settlement, and may be in the form provided in these rules.

#### **Committee Notes**

**1996 Adoption.** This rule replaces rule 4.131 because of the 1993 amendments to washout settlements under section 440.20(11), Florida Statutes. The intent of the rule is to codify and provide statewide uniformity as to washout settlement practice. The accompanying forms are substantially those presently in general use.

**2000 Amendment.** Subdivision (c) was added to prohibit the practice of including agreements to settle non-workers' compensation matters, or entitlement to benefits for industrial accidents not disclosed in the settlement agreement, in the joint petition and stipulation forms submitted under this rule. Separate agreements between the parties as to non-workers' compensation matters should be summarized in the settlement agreement for informational purposes under subdivision (d)(4) of this rule.

#### **RULE 4.144. PAYMENT OF ATTORNEY FEES AND COSTS**

(a) **Generally.** On written request for hearing, the judge shall hear any claim for attorney fees and taxable costs in the manner provided for a hearing on a petition.

#### **(b) Payment of Undisputed Attorney Fees and Costs by Claimant.**

(1) The claimant and his or her attorney may jointly move for the judge to approve the payment of an attorney fee and reimbursement of costs pursuant to a contract of representation by a stipulated motion substantially in the form provided by these rules.

(2) The claimant may waive a formal hearing before the judge and the judge may consider the motion ex parte based on verified pleadings.

(3) No motion for attorney fees shall be granted by the judge unless it appears affirmatively that the provisions of these rules and of chapter 440, Florida Statutes, have been substantially complied with and that the employee has been advised as to those provisions.

(c) **Payment of Undisputed Attorney Fees and Costs by Employer/Carrier/Service Agent.** The employee and the employer/carrier/service agent may stipulate to the payment of attorney fees and costs and submit the stipulation for the judge's approval under rule 4.142.

#### **(d) Payment of Disputed Attorney Fees and Costs.**

(1) Any claim for attorney fees shall allege the statutory basis for the claim and may be subject to a pretrial hearing under these rules. However, if entitlement to attorney fees or costs has been adjudicated or stipulated, no pretrial hearing shall be held unless ordered by the judge.

(2) Unless otherwise ordered at the pretrial hearing, the verified petition shall be served on all parties 30 days before the scheduled fee hearing and shall include:

(A) a statement of the facts relied on in support of the petition under section 440.34, Florida Statutes, including an opinion as to a reasonable fee amount;

(B) the statutory and legal basis relied on in support of the petition;

(C) except for hearings to determine the value of appellate services, a recitation of all benefits secured for the claimant through the attorney's efforts, including projected future benefits reduced to present value;

(D) a detailed chronological listing of all time devoted to the claim; and

(E) a detailed list of all taxable costs advanced or incurred.

(e) **Service of Response.** Within 20 days after the verified petition is served, the opposing party or parties shall respond to the petition and shall include a recitation of all matters controverted in the verified petition.

(f) **Bifurcation.** If both entitlement and the amount of the fee are contested, the hearing may be bifurcated.

(g) **Evidence on Amount.** With the agreement of the parties, testimony as to the amount of the fee may be submitted in affidavit form. Otherwise, such testimony must be presented by deposition or at the fee hearing as provided in rule 4.085.

#### Committee Notes

**1996 Adoption.** This rule replaces subdivisions (b) and (c) of rules 4.061 and 4.062, and codifies and standardizes the procedure for adjudication of disputed attorney-fee matters.

**2000 Amendment.** This change correctly identifies the appropriate rule to employ when submitting a stipulation on the payment of attorneys' fees and costs.

#### RULE 4.150. SANCTIONS

(a) **Generally.** Failure to comply with the provisions of these rules or any order of the judge of compensation claims may subject a party to reprimand; striking of claims, defenses, or pleadings; imposition of costs or attorney fees; or such other sanctions as the judge may deem appropriate. These sanctions are in addition to any sanctions available to the judge pursuant to section 440.33, Florida

Statutes.

(b) **Signature.** Every pleading, written motion, and other paper shall be signed by the attorney of record or, if the party is not represented, by the party. Each paper shall state the signer's address and telephone number, if any. Except when otherwise specifically provided by rule or statute, pleadings need not be verified. An unsigned paper shall be stricken unless omission of the signature is corrected promptly after being called to the attention of the attorney or party.

(c) **Representations to Judge.** By presenting to the judge, whether by signing, filing, submitting, or later advocating, a pleading, written motion, or other paper, an attorney or unrepresented party is certifying to the best of the person's knowledge, information, and belief, formed after inquiry reasonable under the circumstances, that:

(1) it is not being presented for any improper purpose, such as to harass or to cause unnecessary delay or needless increase in the cost of litigation;

(2) the claims, defenses, and other legal contentions therein are warranted by existing law or by a nonfrivolous argument for the extension, modification, or reversal of existing law or the establishment of a new law;

(3) the allegations and other factual contentions have evidentiary support or, if specifically so identified, are likely to have evidentiary support after a reasonable opportunity for further investigation or discovery;

(4) the denials of factual contentions are warranted on the evidence or, if specifically so identified, are reasonably based on a lack of information or belief.

(d) **Determination of Violation.** If, after notice and a reasonable opportunity to respond, the judge determines that subdivision (c) has been violated, the judge may, subject to the conditions stated below, impose an appropriate sanction on the attorneys or parties who have violated subdivision (c) or are responsible for the violation.

(e) **How Initiated.**

(1) A motion for sanctions under this rule shall be made separately from other motions or requests and shall describe the specific conduct alleged to violate subdivision (c). It shall be served as provided in rule 4.030, but shall not be filed with or presented to the judge unless the challenged paper, claim, defense, contention, allegation, or denial is not withdrawn or appropriately corrected within 21 days after service of the motion (or such other period as the judge may prescribe). If warranted, the judge may award to the party prevailing on the motion the cost of the proceeding and attorney fees incurred in presenting or opposing the motion.

(2) On his or her own initiative, the judge may enter an order describing the specific conduct that appears to violate subdivision (c) and directing an attorney or party to show cause why it has not violated subdivision (c) with respect thereto.

(f) **Nature of Sanctions.**

(1) A sanction imposed for violation of this rule shall be limited to what is sufficient to deter repetition of such conduct or comparable conduct by others similarly situated. Subject to the limitations in this subdivision and in subdivision (d), the sanction may consist of, or include, directives of a nonmonetary nature, or a penalty pursuant to section 440.20 or 440.24, Florida Statutes; or, if imposed on motion and warranted for effective deterrence, an order directing payment to the movant of some or all of the reasonable attorney fees and other costs incurred as a direct result of the violation. If the judge determines that any proceedings were maintained or continued frivolously, the cost of the proceeding, including attorney fees, shall be assessed against the offending attorney. Penalties, fees, and costs awarded under this provision may not be recouped from the party.

(2) Monetary sanctions may not be awarded against a represented party for a violation of subdivision (c)(2).

(3) Monetary sanctions may not be awarded on the judge's initiative unless the judge issues an order to show cause before a voluntary dismissal or settlement of the claim made by or against the party that is, or whose attorneys are, to be sanctioned.

(g) **Order.** When imposing sanctions, the judge shall describe the conduct determined to constitute a violation of the rule and explain the basis for the sanction imposed. If a penalty is assessed against an attorney pursuant to section 440.24, Florida Statutes, or this rule, the judge shall forward a copy of the order assessing the penalty to the appropriate grievance committee acting under the jurisdiction of the supreme court.

**Committee Notes**

**1979 Adoption.** This is new in W.C.R.P. It is derived from Florida Rule of Appellate Procedure 9.410, 1979.

**1996 Adoption.** This rule extensively amends the prior rule. It is adopted from Federal Rule of Civil Procedure 11, and the intent is to create a uniform procedure to consider requests for sanctions relating to violations of section 440.32, Florida Statutes.

**RULE 4.155. DISQUALIFICATION OR RECUSAL OF JUDGES**

(a) Any motion for disqualification of a judge shall be made and determined pursuant to Florida Rule of Judicial Administration 2.160.

(b) Upon the entry of an order of disqualification or the voluntary recusal by a judge, the chief judge shall promptly reassign the matter to another judge to conduct all further proceedings. In the absence of any written objection filed with the chief judge within 7 days of the order reassigning the matter, the chief judge may, in the interest of the prompt administration of justice, transfer venue of the cause of action.

**Committee Notes**

**1996 Adoption.** This rule adopts Florida Rule of Judicial Administration 2.160, for the procedure to disqualify or recuse a judge of compensation claims and permits reassignment by the chief judge.

**PART II. MEDIATION PROCEDURES**

**RULE 4.300. GENERAL PROVISIONS**

(a) **Generally.** Mediation in workers' compensation matters is a process authorized by section 440.25, Florida Statutes, in which a mediator acts to encourage and facilitate the resolution of a workers' compensation dispute between two or more parties

by assisting those parties in reaching a mutually acceptable and voluntary agreement, thereby dispensing with the need for judicial determination.

(b) **Purpose.** The purpose of this part is to provide the procedures that shall govern mediations of workers' compensation matters.

(c) **Privileged and Confidential Communications.**

(1) Any information from the files, reports, case summaries, or other communications or materials, oral or written, relating to a mediation conference obtained by any person participating in mediation is privileged and confidential and may not be disclosed without written consent of the interested parties involved in the mediation conference.

(2) Each party to a mediation conference has a privilege during and after the mediation conference to refuse to disclose and prevent another from disclosing communications made during the mediation conference, whether or not the disputed issues are successfully resolved. This subdivision shall not be construed to prevent or inhibit the discovery or admissibility of any information that is otherwise subject to discovery or that is admissible under an applicable law or rule of procedure, except that any conduct or statement made during a mediation conference or in negotiations concerning the mediation conference are inadmissible in any proceedings under chapter 440, Florida Statutes.

(3) In no event shall the mediator be subpoenaed, be called to testify, or give a statement or deposition to resolve any matter or disclose any communications or conduct made during the mediation conference.

(d) **Discovery.** Discovery may continue notwithstanding an order of referral to mediation or pending a mediation conference unless otherwise ordered by the presiding judge.

(e) **Effect on Petitions or Claims.** Mediation shall not preclude or be cause for delay in the prosecution of a petition or claim nor prevent the scheduling and attendance at hearings thereon as required by section 440.25, Florida Statutes, unless otherwise ordered by the presiding judge.

**Committee Notes**

**1996 Adoption.** Subdivision (c) is from former rule 4.360(e), subdivision (d) is from former rule 4.350(d), and subdivision (e) is from former rule 4.340(e).

**RULE 4.310. MANDATORY MEDIATION**

(a) **Initial Mandatory Mediation.** Except as provided in this rule, an initial mandatory mediation conference is required to be held concerning every petition filed under section 440.192, Florida Statutes, that survives dismissal after review by a docketing judge under section 440.45(3), Florida Statutes, or a motion to dismiss filed under section 440.192(5), Florida Statutes.

(b) **Notice and Date of Mandatory Mediation Conference.**

(1) Within 7 days after a petition is filed under section 440.192, Florida Statutes, but in no event more than 7 days from the presiding judge's receipt of the petition that survives a dismissal, the judge, or the mediator if the judge so designates, shall notify all interested parties of the date, time, and location of the initial mandatory mediation conference. The notice may be served personally or by mail upon the interested parties.

(2) The mediation conference shall be held within 21 days after a petition is filed under section 440.192, Florida Statutes, but if continued or rescheduled, it shall be held and completed no later than 10 days before any scheduled pretrial hearing.

(c) **Waiver of Initial Mandatory Mediation Conference.** A mandatory mediation conference may be waived only by order of the chief judge after the filing with the presiding judge of a motion to waive the initial mandatory mediation conference no later than 3 days before the scheduled conference.

(d) **Mediator.** The initial mandatory mediation conference required to be held under section 440.25(1), Florida Statutes, shall be conducted by a mediator or adjunct mediator employed by the chief judge under section 440.25(3), Florida Statutes, except when the parties have stipulated under rule 4.350 to substitute a mediator who is not appointed

by the chief judge.

(e) **Mediator's Report.** Within 10 days following the conclusion of the mediation conference, the mediator shall file a written report with the presiding judge as to whether any of the issues in dispute are resolved. If an impasse was declared the mediator shall so report without comment or recommendation. If the parties reach an agreement, it shall be filed with the presiding judge in accordance with rule 4.142.

#### **Committee Notes**

**1996 Adoption.** This rule codifies the procedure for mandatory mediation required by section 440.25, Florida Statutes, for every petition for benefits.

Subdivision (c) also permits filing the motion to waive with the presiding judge who shall then forward the motion to the chief judge for consideration.

Subdivision (d) contemplates that the mandatory mediation shall be conducted by the mediator or adjunct mediator employed by the chief judge under section 440.25(3), Florida Statutes, without charge to the parties. Any substitution of the mediator requires approval by the presiding judge.

**2000 Amendment.** Subdivision (d) was amended to permit the parties to stipulate to a private mediation conference and the use of a private mediator in place of the initial mandatory mediation conference with a state or adjunct mediator appointed by the chief judge.

### **RULE 4.340. REQUEST FOR OR REFERRAL TO SUBSEQUENT MEDIATION**

#### **(a) Request for Subsequent Mediation.**

(1) Notwithstanding attendance at a mandatory mediation conference, any interested party may request a mediation conference at any time following the filing of a petition under section 440.192, Florida Statutes, or any other claim subject to adjudication by a judge. The request shall be made on or before 45 days prior to a final hearing scheduled pursuant to section 440.25(4)(a), Florida Statutes. A request shall be made by the filing of a motion for mediation conference with the presiding judge.

(2) After considering the merits of the request, the presiding judge may enter an order referring the matter to mediation and requiring the parties to attend

a mediation conference. An order upon such request may be entered without a hearing, unless good cause for a hearing is shown.

(b) **Referral by Presiding Judge or by Stipulation.** The presiding judge may also enter an order referring any claim or petition or any selected issues to mediation on the parties' stipulation requesting mediation, or at the pretrial hearing, if the judge finds mediation may aid in the disposition of the matter before trial.

#### **(c) Motion to Dispense with or Defer Subsequent Mediation.**

(1) Within 5 days of the order of referral to mediation or notice of mediation conference, whichever is entered first, a party may move to dispense with or defer mediation if:

(A) the matter has been previously mediated between the parties and the moving party verifies that further mediation would be of no benefit in resolving the matter;

(B) the issue presents a question of law only; or

(C) other good cause is shown.

(2) The movant shall set the motion for hearing before the scheduled date of the mediation conference and shall serve notice of the hearing on all interested parties, including the mediator. The motion shall set forth, in detail, the facts and circumstances supporting the motion. Mediation shall be suspended until a disposition of the motion.

#### **Committee Notes**

**1996 Amendment.** This rule extensively amends the prior rule and affords the parties the opportunity to request or stipulate to a subsequent mediation in the event they reached an impasse at the initial mandatory mediation conference.

### **RULE 4.350. APPOINTMENT OF MEDIATOR AND SCHEDULING MEDIATION CONFERENCE FOR SUBSEQUENT**

## MEDIATION

### (a) Appointment or Selection of Mediator.

(1) Within 10 days of the order of referral to mediation entered pursuant to rule 4.340, the parties may stipulate to the selection of a member of The Florida Bar to act as a mediator who, in the opinion of the parties and the presiding judge, is otherwise qualified by training or experience to mediate all or some of the issues in the pending workers' compensation claim or petition.

(2) If the parties cannot agree on a mediator within 10 days of the order of referral, the judge shall appoint a mediator or adjunct mediator employed by the chief judge pursuant to section 440.25(3), Florida Statutes, in the district in which the matter is pending.

### (b) Mediator Fees.

(1) Mediations conducted by a mediator or adjunct mediator employed by the chief judge under section 440.25(3), Florida Statutes, shall be at no cost to the parties.

(2) When the mediator selected by the parties and approved by the judge is one other than a mediator or adjunct mediator employed by the chief judge under section 440.25(3), Florida Statutes, the amount and method of payment of the mediator fees shall be agreed upon between the parties, or their attorneys, and the mediator.

(c) **Notice of Mediation Conference.** Within 15 days after receiving an order referring the parties to mediation under rule 4.340, the mediator shall notify the parties in writing of the date, time, and place of the mediation conference unless the order of referral specifies the date, time, and place. The mediation conference ordered under rule 4.340 shall be held no sooner than 7 days from the date of the notice scheduling the mediation conference unless otherwise agreed by the parties.

(d) **Completion of Mediation; Continuances; Adjournments.** Mediation shall be completed 10 days before the final hearing unless extended by the

mediator or the judge. However, the mediator may adjourn the mediation conference at any time and may set times for reconvening the adjourned mediation conference. No further written notification is required for parties present at the adjourned mediation conference.

### Committee Notes

**1996 Amendment.** This rule extensively amends the prior rule and is fashioned after Florida Rule of Civil Procedure 1.720(f). It allows the parties to stipulate to the selection of a private mediator to conduct a subsequent mediation. The stipulation also must reflect the amount and method of payment of the mediator fees.

## RULE 4.360. MEDIATION CONFERENCE

(a) **Attendance in Mediation.** Any party required to attend the mediation conference must have full and binding authority to settle without further consultation. Notwithstanding rule 4.075, no party may appear by telephone unless specifically approved by the mediator. Further, a mediator may excuse the appearance of a party. Unless stipulated by the parties or relieved by order of the presiding judge, a party is deemed to appear at a mediation conference if the following persons are physically present:

(1) The claimant or petitioner, a representative of the carrier/servicing agent, an uninsured employer, or a self-insured employer if its carrier/servicing agent does not have full settlement authority.

(2) The parties' counsel of record. Appearance by counsel does not dispense with or waive the required attendance of the parties listed above.

(3) If the employer is a public entity required to conduct its business pursuant to chapter 286, Florida Statutes, a representative with full authority to negotiate on behalf of the entity and to recommend settlement to the appropriate decision-making body of the entity.

(b) **Sanctions for Failure to Appear.** If a party fails to appear at a duly noticed mediation conference without good cause or appears without full authority

to resolve a claim, the presiding judge on a party's or judge's own motion and after a hearing may impose sanctions in accordance with rule 4.150, including payment of the mediator fees, if any.

(c) **Counsel of Record.** Counsel shall be permitted to communicate privately with their clients at any time. In the discretion of the mediator and with the stipulation of the parties, a mediation conference may proceed in the absence of counsel.

#### Committee Notes

**1996 Amendment.** This rule extensively amends the prior rule.

### **RULE 4.361. AUTHORITY AND DUTIES OF MEDIATORS**

#### (a) **Authority of Mediator.**

(1) The mediator shall at all times be in control of the mediation and the procedures to be followed.

(2) The mediator may meet and consult privately with any party or parties or their counsel during the mediation.

(3) The mediator shall make a good-faith effort to schedule the mediation conference at a time that is convenient for all parties, all attorneys, and the mediator. In the absence of agreement, the mediator shall schedule the date for the mediation conference.

(4) The mediator shall have discretion to allow any party to appear at the mediation conference by telephone.

(b) **Duties of Mediator.** The mediator shall inform the parties at the beginning of the mediation conference:

- (1) of the process of mediation;
- (2) that the mediator is an impartial facilitator, and is there to assist the parties in reaching, not to force them to reach, a voluntary settlement;
- (3) of the differences between mediation and a final hearing before the presiding judge;

(4) if applicable, of the costs of the mediation;

(5) that the mediation process is consensual in nature, and the parties retain their right to a final hearing if they do not reach agreement;

(6) of the privileged and confidential nature of communications made during the mediation under rule 4.300(c);

(7) that any agreement reached at the mediation conference will be by mutual consent of the parties, reduced to writing, and subject to the approval of the presiding judge if necessary.

(c) **Disclosure.** The mediator has a duty to be impartial and to advise all parties of any circumstances bearing on possible bias, prejudice, or partiality.

(d) **Guide for Mediator Conduct.** A mediator's conduct in discharging the professional responsibility in mediating workers' compensation matters should be guided by the Standards of Professional Conduct found in Part II of the Florida Rules for Certified and Court-Appointed Mediators as approved by the Supreme Court of Florida.

(e) **Matters Beyond Mediator's Competence.** A mediator shall decline appointment, withdraw, or request technical assistance when the mediator decides that a matter is beyond the mediator's competence.

#### Committee Notes

**1996 Adoption.** This rule is intended to codify the authority and duties of a workers' compensation mediator and adopts the Standards of Professional Conduct for Certified and Court-Appointed Mediators.

### **RULE 4.370. CONCLUSION OF MEDIATION**

(a) **Impasse.** The mediator shall have sole discretion to terminate or suspend mediation if at the mediation conference the parties have reached an impasse or the matter is not appropriate for further mediation. It is the duty of the mediator to timely determine when mediation is no longer helpful or viable and that an impasse exists, or that mediation should end. The mediator shall, within 10 days of the



conclusion of the mediation conference, file a report with the presiding judge reflecting the lack of agreement without comment or recommendation.

**(b) Mediation Agreement.**

(1) If a mutually acceptable and voluntary total or partial agreement is reached, it shall be reduced to writing and signed by the parties or their attorneys, dictated on the record before a judge of compensation claims, or electronically or stenographically recorded and transcribed.

(2) The agreement shall be a stipulation under rule 4.142 and shall be filed with the presiding judge.

(3) Any agreement or stipulation under this rule may be expressly relied on by the judge of compensation claims in any proceedings, unless a party seeks to be relieved of the agreement or stipulation for good cause shown. The judge of compensation claims may abrogate any stipulation that appears to be manifestly contrary to law on due notice to the parties. However, the judge of compensation claims need not inquire beyond the stipulation or agreement and may enter an order approving the mediation agreement.

(c) **Enforcement of Agreement.** In the event of any breach or failure to perform under a mediation agreement, enforcement shall proceed in accordance with section 440.24, Florida Statutes.

(d) **Agreement to Enter into Section 440.20(11), Florida Statutes, Settlement.** Any mediation agreement compromising or releasing prospective benefits to the employee of any class of benefits pursuant to section 440.20(11), Florida Statutes, shall not be approved or become binding until after the parties have first complied with rule 4.143 and the requirements of section 440.20(11), Florida Statutes.

**Committee Notes**

**2000 Amendment.** Subdivision (b)(1) was amended to allow an attorney to sign an agreement instead of the party signing it. The amendment makes the rule similar to rule 4.142(b)(1), which pertains to other agreements or stipulations.

**RULE 4.380. DISQUALIFICATION OF**

**MEDIATOR**

(a) **Procedure.** Any party may, by motion, for good cause shown, request the presiding judge to disqualify a mediator. The request must state with particularity the basis for disqualification. If a mediator is disqualified, the chief judge shall immediately enter an order naming a qualified substitute mediator. The time for a mediation conference shall be tolled during any periods in which mediation is deferred pending determination of a disqualification motion.

(b) **Disclosure by Mediator.** Mediators have a duty to be impartial and shall immediately disclose and advise all parties of any circumstances bearing on possible conflicts of interest, bias, prejudice, or partiality. Nothing in this rule shall preclude mediators from disqualifying themselves or refusing any assignment.

**Committee Notes**

**1996 Amendment.** Editorial changes.

**PART III. FORMS**

**RULE 4.900. FORMS**

(a) **Process.** The following forms are sufficient. Variations from the forms do not void process or notices that are otherwise sufficient.

(b) **Other Forms.** So long as the substance is expressed without prolixity, the forms may be varied to meet the facts of a particular case.

(c) **Formal Matters.** Captions, except for the designation of the paper, are omitted from the forms, as is the certificate of service.

**Committee Notes**

**1988 Adoption.** The use of the forms is not mandatory.

**FORM 4.901. CAPTION AND STYLE OF PLEADINGS**

STATE OF FLORIDA  
DEPARTMENT OF LABOR AND EMPLOYMENT  
SECURITY  
OFFICE OF THE JUDGE OF COMPENSATION

CLAIMS DISTRICT .....(district number).....  
EMPLOYEE: ATTORNEY FOR EMPLOYEE:  
.....(NAME)..... .....(NAME).....  
.....(ADDRESS)..... .....(ADDRESS).....

CLAIMANT: ATTORNEY FOR  
[If other than Employee.] CLAIMANT:  
.....(NAME)..... .....(NAME).....  
.....(ADDRESS)..... .....(ADDRESS).....

EMPLOYER: ATTORNEY FOR EMPLOYER/  
CARRIER:  
.....(NAME)..... .....(NAME).....  
.....(ADDRESS)..... .....(ADDRESS).....

CARRIER CLAIM NUMBER:  
(SERVICING AGENT):  
.....(NAME)..... DATE OF ACCIDENT:  
.....(ADDRESS).....

(Title of Pleading)

**Committee Notes**

**1988 Adoption.** This form is intended to standardize the caption and style of pleadings under these rules. It is intended to be incorporated by reference in the certificate of service where applicable.

There is no prior form.

**FORM 4.902. ATTORNEY'S CERTIFICATE OF SERVICE OF EX PARTE ORDER**

Certificate of Service

I certify that a copy of the attached order was furnished to the following parties and counsel of record by .....(method of delivery)..... on .....(date).....

(Names and addresses of parties and counsel served, or if correctly shown in caption of order, then: "The parties and counsel as shown in the caption of the attached order.")

\_\_\_\_\_

Attorney for employee  
.....(address).....  
.....(telephone number).....  
Florida Bar No. ....

**Committee Notes**

**1988 Adoption.** This form is intended for use with orders approving attorney contracts of representation under rule 4.061.

**FORM 4.903. CONTRACT OF REPRESENTATION, POWER OF ATTORNEY, TRUST AGREEMENT, AND MOTION**

(a) **Form of Agreement for Accidents Occurring before October 1, 1989.**

CONTRACT OF REPRESENTATION,  
POWER OF ATTORNEY, TRUST AGREEMENT,  
AND MOTION

I, the undersigned employee, hereby retain and employ the undersigned as my attorney to represent me with respect to the industrial accident and injury described above in any workers' compensation claim I may have, under the following terms and conditions:

1. **AUTHORIZATION.** I authorize my attorney to act on my behalf in prosecuting my workers' compensation claim. My attorney is authorized to make such investigations, undertake such legal proceedings, and expend such monies on my behalf as my attorney may deem necessary.

2. **ATTORNEY FEES.** I agree to pay to my attorney a reasonable attorney fee for services rendered with respect to my workers' compensation claim. I request that my employer and its carrier (or servicing agent) make all payments of workers' compensation indemnity benefits payable jointly to me and my attorney in care of my attorney at the attorney's address.

I authorize my attorney to retain in trust from my indemnity benefits to secure the payment of my attorney fees and costs:

25% of the first \$5,000 of all benefits obtained;

20% of the next \$5,000 of all benefits obtained;  
15% of all benefits obtained in excess of \$10,000;

although the attorney fee may be greater or less than the sums retained in trust, depending on the amount of time my attorney expends in the prosecution of my claim, the difficulty, novelty, or complexity of my case, and the amount ultimately paid or awarded.

THE JUDGE OF COMPENSATION CLAIMS (WORKERS' COMPENSATION JUDGE) WILL MAKE THE FINAL DETERMINATION AS TO THE AMOUNT OF AND MY ATTORNEY'S ENTITLEMENT TO AN ATTORNEY FEE.

To the extent the money held in trust exceeds my attorney fees and costs, or if all or part of my attorney fees and costs are paid by my employer and its carrier (or servicing agent), the balance held in trust will be returned to me.

Under some circumstances, my employer and its carrier (servicing agent) may be found liable to pay all or a part of my attorney fee and court costs. Those circumstances are when:

- a. my employer or its carrier has denied that I had an on-the-job accident or injury;
- b. my employer or its carrier has refused to provide me with medical care and I am not at that time entitled to any other benefits;
- c. the conduct of my employer or its carrier is found by the judge of compensation claims to constitute "bad faith," as defined in the Workers' Compensation Act.

I understand that the recovery of attorney fees and costs in addition to my benefits may require a separate proceeding for which I may incur additional costs and attorney fees. If my employer or its carrier is required to pay my attorney a fee for any benefits my attorney obtains for me, I will not be obligated to pay an additional fee for obtaining that benefit.

3. COSTS. I agree to reimburse my attorney for all costs associated with the prosecution of my claim to the extent that these costs are not recovered from the employer and its carrier (servicing agent), regardless

of the outcome of my claim. My attorney may use any monies held in trust under this contract to pay any costs incurred on my behalf.

4. EMPLOYEE'S RESPONSIBILITIES. I agree to promptly and fully advise my attorney as to any developments or information which may have a bearing on my workers' compensation claim and to keep my attorney advised at all times as to my whereabouts and correct mailing address.

I will promptly attend any appointments made for me by my attorney and will submit to any medical or vocational examinations or evaluations arranged by my attorney.

I will not discuss my case with any person not specifically authorized by my attorney.

I agree to cooperate fully with my attorney.

I understand that my attorney expressly relies on the truthfulness of all statements made by me, and that I may be subject to criminal prosecution if I make false or misleading statements in connection with my workers' compensation claim.

I UNDERSTAND THAT MY ATTORNEY MAY TERMINATE THIS CONTRACT OF REPRESENTATION IF I DO NOT FULLY COMPLY WITH THIS AGREEMENT.

5. ATTORNEY'S RESPONSIBILITIES. The undersigned attorney agrees to diligently pursue the employee's workers' compensation claim and to keep the employee fully informed as to this claim. The attorney accepts the trust provisions of this agreement and will account to the employee as to any monies received, expended, or held on the employee's behalf at the employee's request.

6. LIMITED POWER OF ATTORNEY. The undersigned employee does hereby make, constitute, and appoint the undersigned attorney as the employee's agent and attorney-in-fact to act in the employee's name, place, and stead to negotiate the employee's workers' compensation benefit checks or drafts only for the purposes of this contract.

7. APPROVAL OF CONTRACT OF REPRESENTATION BY JUDGE OF COMPENSATION CLAIMS. Having read and signed this contract of representation and having discussed its provisions with my attorney, the undersigned employee jointly with the undersigned attorney moves that the judge of compensation claims approve this contract of representation. The employee waives notice of hearing and waives a formal hearing before the judge of compensation claims with respect to the approval of this contract of representation.

\_\_\_\_\_  
EMPLOYEE

\_\_\_\_\_  
WITNESS

\_\_\_\_\_  
WITNESS

DATE EXECUTED: \_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF .....

The foregoing contract was acknowledged before me by .....(name of employee/claimant)....., who identified this instrument as .....(name of instrument)....., who signed the instrument willingly, and who is

Personally Known \_\_\_ OR Produced  
Identification \_\_\_  
Type of Identification Produced \_\_\_\_\_

\_\_\_\_\_  
(Signature of Notary Public — State of Florida)

\_\_\_\_\_  
(Print, Type, or Stamp Commissioned Name of Notary Public)

\_\_\_\_\_  
ATTORNEY FOR THE EMPLOYEE

**(b) Form of Agreement for Accidents Occurring on or after October 1, 1989 and before January 1, 1994.**

CONTRACT OF REPRESENTATION, POWER OF ATTORNEY, TRUST AGREEMENT, AND MOTION

I, the undersigned employee, hereby retain and employ the undersigned as my attorney to represent me with respect to the industrial accident and injury described above in any workers' compensation claim I may have, under the following terms and conditions:

1. AUTHORIZATION. I authorize my attorney to act on my behalf in prosecuting my workers' compensation claim. My attorney is authorized to make such investigations, undertake such legal proceedings, and expend such monies on my behalf as my attorney may deem necessary.

2. ATTORNEY FEES. I agree to pay to my attorney a reasonable attorney fee for services rendered with respect to my workers' compensation claim. I request that my employer and its carrier (or servicing agent) make all payments of workers' compensation indemnity benefits payable jointly to me and my attorney in care of my attorney at the attorney's address.

I authorize my attorney to retain in trust from my indemnity benefits to secure the payment of my attorney fees and costs:

- 25% of the first \$5,000 of all benefits obtained;
- 20% of the next \$5,000 of all benefits obtained;
- 15% of all benefits obtained in excess of \$10,000;

although the attorney fee may be greater or less than the sums retained in trust depending on the amount of time my attorney expends in the prosecution of my claim, the difficulty, novelty, or complexity of my case, and the amount ultimately paid or awarded.

THE JUDGE OF COMPENSATION CLAIMS (WORKERS' COMPENSATION JUDGE) WILL MAKE THE FINAL DETERMINATION AS TO THE AMOUNT OF AND MY ATTORNEY'S ENTITLEMENT TO AN ATTORNEY FEE.

To the extent the money held in trust exceeds my attorney fees and costs, or if all or part of my attorney fees and costs are paid by my employer and

its carrier (or servicing agent), the balance held in trust will be returned to me.

Under some circumstances, my employer and its carrier (servicing agent) may be found liable to pay all or a part of my attorney fees and court costs. Those circumstances are when:

a. my employer or its carrier has denied that I had an on-the-job accident or injury;

b. my employer or its carrier has refused to provide me with medical care and I am not at that time entitled to any other benefits;

c. my employer or its carrier fails or refuses to pay a specific claim filed with the Division of Workers' Compensation on or before the 21st day after receiving notice of the claim.

I understand that the recovery of attorney fees and costs in addition to my benefits may require a separate proceeding for which I may incur additional costs and attorney fees. If my employer or its carrier is required to pay my attorney a fee for any benefits my attorney obtains for me, I will not be obligated to pay an additional fee for obtaining that benefit.

3. COSTS. I agree to reimburse my attorney for all costs associated with the prosecution of my claim to the extent that these costs are not recovered from the employer and its carrier (servicing agent), regardless of the outcome of my claim. My attorney may use any monies held in trust under this contract to pay any costs incurred on my behalf.

4. EMPLOYEE'S RESPONSIBILITIES. I agree to promptly and fully advise my attorney as to any developments or information which may have a bearing on my workers' compensation claim and to keep my attorney advised at all times as to my whereabouts and correct mailing address.

I will promptly attend any appointments made for me by my attorney and will submit to any medical or vocational examinations or evaluations arranged by my attorney.

I will not discuss my case with any person not

specifically authorized by my attorney.

I agree to cooperate fully with my attorney.

I understand that my attorney expressly relies on the truthfulness of all statements made by me, and that I may be subject to criminal prosecution if I make false or misleading statements in connection with my workers' compensation claim.

I UNDERSTAND THAT MY ATTORNEY MAY TERMINATE THIS CONTRACT OF REPRESENTATION IF I DO NOT FULLY COMPLY WITH THIS AGREEMENT.

5. ATTORNEY'S RESPONSIBILITIES. The undersigned attorney agrees to diligently pursue the employee's workers' compensation claim and to keep the employee fully informed as to this claim. The attorney accepts the trust provisions of this agreement and will account to the employee as to any monies received, expended, or held on the employee's behalf at the employee's request.

6. LIMITED POWER OF ATTORNEY. The undersigned employee does hereby make, constitute, and appoint the undersigned attorney as the employee's agent and attorney-in-fact to act in the employee's name, place, and stead to negotiate the employee's workers' compensation benefit checks or drafts only for the purposes of this contract.

7. APPROVAL OF CONTRACT OF REPRESENTATION BY JUDGE OF COMPENSATION CLAIMS. I understand that this agreement is binding upon signing. I authorize my attorney to submit this agreement to the judge of compensation claims for the judge's approval.

Having read and signed this contract of representation and having discussed its provisions with my attorney, the undersigned employee jointly with the undersigned attorney moves that the judge of compensation claims approve this contract of representation. The employee waives notice of hearing and waives a formal hearing before the judge of compensation claims with respect to the approval of this contract of representation.

\_\_\_\_\_  
EMPLOYEE

\_\_\_\_\_  
WITNESS

\_\_\_\_\_  
WITNESS

DATE EXECUTED: \_\_\_\_\_  
\_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF .....

The foregoing contract was acknowledged before me by .....(name of employee/claimant)....., who identified this instrument as .....(name of instrument)....., who signed the instrument willingly, and who is

Personally Known \_\_\_ OR Produced  
Identification \_\_\_  
Type of Identification Produced \_\_\_\_\_

\_\_\_\_\_  
(Signature of Notary Public — State of Florida)

\_\_\_\_\_  
(Print, Type, or Stamp Commissioned Name of Notary Public)

\_\_\_\_\_  
ATTORNEY FOR THE EMPLOYEE

**(c) Form of Agreement for Accidents Occurring on or after January 1, 1994.**

CONTRACT OF REPRESENTATION, POWER OF ATTORNEY,  
TRUST AGREEMENT, AND MOTION

I, the undersigned employee, hereby retain and employ the undersigned as my attorney to represent me with respect to the industrial accident and injury described above in any workers' compensation claim I may have, under the following terms and

conditions:

1. AUTHORIZATION. I authorize my attorney to act on my behalf in prosecuting my workers' compensation claim. My attorney is authorized to make such investigations, undertake such legal proceedings, and expend such monies on my behalf as my attorney may deem necessary.

2. ATTORNEY FEES. I agree to pay to my attorney a reasonable attorney fee for services rendered with respect to my workers' compensation claim. I request that my employer and its carrier (or servicing agent) make all payments of workers' compensation indemnity benefits payable jointly to me and my attorney in care of my attorney at the attorney's address.

I authorize my attorney to retain in trust from my indemnity benefits to secure the payment of my attorney fees and costs:

- 20% of the first \$5,000 of all benefits secured;
- 15% of the next \$5,000 of all benefits secured;
- 10% of all benefits secured thereafter until 10 years after the filing of a petition/claim;
- 5% of all benefits secured after the expiration of the 10-year term;

although the attorney fee may be greater or less than the sums retained in trust depending on the amount of time my attorney expends in the prosecution of my claim, the difficulty, novelty, or complexity of my case, and the amount ultimately paid or awarded.

THE JUDGE OF COMPENSATION CLAIMS (WORKERS' COMPENSATION JUDGE) WILL MAKE THE FINAL DETERMINATION AS TO THE AMOUNT OF AND MY ATTORNEY'S ENTITLEMENT TO AN ATTORNEY FEE.

To the extent the money held in trust exceeds my attorney fees and costs, or if all or part of my attorney fees and costs are paid by my employer and its carrier (or servicing agent), the balance held in trust will be returned to me.

Under some circumstances, my employer and its carrier (servicing agent) may be found liable to pay all or a part of my attorney fees and court costs.

Those circumstances are when:

a. my employer or its carrier has denied that I had an on-the-job accident or injury;

b. my employer or its carrier has refused to provide me with medical care and I am not at that time entitled to any other benefits;

c. my employer or its carrier files a Notice of Denial with the Division of Workers' Compensation for the benefits claimed.

I understand that the recovery of attorney fees and costs in addition to my benefits may require a separate proceeding for which I may incur additional costs and attorney fees. If my employer or its carrier is required to pay my attorney a fee for any benefits my attorney obtains for me, I will not be obligated to pay an additional fee for obtaining that benefit.

3. COSTS. I agree to reimburse my attorney for all costs associated with the prosecution of my claim to the extent that these costs are not recovered from the employer and its carrier (servicing agent), regardless of the outcome of my claim. My attorney may use any monies held in trust under this contract to pay any costs incurred on my behalf.

4. EMPLOYEE RESPONSIBILITIES. I agree to promptly and fully advise my attorney as to any developments or information that may have a bearing on my workers' compensation claim and to keep my attorney advised at all times as to my whereabouts and correct mailing address.

I will promptly attend any appointments made for me by my attorney and will submit to any medical or vocational examinations or evaluations arranged by my attorney.

I will not discuss my case with any person not specifically authorized by my attorney.

I agree to cooperate fully with my attorney.

I understand that my attorney expressly relies on the truthfulness of all statements made by me and that I may be subject to criminal prosecution if I make

false or misleading statements in connection with my workers' compensation claim.

I UNDERSTAND THAT MY ATTORNEY MAY TERMINATE THIS CONTRACT OF REPRESENTATION IF I DO NOT FULLY COMPLY WITH THIS AGREEMENT.

5. ATTORNEY RESPONSIBILITIES. The undersigned attorney agrees to diligently pursue the employee's workers' compensation claim and to keep the employee fully informed as to this claim. The attorney accepts the trust provisions of this agreement and will account to the employee as to any monies received, expended, or held on the employee's behalf at the employee's request.

6. LIMITED POWER OF ATTORNEY. The undersigned employee does hereby make, constitute, and appoint the undersigned attorney as the employee's agent and attorney-in-fact to act in the employee's name, place, and stead to negotiate the employee's workers' compensation benefit checks or drafts only for the purposes of this contract.

7. APPROVAL OF CONTRACT OF REPRESENTATION BY JUDGE OF COMPENSATION CLAIMS. I understand that this agreement is binding upon signing. I authorize my attorney to submit this agreement to the judge of compensation claims for the judge's approval.

Having read and signed this contract of representation and having discussed its provisions with my attorney, the undersigned employee jointly with the undersigned attorney moves that the judge of compensation claims approve this contract of representation. The employee waives notice of hearing and waives a formal hearing before the judge of compensation claims with respect to the approval of this contract of representation.

\_\_\_\_\_  
EMPLOYEE

\_\_\_\_\_  
WITNESS  
\_\_\_\_\_

WITNESS

STATE OF FLORIDA  
COUNTY OF .....

The foregoing contract was acknowledged before me by .....(name of employee/claimant)....., who identified this instrument as .....(name of instrument)....., who signed the instrument willingly, and who is

Personally Known \_\_\_ OR Produced  
Identification \_\_\_  
Type of Identification Produced \_\_\_\_\_

\_\_\_\_\_  
(Signature of Notary Public — State of Florida)

\_\_\_\_\_  
(Print, Type, or Stamp Commissioned Name of Notary Public)

\_\_\_\_\_  
ATTORNEY FOR THE EMPLOYEE

**Committee Notes**

**1988 Adoption.** The suggested form intends to make uniform the attorney-client agreement and conform with chapter 440, Florida Statutes, as well as the trust accounting provisions applicable to attorneys, established practice, and applicable case law. It is intended to memorialize and is not meant as a substitute for advice of counsel. The form is intended for use only as to claims arising under chapter 440, Florida Statutes, and a separate agreement must be obtained for representation as to any other cause of action.

**1992 Amendment.** The alternative form of agreement reflects the amendment to chapter 440, Florida Statutes (1989), eliminating the provision for the award of attorney fees on account of “bad faith” and substituting a timely payment requirement (the “21-day rule”). It is the view of this committee, being mindful of the customary practice under the prior (pre-1979) “21-day rule,” that many of these agreements will not be submitted to the judge for approval inasmuch as the attorney will not undertake to withhold money from the claimant's benefits to secure the payment of a fee.

**FORM 4.904. ORDER APPROVING  
CONTRACT OF  
REPRESENTATION AND  
DIRECTING PAYMENT OF**

**BENEFITS**

[For caption and style of pleadings see form 4.901]

**ORDER APPROVING CONTRACT OF  
REPRESENTATION AND DIRECTING PAYMENT  
OF BENEFITS**

The motion to approve the contract of representation having come before the undersigned ex parte, and having reviewed the contract of representation entered into between the attorney for the employee and the employee providing for the retention of certain monies in trust and requesting that the employer/carrier make payment of benefits to the attorney for the employee on behalf of the employee; it is

**ORDERED AND ADJUDGED:**

1. The contract of representation is approved and jurisdiction is reserved to enforce, modify, or rescind the contract of representation on the motion of any party or counsel. Further, any attorney fees payable to the attorney for the employee shall constitute a lien against the employee's benefits.

2. The attorney for the employee is directed to serve a copy of this order on the employer, its carrier (or servicing agent), and counsel of record (if any) in the manner provided in Florida Rule of Workers' Compensation Procedure 4.023.

3. The employer and its carrier (servicing agent) shall pay all benefits due to the employee in care of the attorney for the employee and include the name of the attorney for the employee as an additional payee on any check or draft.

4. The attorney for the employee may retain monies paid by the employee in trust subject to the final determination by the judge of compensation claims of the entitlement to the amount of attorney fees.

DONE AND ORDERED in Chambers,

\_\_\_\_\_  
Judge of Compensation Claims

I CERTIFY that this order was entered and a true



copy served by mail or by hand delivery on the attorney for the employee at the address written above on .....(date).....

\_\_\_\_\_  
 \_\_\_\_\_  
 Assistant to the  
 Judge of Compensation Claims

**Committee Notes**

**1988 Adoption.** The inclusion of this form is not intended to limit the discretion of the deputy commissioner in approving attorney-client agreements nor to imply that such approval is necessary.

**FORM 4.905. MOTION FOR EX PARTE  
 PAYMENT OF ATTORNEY FEES  
 AND COSTS**

[For caption and style of pleadings see form 4.901]

**MOTION FOR EX PARTE PAYMENT OF  
 ATTORNEY FEES AND COSTS**

The employee and the attorney for the employee stipulate to the payment of attorney fees and costs and jointly move for the entry of an order for the payment of the fees and costs, and in support of this motion state:

1. The employee and the attorney for the employee have entered into a contract of representation which has been approved by the judge of compensation claims at the joint request of the employee and the attorney for the employee.

2. Under the contract of representation, the attorney has obtained the payment and/or the provision of benefits to the employee as follows:

**COMPENSATION:**

Type	Period	Amount
1.	_____	_____
2.	_____	_____

3. \_\_\_\_\_

**MEDICAL:**

Provider	Amount

**OTHER:**

Description	Amount

**TOTAL** \_\_\_\_\_

3. The attorney for the employee represents that the attorney has expended the following professional time on behalf of the employee with respect to this workers' compensation claim: \_\_\_\_\_ hours.

4. Based on the benefits obtained and the guidelines set forth in chapter 440, Florida Statutes, the attorney for the employee is entitled to reasonable attorney fees of \$\_\_\_\_\_.

5. The employee acknowledges the receipt of these benefits through the efforts of the attorney and waives a FORMAL HEARING before the judge of compensation claims to determine the amount of the fees and the attorney's entitlement thereto.

6. The attorney represents to the judge of compensation claims that the attorney has obtained these benefits for the employee. The attorney further states that the attorney has retained in trust, to secure the payment of fees under the contract of representation, the sum of \$\_\_\_\_\_.

7. The attorney represents that the following reimbursable costs have been advanced on behalf of the employee and the employee agrees that these costs should be reimbursed to the attorney from the monies held in trust:

.....(description of cost)..... : \$.....(amount).....

.....(description of cost)..... : \$.....(amount).....

8. To the extent any monies have been paid or are to be paid in trust to the attorney under the contract of representation, the employee requests that those

monies be released from trust to the extent fees and costs are awarded and paid to the attorney.

9. The undersigned attorney certifies that no attorney fee has been paid by the employer/carrier for the benefits referenced in this motion and if a fee is paid by the employer/carrier on the same benefits in the future, the fee approved in this document shall be refunded to the employee.

WHEREFORE, the employee and the attorney for the employee jointly move for the entry of an order granting the motion.

\_\_\_\_\_

ATTORNEY FOR EMPLOYEE

.....(address).....

.....(telephone number).....

Florida Bar No. ....

\_\_\_\_\_

EMPLOYEE

STATE OF FLORIDA  
COUNTY OF .....

The foregoing motion was acknowledged before me by .....(name of employee/claimant)....., who identified this instrument as .....(name of instrument)....., who signed the instrument willingly, and who is

Personally Known \_\_\_ OR Produced  
Identification \_\_\_  
Type of Identification Produced \_\_\_\_\_

\_\_\_\_\_  
(Signature of Notary Public — State of Florida)

\_\_\_\_\_  
(Print, Type, or Stamp Commissioned Name of Notary Public)

**Committee Notes**

**1996 Amendment.** Editorial changes.

**2000 Amendment.** Subdivision 9 was added to ensure that, if a fee is received in the future by the attorney for the

employee from the employer/carrier, the fee provided for in this motion would be reimbursed to the employee.

**FORM 4.906. ORDER APPROVING  
ATTORNEY FEES AND COSTS**

[For caption and style of pleadings see form 4.901]

**ORDER FOR EX PARTE ATTORNEY FEES  
AND COSTS**

The motion for ex parte attorney fees and costs having been considered and granted ex parte, I find:

1. The employee and the attorney for the employee have entered into a contract of representation.

2. Attorney fees and reimbursable costs are due to the attorney for benefits obtained within the provisions of the Florida Rules of Workers' Compensation Procedure and chapter 440, Florida Statutes. As it appears from the pleadings that those provisions have been substantially complied with, it is:

**ORDERED AND ADJUDGED:**

A. The attorney fees and costs are approved as set forth in the motion.

B. The attorney may withdraw from trust sufficient sums to pay the fees and costs awarded to the attorney by this order.

C. The attorney is directed to comply with the applicable laws and provisions of the Rules Regulating The Florida Bar as they relate to trust accounting.

DONE AND ORDERED in Chambers,

\_\_\_\_\_  
Judge of Compensation Claims

I CERTIFY that this order was entered and a true copy served on the parties and counsel by mail or by hand delivery on .....(date).....

\_\_\_\_\_  
Assistant to the  
Judge of Compensation Claims

**Committee Notes**

**1996 Amendment.** Editorial changes.

**FORM 4.907. ORDER ON MOTION TO  
WITHDRAW AS COUNSEL**

[For caption and style of pleadings see form 4.901]

**ORDER ON MOTION TO  
WITHDRAW AS COUNSEL**

This claim having come before the undersigned on the motion of the attorney for the employee to withdraw as attorney of record in this proceeding and it appearing that good and sufficient grounds are shown in the motion for granting the motion; it is

**ORDERED AND ADJUDGED:**

1. Any party in interest may object in writing filed with the judge of compensation claims within 30 days of the date of this order.

2. In the absence of such objection, the motion is GRANTED and jurisdiction is reserved as to any lien for attorney fees and costs previously approved.

DONE AND ORDERED in Chambers,

\_\_\_\_\_  
Judge of Compensation Claims

I CERTIFY that this order was entered and a copy served on the parties and counsel by mail or by hand delivery on .....(date).....

\_\_\_\_\_  
\_\_\_\_\_  
Assistant to the  
Judge of Compensation Claims

**Committee Notes**

**1996 Amendment.** Editorial changes.

**FORM 4.9075. PETITION FOR BENEFITS**

~ UNREPRESENTED

DWC CASE # \_\_\_\_\_

**DOCKETING ORDER  
TO BE COMPLETED BY DOCKETING JUDGE ONLY**

- ( ) Petition is consistent with all statutory requirements and is referred to the appropriate judge of compensation claims for further review and consideration.
- ( ) Petition fails to specifically identify or itemize the information required under F.S. 440.192(2)(a), (b), (c), (d), (e), (f), (g), (h), (i), (j), or \_\_\_\_\_ and is dismissed without prejudice with leave to amend within 30 days from the date of this order.
- ( ) Petitioner has failed to exhaust the procedures for informal dispute resolution under F.S. 440.191(2) before filing the petition and the petition is dismissed without prejudice.
- ( ) Petition failed to include a certification by the petitioner or the petitioner's attorney indicating a good faith effort to resolve the dispute as required under F.S. 440.192(4) and the petition is dismissed without prejudice with leave to amend within 30 days from the date of this order.
- ( ) Other \_\_\_\_\_

\_\_\_\_\_  
Docketing Judge

The above docketing order was entered and a copy furnished by U.S. mail to the parties, or their attorneys as indicated below, at their addresses listed below on this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_.

**PETITION FOR BENEFITS (Rev. 8/98)**  
FLORIDA DEPARTMENT OF LABOR AND EMPLOYMENT SECURITY  
DIVISION OF WORKERS' COMPENSATION  
EAO/PETITION TEAM — P. O. BOX 8000 — TALLAHASSEE, FL 32314-8000  
FOR ASSISTANCE CALL **1-800-342-1741**

**AMENDED ~**

EMPLOYEE'S NAME & ADDRESS:	EMPLOYER'S NAME & ADDRESS:	CARRIER/SERVICING AGENT'S NAME & ADDRESS:
EMPLOYEE'S PHONE NO.	EMPLOYER'S PHONE NO.	CARRIER/SERVICING AGENT'S PHONE NO.
SOCIAL SECURITY NUMBER	DATE OF ACCIDENT (ONLY ONE DATE PER FORM)	LOCATION OF ACCIDENT (CITY, COUNTY, STATE)
PETITIONER'S NAME, ADDRESS & PHONE (IF DIFFERENT FROM EMPLOYEE):		

ATTORNEY FOR EMPLOYEE/PETITIONER NAME & ADDRESS:	ATTORNEY FOR EMPLOYER/CARRIER NAME & ADDRESS:
EMPLOYEE/PETITIONER ATTORNEY'S PHONE NO.	E/C ATTORNEY'S PHONE NO.
FLORIDA BAR NO.	FLORIDA BAR NO.

JOB DESCRIPTION/WORK RESPONSIBILITIES	DESCRIPTION OF WORK BEING PERFORMED WHEN INJURY OCCURRED:
DESCRIPTION OF ACCIDENT AND PARTS OF BODY INJURED:	MMI ( ) HAS ( ) HAS NOT BEEN REACHED ACCORDING TO DR. _____ ON _____
	IF APPLICABLE, DATE OF DEATH: _____
	THIS PETITION IS FOR MEDICAL BENEFITS ONLY _____ YES _____ NO

I. Jurisdiction: The judge has jurisdiction over the parties and the subject matter of this petition.

II. It is certified that: The subject matter of this petition was presented to the EAO created under section 440.191, Florida Statutes, in a good-faith effort to resolve the disagreements between the parties. The request for assistance was dated \_\_\_\_\_, \_\_\_\_\_. Despite these efforts, the matters were not resolved. Managed care grievance procedures, if required, have been exhausted under Section 440.192(3), Florida Statutes.

III. Character of disability. The injury/injuries occasioned by the events described above has/have adversely affected the injured employee's capacity to earn in the same or any other employment the wages that the employee was receiving at the time of the injury. Specifically, the injury prevents the injured employee from: \_\_\_\_\_

IV. The above-named injured employee petitions the Judge of Compensation Claims for an order requiring the employer/carrier/servicing agent to provide the following benefits claimed due, ripe and owing but not provided:

\_\_\_\_\_ Temporary Total Disability benefits from \_\_\_\_\_ to \_\_\_\_\_ at a compensation rate of \$ \_\_\_\_\_ per week.

\_\_\_\_\_ Temporary Partial Disability benefits from \_\_\_\_\_ to \_\_\_\_\_ at a compensation rate of \$ \_\_\_\_\_ per week.

\_\_\_\_\_ For accidents prior to 1994, impairment benefits due under Section 440.15(3)(a), Florida Statutes (1979) \$ \_\_\_\_\_. The permanent impairment due to the injury is \_\_\_\_\_% of the whole body. These benefits are based on:

\_\_\_\_\_ Permanent Impairment due to the total loss of use of \_\_\_\_\_ (body part affected).

\_\_\_\_\_ Permanent Impairment due to amputation of \_\_\_\_\_ (body part amputated after July 1, 1990).

\_\_\_\_\_ Permanent Impairment due to the loss of 80% vision of either eye after correction.

\_\_\_\_\_ Serious facial injury or head disfigurement.

\_\_\_\_\_ For accidents prior to 1994, Wage-loss benefits payable under Section 440.15(3)(b), Florida Statutes from

\_\_\_\_\_ to \_\_\_\_\_ at a rate of \$ \_\_\_\_\_ per week. If the petitioner had earnings during the foregoing period of time, attach a list of the earnings on a biweekly basis or attach wage-loss request forms.

\_\_\_ Impairment benefits due under Section 440.15(3)(a)3, Florida Statutes (1994) \$ \_\_\_\_\_.

\_\_\_ Supplemental benefits due under Section 440.15(3)(b), Florida Statutes (1994) \$ \_\_\_\_\_.

\_\_\_ Permanent Total Disability benefits under Section 440.15(1), Florida Statutes, from \_\_\_\_\_ to the present and continuing at a rate of \$ \_\_\_\_\_ per week.

\_\_\_ Death benefits payable under Section 440.16, Florida Statutes.

\_\_\_ Correction of AWW and resulting Compensation Rate due to \_\_\_\_\_

\_\_\_ Medical Expenses incurred for treatment of the employee's injury as provided under Section 440.13(2), Florida Statutes. The employee has specifically requested the payment of the charges, but the employer/carrier has failed, refused, or neglected to do so within a reasonable time. The following medical charges have not been paid (for numerous unpaid charges, a list may be attached): \_\_\_\_\_

\_\_\_ Medical care under the supervision of doctor(s): \_\_\_\_\_

The employee has previously requested the treatment, but the employer/carrier has failed, refused, or neglected to provide the treatment within a reasonable time.

\_\_\_ The injured employee seeks \_\_\_\_\_ medical treatment.

(Type of treatment)

\_\_\_ The treatment is needed because \_\_\_\_\_

\_\_\_ Medically necessary (professional) (nonprofessional) attendant care as per the direction of a physician. The employee has previously specifically requested the attendant care, but the employer/carrier has failed, refused, or neglected to provide the care within a reasonable time. The injured employee seeks attendant care because \_\_\_\_.

\_\_\_ Reimbursement of mileage to and from medical care providers in the amount of \$ \_\_\_\_\_ (see attached mileage statement).

\_\_\_ Rehabilitative Temporary Total Compensation under Section 440.491(6)(b), Florida Statutes, from \_\_\_\_\_ to \_\_\_\_\_ at a rate of \$ \_\_\_\_\_ per week.

\_\_\_ Interest and Penalties on unpaid benefits

\_\_\_ Costs and attorney's fees from E/C under Section 440.34(3)(a)-(d), Florida Statutes.

\_\_\_ Reimbursement of prescription bills in the amount of \$ \_\_\_\_\_ (see attached).

\_\_\_ The employer/carrier/servicing agent has denied the compensability of the accident or injury.

\_\_\_ Other issue(s) not referenced above: \_\_\_\_\_

The employee/petitioner, or the employee's/petitioner's attorney, hereby certify that a good-faith effort was made to resolve the dispute and was unable to resolve the dispute with the employer/carrier/servicing agent. In accordance with Section 440.192(1), Florida Statutes, a copy of this petition for benefits has been served by certified mail on the injured worker's employer and the employer's carrier, and the original on the Division of Workers' Compensation in Tallahassee on \_\_\_\_\_. A copy of this petition has also been served on the attorney for the employee/carrier, if known. The employee/petitioner further attests that (he) (she) has reviewed, understands, and acknowledges the following notice: ANY PERSON WHO, KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD OR DECEIVE ANY EMPLOYER, OR EMPLOYEE, INSURANCE COMPANY OR SELF-INSURED PROGRAM, FILES A STATEMENT OF CLAIM CONTAINING ANY FALSE OR MISLEADING INFORMATION, COMMITS INSURANCE FRAUD, PUNISHABLE AS PROVIDED IN SECTION 817.234, FLORIDA STATUTES.

Signature of Employee/Petitioner: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Attorney: \_\_\_\_\_ Date: \_\_\_\_\_

Florida Bar No. \_\_\_\_\_

**Committee Notes**

**2000 Amendment.** The two petition forms were combined into one for the benefit of the practitioner. The form has been significantly shortened for the same reason. The docketing order was incorporated into the petition to eliminate the need for a separate order, anticipating that this will speed up this step of the administrative process.

**FORM 4.908. NOTICE OF HEARING, OTHER THAN FINAL HEARING AND PRETRIAL CONFERENCE**

[For caption and style of pleadings see form 4.901]

**NOTICE OF HEARING**

**TO THE PARTIES, IF UNREPRESENTED, AND COUNSEL ADDRESSED:**

A hearing will be held in the above case at:

.....(LOCATION OF HEARING).....

at \_\_\_ o'clock \_\_M. on .....(date).....

**SUBJECT OF THE HEARING:**

.....(MATTERS TO BE CONSIDERED).....

The parties should arrange for all witnesses to appear promptly at the aforesaid time and place. The right is reserved to take such action as the law permits should either party fail to appear.

I CERTIFY that this notice of hearing was served by mail or by hand delivery on the parties, if unrepresented, and counsel at the addresses written above on .....(date).....

\_\_\_\_\_  
Assistant to the  
Judge of Compensation Claims

**FORM 4.9085. NOTICE OF MEDIATION CONFERENCE AND ORDER**

[For caption and style of pleadings see form 4.901.]

**NOTICE OF MEDIATION CONFERENCE AND ORDER**

In accordance with section 440.25(1), Florida Statutes, 1994, and Florida Rules of Workers' Compensation Procedure 4.300-4.380, a mediation conference will be held before \_\_\_\_\_, Mediator, at .....(location of hearing)..... in the above case on:

DATE:                      TIME:

1. THE FOLLOWING PEOPLE MUST ATTEND THE MEDIATION CONFERENCE:

A. petitioner;

B. claims representative of the carrier/servicing agent, who must have full authority to settle the issues for which a petition was filed;

C. employer, if uninsured;

D. insured or self-insured employer, if the carrier/servicing agent does not have full authority to settle the issues for which the petition was filed; and

E. attorneys for the parties.

2. The appearance of an attorney for a party does not dispense with the required attendance of the parties themselves.

3. No party may appear at the mediation conference by telephone unless such appearance is approved in advance by the mediator.

4. A party's failure to attend the mediation conference without good cause shown or appearance without full authority to resolve the issues may subject the party to sanctions such as the judge of compensation claims shall deem appropriate and may include certification for contempt, dismissal of the petition, striking of defenses, and imposition of costs and attorney fees.

5. If the issues in dispute are not resolved within 10 days of the commencement of the mediation conference, the mediator will so notify the judge of compensation claims, and a pretrial hearing will be scheduled, with at least 7 days' advance notice of the date, time, and place of the pretrial being mailed to the parties.

DONE AND ORDERED in Chambers,

\_\_\_\_\_  
Judge of Compensation Claims

I CERTIFY that the Notice of Mediation Conference and Order was served by mail or by hand delivery on the parties, if unrepresented, and counsel



at the address written above on .....(date).....

Assistant to the  
Judge of Compensation Claims

**FORM 4.909. NOTICE OF FINAL HEARING  
AND PRETRIAL CONFERENCE**

[This form should be used for final merit hearings. Section 440.25(4)(a), Florida Statutes, mandates a pretrial hearing in all cases.]

[For caption and style of pleadings see form 4.901]

NOTICE OF FINAL HEARING  
AND PRETRIAL CONFERENCE

TO THE PARTIES, IF UNREPRESENTED, AND  
COUNSEL ADDRESSED:

As authorized under section 440.25(4), Florida Statutes, and Florida Rules of Workers' Compensation Procedure 4.045 and 4.085, a pretrial hearing and a trial (final hearing) will be held in this claim. If the total benefits claimed in the petition are \$5,000 or less, the claim is subject to the expedited dispute resolution process of section 440.25(4)(j), Florida Statutes. To receive expedited resolution, either party must submit an application for expedited hearing within 15 days of the date of this notice. Expedited dispute resolution is available for claims over \$5,000 if all parties submit a joint application within 15 days of the date of this notice.

The pretrial hearing will be held in this claim at:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

at \_\_\_\_\_ .M. on .....(date).....

The final hearing will be held in this claim at:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

at \_\_\_\_\_ .M. on .....(date).....

SUBJECT OF THE PRETRIAL HEARING AND  
THE FINAL HEARING:

\_\_\_\_\_

**Please note the following important instructions.**

a. **Notice of trial (final hearing) and pretrial proceedings.** Pursuant to these notices, a trial (final hearing) and a pretrial proceeding will be held in this claim.

b. **Pretrial questionnaire and procedure for waiver of pretrial hearing.** A pretrial questionnaire as set forth in Florida Rule of Workers' Compensation Procedure 4.910 must be completed, filed, and served on all appropriate parties on or before the date of the pretrial hearing noticed herein. A live pretrial hearing may be waived only if all parties are represented by counsel or by express permission of the judge of compensation claims. In the event of such a waiver, the pretrial questionnaire must be completed and filed with the judge of compensation claims on or before the date of the pretrial hearing noticed herein.

c. **Telephone pretrial hearings.** If a live pretrial hearing is required, a telephone hearing can be held if the party requesting the telephone hearing makes prior arrangements with the office of the judge of compensation claims.

d. **Pretrial hearing.** The parties must file composites of the medical reports of all authorized physicians at the pretrial hearing or 30 days before the final hearing. All witnesses must be identified at the pretrial hearing or 30 days before the final hearing.

e. **Witnesses, documentary evidence, and sanctions for noncompliance.** No witnesses will be heard at a pretrial hearing. However, all documentary evidence including medical bills and reports in the possession of the parties must be available at any pretrial hearing. Failure to comply in good faith with the pretrial procedure shall result in sanctions as provided under Florida Rule of Workers' Compensation Procedure 4.150.

f. **Final hearing, witnesses, and subpoenas.** At the final hearing, the parties must arrange to have all witnesses present to promptly testify at the time and place noticed above. Subpoenas will be issued on request of the parties or their counsel.

g. **Subpoenaed witnesses — failure to appear, sanctions.** If any party or legally subpoenaed witness fails to appear at the time and place set for this hearing, sanctions under rule 4.150 may be imposed or punitive actions authorized under section 440.33, Florida Statutes, may be instigated.

DONE AND ORDERED in Chambers,

\_\_\_\_\_  
Judge of Compensation Claims

I CERTIFY that a copy of this notice was mailed or delivered to the above-named parties on .....(date).....

\_\_\_\_\_  
Assistant to the  
Judge of Compensation Claims

THIS IS THE ONLY NOTICE OF HEARING AND PRETRIAL CONFERENCE YOU WILL RECEIVE.

**FORM 4.9091. APPLICATION FOR EXPEDITED HEARING**

[For caption and style of pleadings, see form 4.901.]

APPLICATION FOR EXPEDITED HEARING  
PURSUANT TO  
SECTION 440.25(4)(j), FLORIDA STATUTES

The (claimant) (employer/carrier/servicing agent) (applies)(apply) for an expedited hearing pursuant to section 440.25(4)(j), Florida Statutes, and show(s) the court as follows:

1. A petition for benefits is properly pending before this court, having been filed on \_\_\_\_\_. A copy is attached and made a part of this application.

2. This cause previously has been the subject of a mediation conference, having been mediated by the \_\_\_\_\_ on \_\_\_\_\_, more than 10 days before the filing of this application.

3. The issues in controversy have a value of \$5,000 or less, excluding costs or attorney fees, and are composed of the following elements:

A. Past medical charges in issue:

- (i) \_\_\_\_\_ \$ \_\_\_\_\_
- (ii) \_\_\_\_\_ \$ \_\_\_\_\_
- (iii) \_\_\_\_\_ \$ \_\_\_\_\_

Total: \$ \_\_\_\_\_

B. Compensation in issue:

- (i) TTD/TPD: \_\_\_ to \_\_\_ \$ \_\_\_\_\_
- (ii) W/L: \_\_\_ to \_\_\_ \$ \_\_\_\_\_

Total: \$ \_\_\_\_\_

C. Other (excluding costs and attorney fees):

- (i) \_\_\_\_\_ \$ \_\_\_\_\_
- (ii) \_\_\_\_\_ \$ \_\_\_\_\_

Total: \$ \_\_\_\_\_

D. Total amount in controversy: \$ \_\_\_\_\_

4. The issues presented in this cause are proper for expedited hearing under section 440.25(4)(j), Florida Statutes.

5. The opposing party (has) (has not) been contacted and (does) (does not) agree to an expedited hearing.

6. If the amount in controversy exceeds \$5,000 and the parties agree to expedited dispute resolution under section 440.25(4)(j), Florida Statutes, both parties, or their counsel, must sign this application.

(The claimant) (The employer/carrier/servicing agent) (Both parties) (applies) (apply) for an expedited hearing in this cause.

\_\_\_\_\_  
Attorney for the claimant    Attorney for the E/C/SA

I CERTIFY that the original of this application was filed with the Office of the Judge of Compensation Claims in \_\_\_\_\_, \_\_\_\_\_ County, Florida, by regular mail on .....(date)....., and that copies were mailed to the parties and their attorneys.

Attorney for Applicant  
.....(address).....  
.....(telephone number).....  
Florida Bar No. ....

**FORM 4.9092. NOTICE OF EXPEDITED  
HEARING AND ORDER**

[For caption and style of pleadings, see form 4.901.]

**NOTICE OF EXPEDITED HEARING  
AND ORDER**

**TO THE PARTIES, IF UNREPRESENTED, AND  
COUNSEL ADDRESSED:**

As authorized under section 440.25(4)(j), Florida Statutes, and Florida Rule of Workers' Compensation Procedure 4.105, an expedited hearing will be held in this matter.

The final hearing will be held in this claim at \_\_\_\_\_,  
\_\_\_\_\_ County, Florida.

Date of Final Hearing: \_\_\_\_\_  
Filing Date For Pretrial Outline: \_\_\_\_\_

Please note the following important instructions:

a. **Notice of final hearing.** Under this notice, a final hearing will be held in this matter.

b. **Pretrial outline.** Under this notice, a pretrial outline shall be filed with the judge and a copy served on the opposing party. There shall be attached to the pretrial outline a composite that shall include the following:

1. **Statement of the facts.** The statement shall include references to the specific pages in the deposition testimony of witnesses as well as a suggestion of the expected testimony of those witnesses who will be called to testify at the hearing.

2. **Memorandum of law.** The memorandum shall include relevant case citations as well as copies of the cases cited.

3. **Attachments.** A complete composite of the records of the medical advisor appointed by the

judge or the division, any IME physicians, and any other authorized providers shall be attached. There shall also be attached any depositions or other documentary items on which a party will rely to establish the case. The pages of the composite shall be numbered and the composite shall be preceded by an abstract referencing and synthesizing those portions of the records on which the filing party relies. No additional records, depositions, or documentary evidence will be admitted at the time of the hearing.

c. **Final hearing, witnesses, and subpoenas.** At the final hearing, the parties must arrange to have all witnesses present or available to testify at the time and place noticed above. The final hearing will not exceed 30 minutes in length. The employer/carrier may be represented by an adjuster or other qualified representative. Subpoenas will be issued on request of the parties or their counsel.

d. **Subpoenaed witnesses — failure to appear, sanctions.** If any party or legally subpoenaed witness fails to appear at the time and place set for this hearing, sanctions under rule 4.150 may be imposed or punitive actions authorized under sections 440.32 and 440.33, Florida Statutes, may be initiated.

e. **All previously scheduled final hearings and pretrial hearings are canceled.**

DONE AND ORDERED in Chambers,

\_\_\_\_\_  
Judge of Compensation Claims

THIS IS TO CERTIFY that the above order was entered in the office of the judge of compensation claims and a copy was served by U.S. Mail on each party and counsel at the addresses listed above on .....(date).....

---

Assistant to the  
Judge of Compensation Claims

THIS IS THE ONLY NOTICE OF EXPEDITED  
HEARING YOU WILL RECEIVE.

**FORM 4.910. UNIFORM PRETRIAL STIPULATION AND PRETRIAL COMPLIANCE QUESTIONNAIRE**

**(a) Form for Pretrial Stipulation and Pretrial Compliance Questionnaire.**

STATE OF FLORIDA  
DEPARTMENT OF LABOR AND EMPLOYMENT SECURITY  
OFFICE OF THE JUDGE OF COMPENSATION CLAIMS  
DISTRICT .....(district number).....

EMPLOYEE:

.....(name).....  
.....(address).....

ATTORNEY FOR EMPLOYEE:

.....(name).....  
.....(address).....

CLAIMANT:

.....(name).....  
.....(address).....

ATTORNEY FOR CLAIMANT:

.....(name).....  
.....(address).....

EMPLOYER:

.....(name).....  
.....(address).....

ATTORNEY FOR EMPLOYER/CARRIER:

.....(name).....  
.....(address).....

CARRIER (SERVICING AGENT):

.....(name).....

CLAIM NUMBER:

DATE OF ACCIDENT:

COMMENT: Refer to rule 4.020(v) for the definition of petitioner/claimant.

UNIFORM PRETRIAL STIPULATION AND  
PRETRIAL COMPLIANCE QUESTIONNAIRE

As authorized under Florida Rule of Workers' Compensation Procedure 4.045, and as ordered by the judge of compensation claims, the parties provide the following information and make the following stipulations:

I. STIPULATIONS

1. Date of accident(s):

Claimant: \_\_\_\_\_

E/C/SA: \_\_\_\_\_

2. Place of accident(s) (or, if agreed, county/venue):

Claimant: \_\_\_\_\_

E/C/SA: \_\_\_\_\_

3. Final hearing scheduled: Mediation Date: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Place: \_\_\_\_\_

4. Employer/employee relationship on date of accident:  
E/C/SA: (circle one) yes no
  
5. Workers' compensation insurance coverage in effect on date of accident:  
E/C/SA: (circle one) yes no
  
6. Accident or occupational disease accepted as compensable:  
E/C/SA: (circle one) yes no
  
7. Injuries or conditions accepted as compensable:  
E/C/SA: (circle one) yes no
  
8. Timely notice of accident, injury, or occupational disease:  
Claimant (date notice given): \_\_\_\_\_  
E/C/SA: (circle one) yes no
  
9. Timely notice of pretrial and final hearing:  
Claimant: (circle one) yes no  
E/C/SA: (circle one) yes no
  
10. Jurisdiction of judge of compensation claims over the subject matter and parties:  
Claimant: (circle one) yes no  
E/C/SA: (circle one) yes no
  
11. Average weekly wage (AWW):  

Claimant:	(a) Base wage	_____
	(b) Fringe benefits	_____
	(c) Total	_____
	(d) Compensation rate	_____
	(e) 80% of AWW	_____
	(f) Concurrent earnings	_____
E/C/SA:	(a) Base wage	_____
	(b) Fringe benefits	_____
	(c) Total	_____
	(d) Compensation rate	_____
	(e) 80% of AWW	_____
	(f) Concurrent earnings	_____

NOTE: If there is a dispute as to the AWW, each party shall attach copies of all relevant records, and the E/C/SA within 5 working days from the date of this stipulation should submit a wage statement. If there is a dispute as to the concurrent earnings, the claimant shall attach copies of all relevant records and submit a wage statement within 5 working days from the date of this stipulation.

12. Date(s) notice(s) of denial filed:  

Claimant:	date: _____
	date: _____
	date: _____

E/C/SA: date: \_\_\_\_\_  
date: \_\_\_\_\_  
date: \_\_\_\_\_

13. Maximum medical improvement, if reached, giving date, name of physician, and impairment rating:

Claimant: date: \_\_\_\_\_  
doctor: \_\_\_\_\_  
rating: \_\_\_\_\_

E/C/SA: date: \_\_\_\_\_  
doctor: \_\_\_\_\_  
rating: \_\_\_\_\_

14. If medical benefits under section 440.13, Florida Statutes, are determined to be due or stipulated due in this document, the parties agree that the exact amounts payable to health care providers will be handled administratively and medical bills need not be placed into evidence at trial.

Claimant: (circle one) yes no

E/C/SA: (circle one) yes no

15. Medical treatment authorized: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

16. Classification and periods of time for which benefits were paid: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

17. Date claim/petition for benefits filed with division:  
Claimant: \_\_\_\_\_  
E/C/SA: (circle one) yes no

18. Attorney fee. Evidence as to amount by (circle one):  
Claimant: affidavit hearing  
E/C/SA: affidavit hearing

NOTE: If the amount is to be determined at a hearing, under rule 4.144 the verified petition for fees must be served 30 days before the hearing and the reply must be served within 20 days thereafter.

19. Other Stipulations: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## II. CLAIMS AND DEFENSES

1. Claimant: List each type, period, provider, and amount of benefits or other issues to be tried at the final hearing:

---



---



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2. Employer/Carrier/Servicing Agent: List each defense or other issue to be tried at the final hearing: \_\_\_\_\_
- 
- 
- 
- 

NOTE: THE JUDGE OF COMPENSATION CLAIMS RESERVES THE RIGHT TO IMPOSE SANCTIONS FOR FAILURE TO SPECIFICALLY ANSWER THIS STIPULATION IN GOOD FAITH. A REFERENCE TO ANOTHER PLEADING OR TO A GENERAL CLASS OF BENEFITS IS INSUFFICIENT. ANY ISSUES NOT SPECIFICALLY RAISED IN THIS SECTION WILL BE DEEMED WAIVED OR ABANDONED UNLESS GOOD CAUSE IS SHOWN.

### III. WITNESSES AND EVIDENCE

1. List witnesses to testify live, by telephone, or by deposition. Final witness lists and medical composites must be served on opposing parties and filed with the judge no later than \_\_\_\_\_ days before the final hearing. Depositions should be filed (check one) \_\_\_\_\_ at the time of the final hearing or \_\_\_\_\_ days before the final hearing.

Attach additional pages as necessary to list all witnesses.

Claimant's Witnesses:

Depo	Live	Phone	Name & Address		Expected Area of Testimony	Objection (if any)
			Of Witness			
[ ]	[ ]	[ ]	_____	_____	_____	_____
[ ]	[ ]	[ ]	_____	_____	_____	_____
[ ]	[ ]	[ ]	_____	_____	_____	_____

Employer/Carrier/Servicing Agent's Witnesses:

Depo	Live	Phone	Name & Address		Expected Area of Testimony	Objection (if any)
			Of Witness			
[ ]	[ ]	[ ]	_____	_____	_____	_____
[ ]	[ ]	[ ]	_____	_____	_____	_____
[ ]	[ ]	[ ]	_____	_____	_____	_____

2. Attach copies of all documentary evidence (including medical and rehabilitation reports and bills) to be used at the final hearing if not previously furnished to opposing party or counsel. If previously furnished, identify the documentary evidence to be introduced at the final hearing in a separate schedule attached to this form.



Each party must indicate any documents NOT stipulated into evidence without sworn proof.

Documentary Evidence Listed Below:

(a) Claimant

	E/C/SA Disagrees	E/C/SA Agrees	State Objection
(1) _____	_____	_____	_____
(2) _____	_____	_____	_____
(3) _____	_____	_____	_____

(b) Employer/Carrier/Service agent

	Claimant Disagrees	Claimant Agrees	State Objection
(1) _____	_____	_____	_____
(2) _____	_____	_____	_____
(3) _____	_____	_____	_____

3. Estimated time of final hearing. Note: judge of compensation claims normally allots \_\_\_\_\_ hours for a routine hearing.  
Claimant: \_\_\_\_\_ E/C/SA: \_\_\_\_\_ Total estimated time: \_\_\_\_\_

THE OFFICE OF THE JUDGE OF COMPENSATION CLAIMS MUST BE NOTIFIED BY TELEPHONE OR BY SEPARATE LETTER IMMEDIATELY IF THE FINAL HEARING WILL REQUIRE MORE THAN \_\_\_\_\_ HOUR(S).

4. Does either party request additional mediation? (circle one)  
Claimant: yes no E/C/SA: yes no

5. Does either party agree to provide a court reporter? (circle one)  
Claimant: yes no E/C/SA: yes no  
Name of court reporter: \_\_\_\_\_

IV. ATTORNEYS' CERTIFICATE AND MOTION

We certify that we have personally discussed the pretrial stipulations and the issues raised by the petition and have been unable to resolve the issues.

Under section 440.29(4), Florida Statutes, we, .....(names)....., move into evidence all medical reports of authorized physicians exchanged at the time of the pretrial hearing or served on opposing counsel at least 30 days before the final hearing.

\_\_\_\_\_  
Claimant

Date: \_\_\_\_\_

\_\_\_\_\_  
Attorney for Claimant  
.....(address).....  
.....(telephone number).....  
Florida Bar No. ....

Date: \_\_\_\_\_

\_\_\_\_\_  
Employer/Carrier/Servicing Agent

Date: \_\_\_\_\_

\_\_\_\_\_  
Attorney for Employer/Carrier/Servicing Agent  
.....(address).....  
.....(telephone number).....  
Florida Bar No. ....

Date: \_\_\_\_\_

NOTE: CERTIFICATION OF SERVICE. If the completed stipulation is hand delivered, mailed, or delivered by facsimile machine, a certificate of service to the parties as provided for under Florida Rule of Workers' Compensation Procedure 4.030(c) should be completed before filing. If the following optional order approving the stipulation is used, the certificate of service will be signed and mailed, hand delivered, or delivered by facsimile machine by the assistant to the judge of compensation claims.

V. PRETRIAL ORDER (optional)

1. All depositions that are to be considered by the judge and received into evidence must be filed

\_\_ days before the final hearing or  
\_\_ at the time of the final hearing,

unless waived by the judge.

2. On the motion of one or more parties, all medical reports of authorized physicians exchanged at the time of the pretrial hearing or served on opposing counsel at least 30 days before the final hearing and filed with the judge accordingly are admitted into evidence. All such medical composites shall be tabulated and indexed. The parties are urged to provide the judge with a single composite.

3. The above stipulations of the parties are accepted and approved by the undersigned.

4. The final hearing is scheduled as noted above.

DONE AND ORDERED in (city) \_\_\_\_\_, (county) \_\_\_\_\_, Florida, on .....(date).....

\_\_\_\_\_  
Judge of Compensation Claims

I CERTIFY that a copy of this stipulation was mailed, hand delivered, or delivered by facsimile machine to the above-named parties and counsel on .....(date).....

\_\_\_\_\_  
Assistant to the Judge of Compensation Claims

**(b) Form for Supplemental Stipulations and Final Witness List.**

STATE OF FLORIDA  
DEPARTMENT OF LABOR AND EMPLOYMENT SECURITY  
OFFICE OF THE JUDGE OF COMPENSATION CLAIMS  
DISTRICT .....(district number).....

EMPLOYEE:

.....(name).....  
.....(address).....

ATTORNEY FOR EMPLOYEE:

.....(name).....  
.....(address).....

CLAIMANT:

[If other than Employee.]

.....(name).....  
.....(address).....

ATTORNEY FOR CLAIMANT:

.....(name).....  
.....(address).....

EMPLOYER:

.....(name).....  
.....(address).....

ATTORNEY FOR EMPLOYER/CARRIER:

.....(name).....  
.....(address).....

CARRIER (SERVICING AGENT):

.....(name).....  
.....(address).....

CLAIM NUMBER:

DATE OF ACCIDENT:

SUPPLEMENTAL STIPULATIONS AND FINAL WITNESS LISTS

The pretrial stipulation and pretrial questionnaire is hereby supplemented as follows:

I. STIPULATIONS

1. \_\_\_\_\_ 2. \_\_\_\_\_  
\_\_\_\_\_

II. WITNESSES & EVIDENCE

1. The following additional witnesses will testify live, by telephone, or by deposition (check one only):

Claimant's Witnesses:

Depo	Live	Phone	Name & Address Of Witness	Expected Area of Testimony	Objection (if any)
[ ]	[ ]	[ ]	_____	_____	_____
[ ]	[ ]	[ ]	_____	_____	_____
[ ]	[ ]	[ ]	_____	_____	_____

Employer/Carrier/Servicing Agent's Witnesses:

Name & Address	Objection
----------------	-----------

Depo	Live	Phone	Of Witness	Expected Area of Testimony	(if any)
[ ]	[ ]	[ ]	_____	_____	_____
[ ]	[ ]	[ ]	_____	_____	_____
[ ]	[ ]	[ ]	_____	_____	_____

2. Additional Documentary Evidence Listed Below:

(a) Claimant

	E/C/SA Disagrees	E/C/SA Agrees	State Objection
(1) _____	_____	_____	_____
(2) _____	_____	_____	_____
(3) _____	_____	_____	_____

(b) Employer/Carrier/Service agent

	Claimant Disagrees	Claimant Agrees	State Objection
(1) _____	_____	_____	_____
(2) _____	_____	_____	_____
(3) _____	_____	_____	_____

\_\_\_\_\_  
Claimant

Date: \_\_\_\_\_

\_\_\_\_\_  
Attorney for Claimant  
.....(address).....  
.....(telephone number).....  
Florida Bar No. ....

Date: \_\_\_\_\_

\_\_\_\_\_  
Employer/Carrier/Service Agent

\_\_\_\_\_  
Attorney for Employer/Carrier/Service Agent  
.....(address).....  
.....(telephone number).....  
Florida Bar No. ....

NOTE: CERTIFICATION OF SERVICE. If the completed stipulation is hand delivered, mailed, or delivered by facsimile machine, a certificate of service to the parties as provided for under Florida Rules of Workers' Compensation Procedure 4.030(c) should be completed before filing. If the following optional order approving the stipulation is used, the certificate of service will be signed by and mailed, hand delivered, or delivered by facsimile machine by the assistant to the judge of compensation claims.

ORDER (optional)

The above pretrial stipulation and pretrial compliance questionnaire is approved and accepted.

DONE AND ORDERED in (city) \_\_\_\_\_, (county) \_\_\_\_\_, Florida, on .....(date).....

---

Judge of Compensation Claims

I CERTIFY that a copy of this stipulation was mailed, hand delivered, or delivered by facsimile machine to the above-named parties and counsel on .....(date).....

---

Assistant to the Judge of Compensation Claims

**Committee Notes**

**2000 Amendment.** Brings the pretrial form into compliance with the relevant rules of procedure.

**FORM 4.9105. CERTIFICATE OF NOTARY PUBLIC**

Certificate of Notary Public

The undersigned hereby certifies that:

1. I am a notary public or officer authorized to administer oaths in this state.
2. My commission number, expiration date, and seal are given and affixed below (type or stamp requested information).
3. On .....(date)....., the witness, .....(name of witness)....., who (is personally known to me) (produced the following identification: \_\_\_\_\_) did take an oath under penalty of perjury for the purpose of giving sworn testimony at the deposition or hearing in this cause.
4. This certificate is being provided in compliance with Florida Rule of Workers' Compensation Procedure 4.055(d)(3), Discovery, or 4.075(f)(3), Prosecution of Claim and Petition for Benefits before Judge.

Dated at .....(city)....., ..... County, .....(state)....., on .....(date).....

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Print or type name

**FORM 4.911. ORDERS APPROVING  
SETTLEMENT OF  
PROSPECTIVE BENEFITS**

**(a) Settlements Under Sections 440.20(11)(a)  
and (c), Florida Statutes.**

[For caption and style of pleadings, see Form 4.901.]

**ORDER FOR RELEASE FROM LIABILITY FOR  
ALL WORKERS' COMPENSATION BENEFITS  
UNDER SECTION 440.20(11)(a)(1994), FLORIDA  
STATUTES**

The parties jointly petition for an order approving a stipulation for settlement under section 440.20(11)(a), Florida Statutes. Following review of the contents of the stipulation and supporting evidence, including the sworn statement of the employee (petitioner/claimant) incorporated into the stipulation, the following findings are made:

1. All requirements of section 440.20(11)(a), Florida Statutes, and Florida Rule of Workers' Compensation Procedure 4.143 have been complied with.
2. The employee (petitioner/claimant) fully understands the terms, conditions, consideration for, and consequences of the proposed settlement.
3. The employer/carrier/servicing agent filed a written notice of denial within 120 days after the date of the injury.
4. The payment of attorney fees as set forth in the joint petition and stipulation for settlement is supported by the evidence and is in compliance with the requirements of chapter 440, Florida Statutes.
5. The proposed settlement is not in excess of the value of benefits the employee would be entitled to receive under chapter 440, Florida Statutes.
6. There is a bona fide justifiable controversy as to the legal and medical compensability of the claimed injury or alleged accident.
7. The proposed settlement will definitely aid in the rehabilitation of the employee or otherwise is

clearly in the best interests of all parties.

8. These findings are limited to matters included within the jurisdiction of the Judge of Compensation Claims under chapter 440, Florida Statutes. The undersigned Judge of Compensation Claims makes no findings regarding the legal sufficiency or reasonableness of any other matters that may be included in the stipulation in support of the Joint Petition in this case.

**IT IS ORDERED AND ADJUDGED:**

A. The joint petition and supporting stipulation for settlement are approved and the parties are ordered to comply with the provisions of those documents.

B. On payment of the consideration set forth in the joint petition and supporting stipulation for settlement, the liability of the employer and its carrier (servicing agent) for the payment or provision of any class of benefits including medical benefits payable under the Florida Workers' Compensation Law because of the alleged industrial accident and injury referred to in this order is fully and forever discharged and released.

C. This order shall not be subject to modification or review under section 440.28, Florida Statutes.

DONE AND ORDERED in Chambers,

\_\_\_\_\_  
Judge of Compensation Claims

THIS IS TO CERTIFY that the above order was entered in the office of the Judge of Compensation Claims and a copy was served by U.S. Mail on each party and counsel at the addresses listed above on .....(date).....

\_\_\_\_\_  
Assistant to the Judge of Compensation Claims

**(b) Settlements Under Section 440.20(11)(b),  
Florida Statutes (1994).**

[For caption and style of pleadings, see form 4.901.]

ORDER FOR RELEASE FROM LIABILITY FOR  
PAYMENTS OF WORKERS' COMPENSATION  
UNDER SECTION 440.20(11)(b), FLORIDA  
STATUTES (1994)

The parties jointly petition for an order approving a stipulation for settlement under section 440.20(11)(b), Florida Statutes. On review of the contents of the stipulation and supporting evidence, including the sworn statement of the employee (petitioner/claimant) incorporated into the stipulation, the following findings are made:

1. All requirements of section 440.20(11)(b), Florida Statutes, and Florida Rule of Workers' Compensation Procedure 4.143 have been complied with.
2. The employee (petitioner/claimant) fully understands the terms, conditions, consideration for, and consequences of the proposed settlement.
3. The employer has adequate notice of these proceedings.
4. The injured employee has attained maximum medical improvement.
5. The payment of attorney fees as set forth in the joint petition and stipulation for settlement is supported by the evidence and is in compliance with the requirements of chapter 440, Florida Statutes.
6. The proposed settlement is not in excess of the value of benefits the employee would be entitled to receive under chapter 440, Florida Statutes.
7. The proposed settlement definitely will aid in the rehabilitation of the injured employee or otherwise is clearly in the best interests of all parties.
8. These findings are limited to matters included within the jurisdiction of the Judge of Compensation Claims under chapter 440, Florida Statutes. The undersigned Judge of Compensation Claims makes no findings regarding the legal sufficiency or reasonableness of any other matters that may be included in the stipulation in support of the Joint Petition in this case.

IT IS ORDERED AND ADJUDGED:

A. The stipulation in support of the joint petition for settlement is approved and the parties are ordered to comply with its provisions.

B. On payment of the consideration set forth in the joint petition and supporting stipulation for settlement, the liability of the employer and its carrier (servicing agent) for the payment or provision of any class of benefits including medical benefits payable under the Florida Workers' Compensation Law because of the alleged industrial accident and injury referred to in this order is fully and forever discharged and released.

C. This order shall not be subject to modification or review under section 440.28, Florida Statutes.

DONE AND ORDERED in Chambers,

\_\_\_\_\_  
Judge of Compensation Claims

THIS IS TO CERTIFY that the above order was entered in the office of the Judge of Compensation Claims and a copy was served by U.S. Mail on each party and counsel at the addresses listed above on .....(date).....

\_\_\_\_\_  
Assistant to the Judge of Compensation Claims

**(c) Settlements Under Section 440.20(11)(b), Florida Statutes (1994), in which Right to Future Medical Benefits Is Left Open.**

[For caption and style of pleadings, see form 4.901.]

ORDER FOR RELEASE FROM LIABILITY FOR  
PAYMENTS OF WORKERS' COMPENSATION  
UNDER SECTION 440.20(11)(b), FLORIDA  
STATUTES (1994) RIGHT TO FUTURE MEDICAL  
BENEFITS LEFT OPEN

The parties jointly petition for an order approving a stipulation or settlement under section 440.20(11)(b), Florida Statutes. On review of the



contents of the stipulation and supporting evidence, including the sworn statement of the employee (petitioner/claimant) incorporated into the stipulation, the following findings are made:

1. All requirements of section 440.20(11)(b), Florida Statutes, and Florida Rule of Workers' Compensation Procedure 4.143 have been complied with.

2. The employee (petitioner/claimant) fully understands the terms, conditions, consideration for, and consequences of the proposed settlement.

3. The employer has adequate notice of these proceedings.

4. The injured employee has attained maximum medical improvement.

5. The payment of attorney fees as set forth in the joint petition and stipulation for settlement is supported by the evidence and is in compliance with the requirements of chapter 440, Florida Statutes.

6. The proposed settlement is not in excess of the value of benefits the employee would be entitled to receive under chapter 440, Florida Statutes.

7. The proposed settlement definitely will aid in the rehabilitation of the injured employee or otherwise is clearly in the best interests of all parties.

8. These findings are limited to matters included within the jurisdiction of the Judge of Compensation Claims under chapter 440, Florida Statutes. The undersigned Judge of Compensation Claims makes no findings regarding the legal sufficiency or reasonableness of any other matters that may be included in the stipulation in support of the Joint Petition in this case.

IT IS ORDERED AND ADJUDGED:

A. **Approval.** The stipulation in support of the joint petition for settlement is approved, and the parties are ordered to comply with its provisions.

B. **Release.** On payment of the consideration set forth in the joint petition and supporting stipulation for settlement, the liability of the employer

and its carrier (servicing agent) for the payment or provision of any class of benefits except medical benefits payable under the Florida Workers' Compensation Law because of the alleged industrial accident and injury referred to in this order is fully and forever discharged and released.

(Complete only one of the following two paragraphs; strike through the one that is not applicable.)

C. **Limited Liability for Medical Benefits.** The employer and its carrier (servicing agent) shall remain responsible for medical benefits due the employee on account of the industrial injury for \_\_\_\_\_ (months) (years) from the date of this order, after which the liability of the employer/(carrier)/(servicing agent) for any further medical benefits shall be fully and forever discharged and released without further order.

OR

C. **Continuing Liability for Medical Benefits.** The responsibility of the employer and its carrier (or servicing agent) for future medical expenses remains as it now is for the time and in the manner provided by law.

D. **Modification.** This order shall not be subject to modification or review under section 440.28, Florida Statutes.

DONE AND ORDERED in Chambers,

\_\_\_\_\_  
Judge of Compensation Claims

THIS IS TO CERTIFY that the above order was entered in the office of the Judge of Compensation Claims and a copy was served by U.S. Mail on each party and counsel at the addresses listed above on .....(date).....

\_\_\_\_\_  
Assistant to the Judge of Compensation Claims

(d) **Settlements Under Sections 440.20(11)(b) and (c), Florida Statutes (1994), in which Right to Compensation Benefits Has Been Settled Previously.**

[For caption and style of pleadings, see form 4.901]

ORDER FOR RELEASE FROM LIABILITY FOR  
MEDICAL BENEFITS PAYABLE UNDER  
SECTION 440.13, FLORIDA STATUTES, AS  
AUTHORIZED BY SECTIONS 440.20(11)(b) and  
(c), FLORIDA STATUTES (1994)

The parties jointly petition for an order approving a stipulation for settlement under sections 440.20(11)(b) and (c), Florida Statutes (1994), which permit settlement of all claims not previously settled regardless of the date of accident. On \_\_\_\_ (date), an order was entered in this cause releasing the employer/carrier/servicing agent from any further liability for indemnity benefits payable on account of disability; however, as required by the law in effect at the time, the employer/carrier/servicing agent continued to be liable to provide medical benefits to the injured employee. For promised additional consideration as set forth in the stipulation in support of the joint petition, the parties have now agreed to settle the employee's (petitioner's/claimant's) right to receive any further medical benefits under the Florida Workers' Compensation Law. On review of the contents of the stipulation and supporting evidence, including the sworn statement of the employee (petitioner/claimant) incorporated into the stipulation, the following findings are made:

1. All requirements of section 440.20(11)(b), Florida Statutes, and Florida Rule of Workers' Compensation Procedure 4.143 have been complied with.

2. The employee (petitioner/claimant) fully understands the terms, conditions, consideration for, and consequences of the proposed settlement of future medical benefits.

3. The employer has adequate notice of these proceedings.

4. The injured employee has attained maximum medical improvement.

5. The additional consideration paid by the employer/carrier/servicing agent is adequate and reasonable to compensate the injured employee for releasing his or her right to future medical benefits

and definitely will aid in the rehabilitation of the injured employee or otherwise is clearly in the best interests of all parties.

6. The proposed settlement is not in excess of the value of benefits the employee would be entitled to receive under chapter 440, Florida Statutes.

7. The payment of attorney fees as set forth in the joint petition stipulation for settlement is supported by the evidence and is in compliance with the requirements of chapter 440, Florida Statutes.

8. These findings are limited to matters included within the jurisdiction of the Judge of Compensation Claims under chapter 440, Florida Statutes. The undersigned Judge of Compensation Claims makes no findings regarding the legal sufficiency or reasonableness of any other matters that may be included in the stipulation in support of the Joint Petition in this case.

IT IS ORDERED AND ADJUDGED:

A. The stipulation in support of the joint petition for settlement is approved, and the parties are ordered to comply with its provisions.

B. On payment of the additional consideration set forth in the joint petition and supporting stipulation for settlement, the liability of the employer and its carrier (servicing agent) for the payment or provision of medical benefits under section 440.13, Florida Statutes, because of the industrial accident and injury referred to in this order is fully and forever discharged and released.

C. This order shall not be subject to modification or review under section 440.28, Florida Statutes.

DONE AND ORDERED in Chambers,

\_\_\_\_\_  
Judge of Compensation Claims

THIS IS TO CERTIFY that the above order was entered in the office of the Judge of Compensation

Claims and a copy was served by U.S. Mail on each party and counsel at the addresses listed above on .....(date).....

Assistant to the Judge of Compensation Claims

**FORM 4.912. NOTICE OF ESTIMATED COST OF PREPARATION OF RECORD ON APPEAL**

STATE OF FLORIDA  
DEPARTMENT OF LABOR AND EMPLOYMENT SECURITY  
JUDGE OF COMPENSATION CLAIMS DISTRICT

NOTICE OF ESTIMATED COST OF PREPARATION OF RECORD ON APPEAL

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
APPELLANT

c/o \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
ATTORNEY FOR APPELLANT

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
APPELLEE

CLAIM NUMBER:  
DATE OF ACCIDENT:  
CASE NUMBER:

YOU ARE NOTIFIED that the cost of the preparation of the record in the above-styled cause is in the approximate sum of \$\_\_\_\_\_. Please make check payable to \_\_\_\_\_ c/o the undersigned judge of compensation claims.

Your attention is directed to Florida Rule of Workers' Compensation Procedure 4.180(e), which provides:

[Editor's note: Rule 4.180 was deleted effective January 23, 1997, in *In re Amendments to the Florida Rules of Workers' Compensation Procedure*, 686 So.2d 1357 (Fla. 1997).]

(e) **Costs.**

(1) **Notice of Estimated Costs.** Within 5 days after the contents of the record have been determined under these rules, the judge shall notify the appellant of the estimated cost of preparing the record. The judge shall also notify the division of the estimated record costs if the appellant files a verified petition to be relieved of costs and a sworn financial affidavit in substantially the same form as form 4.9125.

(2) **Deposit of Estimated Costs.** Within 15 days after the notice of estimated costs is served, the appellant shall deposit a sum of money equal to the estimated costs with the judge.

(3) **Failure to Deposit Costs.** If the appellant fails to deposit the estimated costs within the time prescribed, the judge shall notify the district court, which may dismiss the appeal.

(4) **State Agencies: Waiver of Costs.** Any self-insured state agency, including the Division of Workers' Compensation or the Special Disability Trust Fund, need not deposit the estimated costs.

Your attention is called further to section 440.25(5)(b), Florida Statutes, and rule 4.180(f)(2), which provides:

(f) **Relief From Filing Fees and Costs: Indigency.**

(2) **Costs of Preparation of Record.**

(A) **Authority.** An appellant may be relieved in whole or in part from the costs of the preparation of the record on appeal by filing with the judge a verified petition to be relieved of costs and a copy of the designation of the record on appeal. The verified petition to be relieved of costs shall contain a sworn financial affidavit as described in subdivision (D) below in a form substantially the same as form 4.9125.

(B) **Time.** The verified petition to be relieved of costs must be filed within 15 days after service of the notice of estimated costs. A verified petition filed before the date of service of the notice of estimated costs shall be deemed not timely.

(C) **Verified Petition: Contents.** The verified petition shall contain a request by the appellant to be relieved of costs due to insolvency. The petition also shall include a statement by the appellant's attorney or the appellant, if not represented by an attorney, that the appeal was filed in good faith and the district court reasonably could find reversible error in the record and shall state with particularity the specific legal and factual grounds for that opinion.

(D) **Sworn Financial Affidavit: Contents.** With the verified petition to be relieved of costs, the appellant shall file a sworn financial affidavit listing income and assets, including marital income and assets, and expenses and liabilities. The sworn financial affidavit shall be substantially the same as form 4.9125.

(E) **Verified Petition and Sworn Financial Affidavit: Service.** The appellant shall serve a copy of the verified petition to be relieved of costs, including the sworn financial affidavit, on all interested parties, including the division, the office of general counsel of the department, and the clerk of the district court.

(F) **Hearing on Petition to be Relieved of Costs.** After giving 15 days' notice to the division and all parties, the judge shall promptly hold a hearing and rule on the merits of the petition to be relieved of costs. However, if no objection to the petition is filed by the division or a party within 20 days after the petition is served, the judge may enter an order on the merits of the petition without a hearing.

(G) **Extension of Appeal Deadlines: Petition Granted.** If the petition to be relieved of the entire cost of the preparation

of the record on appeal is granted, the 60-day period allowed under these rules for the preparation of the record shall begin to run from the date of the order granting the petition.

(H) **Extension of Appeal Deadlines: Petition Denied.** If the petition to be relieved of the cost of the record is denied or only granted in part, the petitioner shall deposit the estimated costs with the judge within 15 days from the date the order denying the petition is entered. The 60-day period allowed under these rules for the preparation of the record shall begin from the date the estimated cost is deposited with the judge.

(I) **Payment of Cost for Preparation of Record by Administration Trust Fund.** If the petition to be relieved of costs is granted, the judge may order the Workers' Compensation Administration Trust Fund to pay the cost of the preparation of the record on appeal pending the final disposition of the appeal.

**(J) Reimbursement of Administration Trust Fund If Appeal Is Successful.** If the Administration Trust Fund has paid the costs of the preparation of the record and the appellant prevails at the conclusion of the appeal, the appellee shall reimburse the Fund the costs paid within 30 days of the mandate issued by the district court or supreme court under these rules.

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Judge of Compensation Claims

I certify that a copy of this notice has been furnished to the appellant, appellant's attorney, appellee, division, and the District Court of Appeal, First District, by mail on .....(date).....

---

Assistant to the  
Judge of Compensation Claims

**FORM 4.9125. FINANCIAL AFFIDAVIT IN SUPPORT OF VERIFIED PETITION  
FOR RELIEF FROM COSTS**

STATE OF FLORIDA  
DEPARTMENT OF LABOR AND EMPLOYMENT SECURITY  
OFFICE OF THE JUDGE OF COMPENSATION CLAIMS  
DISTRICT .....(district number).....

STATE OF FLORIDA, DEPARTMENT OF LABOR  
AND EMPLOYMENT SECURITY,  
DIVISION OF WORKERS' COMPENSATION

ATTORNEY FOR STATE:  
.....(name).....  
.....(address).....

CLAIMANT:  
.....(name).....  
.....(address).....

ATTORNEY FOR CLAIMANT  
.....(name).....  
.....(address).....

EMPLOYER:  
.....(name).....  
.....(address).....

ATTORNEY FOR EMPLOYER/CARRIER/  
SERVICING AGENT:  
.....(name).....  
.....(address).....

CARRIER/SERVICING AGENT:  
.....(name).....  
.....(address).....

CLAIM NUMBER:  
  
DATE OF ACCIDENT:

FINANCIAL AFFIDAVIT

STATE OF FLORIDA

COUNTY OF .....

BEFORE ME, this day personally appeared \_\_\_\_\_, who being duly sworn, deposes and says that the following information is true and correct according to his/her best knowledge and belief:

ITEM 1: EMPLOYMENT AND MONTHLY INCOME

OCCUPATION: \_\_\_\_\_

EMPLOYED BY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

SOCIAL SECURITY NO: \_\_\_\_\_

PAY PERIOD: \_\_\_\_\_

RATE OF PAY: \_\_\_\_\_

AVERAGE GROSS MONTHLY INCOME FROM EMPLOYMENT \$ \_\_\_\_\_

Bonuses, commissions, allowances, overtime, tips, and similar payments \$ \_\_\_\_\_

Business income from sources such as self-employment, partnership, close corporations, and/or independent contracts (gross receipts minus ordinary and necessary expenses required to produce income) \$ \_\_\_\_\_

Disability benefits \$ \_\_\_\_\_

Workers' compensation \$ \_\_\_\_\_

Unemployment compensation \$ \_\_\_\_\_

Pension, retirement, annuity payments \$ \_\_\_\_\_

Social Security benefits \$ \_\_\_\_\_

Spousal support received from previous marriage \$ \_\_\_\_\_

Interest and dividends \$ \_\_\_\_\_

Rental income (gross receipts minus ordinary and necessary expenses required to produce income) \$ \_\_\_\_\_

Income from royalties, trusts, or estates \$ \_\_\_\_\_

Reimbursed expenses and in kind payments to the extent that they reduce personal living expenses \$ \_\_\_\_\_

Gains derived from dealing in property (not including nonrecurring gains)	\$ _____
Itemize any other income of a recurring nature	\$ _____
<b>TOTAL MONTHLY INCOME</b>	<b>\$ _____</b>
<b>LESS DEDUCTIONS:</b>	
Federal, state, and local income taxes (corrected for filing status and actual number of withholding allowances)	\$ _____
FICA or self-employment tax (annualized)	\$ _____
Mandatory union dues	\$ _____
Mandatory retirement	\$ _____
Health insurance payments	\$ _____
Court-ordered support payments for children actually paid	\$ _____
<b>TOTAL DEDUCTIONS</b>	<b>\$ _____</b>
<b>TOTAL MONTHLY INCOME</b>	<b>\$ _____</b>
<b>LESS TOTAL DEDUCTIONS</b>	<b>\$ _____</b>
<b>NET MONTHLY INCOME</b>	<b>\$ _____</b>

DOES ANYONE CONTRIBUTE TO YOUR INCOME OR HELP PAY YOUR EXPENSES (SPOUSE, ROOMMATE, ETC.)? YES \_\_\_\_\_ NO \_\_\_\_\_

IF "YES," COMPLETE THE FOLLOWING:

Name of Contributor	Relationship to Claimant	Total Monthly Dollar Amount of Contribution
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
	<b>TOTAL</b>	<b>\$ _____</b>

ITEM 2: HOUSEHOLD:

AVERAGE MONTHLY EXPENSES

Mortgage or rent payments \$ \_\_\_\_\_

Property taxes and insurance \$ \_\_\_\_\_

Electricity \$ \_\_\_\_\_

Water, garbage, and sewer \$ \_\_\_\_\_

Telephone \$ \_\_\_\_\_

Fuel oil or natural gas \$ \_\_\_\_\_

Pest control \$ \_\_\_\_\_

Food and grocery items \$ \_\_\_\_\_

Other:  
\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

AUTOMOBILE:

Loan payment \$ \_\_\_\_\_

Auto tags and license \$ \_\_\_\_\_

Insurance \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

INSURANCE:

Health \$ \_\_\_\_\_

Life \$ \_\_\_\_\_

Other:  
\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_



OTHER EXPENSES NOT LISTED ABOVE:

\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_

TOTAL HOUSEHOLD EXPENSES: \$ \_\_\_\_\_

PAYMENTS TO CREDITORS:

TO WHOM:	BALANCE DUE:	MONTHLY PAYMENT:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

TOTAL MONTHLY PAYMENTS TO CREDITORS: \$ \_\_\_\_\_

TOTAL MONTHLY EXPENSES: \$ \_\_\_\_\_

SUMMARY OF INCOME AND EXPENSES:

TOTAL MONTHLY NET INCOME \$ \_\_\_\_\_

MONTHLY CONTRIBUTION-OTHERS \$ \_\_\_\_\_

SUBTOTAL \$ \_\_\_\_\_

LESS TOTAL MONTHLY EXPENSES \$ \_\_\_\_\_

BALANCE (+ OR ! ) \$ \_\_\_\_\_

ITEM 3: ASSETS (If jointly owned, indicate your share and ownership interest of others.)

Description	Value
Cash (on hand or in banks)	\$ _____

Stocks/bonds/notes \$ \_\_\_\_\_

Real estate:

Home \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

Automobiles:

Make	Model	Year	Value
------	-------	------	-------

_____	_____	_____	\$ _____
-------	-------	-------	----------

_____	_____	_____	\$ _____
-------	-------	-------	----------

_____	_____	_____	\$ _____
-------	-------	-------	----------

Money held in escrow by your attorney on your behalf \$ \_\_\_\_\_

Other personal property:

Contents of home \$ \_\_\_\_\_

Jewelry \$ \_\_\_\_\_

Life insurance/cash surrender value \$ \_\_\_\_\_

Other assets:

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

TOTAL ASSETS: \$ \_\_\_\_\_

ITEM 4: LIABILITIES

(if joint, allocate equally and indicate your share only)

Creditor	Security	Balance
----------	----------	---------

_____	_____	\$ _____
-------	-------	----------

_____	_____	\$ _____
-------	-------	----------

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_

TOTAL LIABILITIES: \$ \_\_\_\_\_

SUMMARY OF ASSETS AND LIABILITIES:

TOTAL ASSETS \$ \_\_\_\_\_  
LESS TOTAL LIABILITIES \$ \_\_\_\_\_  
NET WORTH \$ \_\_\_\_\_

\_\_\_\_\_  
AFFIANT/APPELLANT

SWORN TO and SUBSCRIBED before me on .....(date)....., by \_\_\_\_\_

\_\_\_\_\_  
(Signature of Notary Public — State of Florida)

\_\_\_\_\_  
(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known \_\_\_\_\_ OR Produced Identification \_\_\_\_\_ Type of Identification Produced \_\_\_\_\_

CERTIFICATE OF SERVICE

I CERTIFY that a true and correct copy of the above Financial Affidavit has been furnished by \_\_\_\_\_ on .....(date)....., to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Appellant/Appellant's Attorney

**FORM 4.913. SUBPOENA**

**(a) Subpoena for Deposition for Issuance by Judge of Compensation Claims.**

STATE OF FLORIDA  
OFFICE OF THE JUDGE OF COMPENSATION CLAIMS  
DISTRICT .....(district number)....

EMPLOYEE/PETITIONER

ATTORNEY FOR EMPLOYEE

.....(name)....  
.....(address)....  
.....(city, state, zip code)....

.....(name)....  
.....(address)....  
.....(city, state, zip code)....

EMPLOYER/CARRIER/  
SERVICING AGENT

ATTORNEY FOR EMPLOYER/CARRIER/  
SERVICING AGENT

.....(name)....  
.....(address)....  
.....(city, state, zip code)....

.....(name)....  
.....(address)....  
.....(city, state, zip code)....

**SUBPOENA FOR DEPOSITION**

THE STATE of FLORIDA

TO: .....(name of person being subpoenaed)....  
.....(address of person)....

YOU ARE COMMANDED to appear before a person authorized by law to take depositions at .....(address)....., in .....(city)....., Florida, on .....(date)....., at \_\_\_o'clock \_\_\_m. (Central) (Eastern) Time for the taking of your deposition. This facility meets all current requirements for handicap accessibility; however, if you require any special additional accommodations, please advise the office of the attorney named below at once so that arrangements can be made. Also, if you are unable to clearly communicate in the English language, please advise so that arrangements for a translator can be made. **IF YOU FAIL TO APPEAR, YOU MAY BE HELD IN CONTEMPT OF COURT.**

You are subpoenaed to appear at the request of the attorney for the .....(petitioner/employer/carrier)....., .....(name of attorney)....., .....(telephone number)....., and, unless excused from this subpoena by this attorney or the Judge, the Honorable .....(name of judge)....., you must respond as directed. Any questions should be directed to this attorney at the address listed above. You may wish to call the office of this attorney the day before to determine if your appearance still is required.

.....(name of person or official serving subpoena)....  
.....(title, if any)....  
.....(date)....

.....(signature of judge).....  
\_\_\_\_\_  
JUDGE OF COMPENSATION CLAIMS  
.....(name of judge)....  
.....(address)....  
.....(telephone number)....

**(b) Subpoena for Deposition for Issuance by Attorney of Record.**

STATE OF FLORIDA  
OFFICE OF THE JUDGE OF COMPENSATION CLAIMS  
DISTRICT .....(district number).....

EMPLOYEE/PETITIONER

.....(name).....  
.....(address).....  
.....(city, state, zip code).....

ATTORNEY FOR EMPLOYEE

.....(name).....  
.....(address).....  
.....(city, state, zip code).....

EMPLOYER/CARRIER/  
SERVICING AGENT

.....(name).....  
.....(address).....  
.....(city, state, zip code).....

ATTORNEY FOR EMPLOYER/  
CARRIER/SERVICING AGENT

.....(name).....  
.....(address).....  
.....(city, state, zip code).....

SUBPOENA FOR DEPOSITION

THE STATE OF FLORIDA

TO: .....(name of person being subpoenaed).....  
.....(address of person).....

YOU ARE COMMANDED to appear before a person authorized by law to take depositions at .....(address)....., in .....(city)....., Florida, on .....(date)....., at \_\_\_ o'clock \_\_\_m. (Central) (Eastern) Time for the taking of your deposition. This facility meets all current requirements for handicap accessibility; however, if you require any special additional accommodations, please advise the office of the attorney named below at once so that arrangements can be made. Also, if you are unable to clearly communicate in the English language, please advise so that arrangements for a translator can be made. IF YOU FAIL TO APPEAR, YOU MAY BE HELD IN CONTEMPT OF COURT.

As now authorized under Florida Rule of Civil Procedure 1.410, you are subpoenaed to appear by the following attorney under the direction of the Judge of Compensation Claims and, unless excused from this subpoena by the undersigned attorney or the Judge, the Honorable ..... (name of judge)....., you shall respond as directed. Any questions should be directed to this attorney at the address listed below. You may wish to call the office of this attorney the day before to determine if your appearance still is required.

.....(name of person or official serving subpoena).....  
.....(title, if any).....  
.....(date).....

.....(signature of attorney).....  
.....(name of attorney).....  
Attorney for \_\_\_\_\_  
.....(address).....  
.....(telephone number).....  
.....(Florida Bar No.).....

(c) **Subpoena *Duces Tecum* for Deposition for Issuance by Judge of Compensation Claims.**

STATE OF FLORIDA  
OFFICE OF THE JUDGE OF COMPENSATION CLAIMS

DISTRICT .....(district number).....

EMPLOYEE/PETITIONER

ATTORNEY FOR EMPLOYEE

.....(name).....  
.....(address).....  
.....(city, state, zip code).....

.....(name).....  
.....(address).....  
.....(city, state, zip code).....

EMPLOYER/CARRIER/  
SERVICING AGENT

ATTORNEY FOR EMPLOYER/  
CARRIER/SERVICING AGENT

.....(name).....  
.....(address).....  
.....(city, state, zip code).....

.....(name).....  
.....(address).....  
.....(city, state, zip code).....

SUBPOENA *DUCES TECUM* FOR DEPOSITION

THE STATE of FLORIDA

TO: .....(name of person being subpoenaed).....  
.....(address of person).....

YOU ARE COMMANDED to appear before a person authorized by law to take depositions at .....(address)....., in .....(city)....., Florida, on .....(date)....., at \_\_\_o'clock \_\_\_m. (Central) (Eastern) Time for the taking of your deposition in this action and to have with you at that time and place the following: \_\_\_\_\_.

This facility meets all current requirements for handicap accessibility; however, if you require any special additional accommodations, please advise the office of the attorney named above at once so that arrangements can be made. Also, if you are unable to clearly communicate in the English language, please advise so that arrangements for a translator can be made. **IF YOU FAIL TO APPEAR, YOU MAY BE HELD IN CONTEMPT OF COURT.**

You are subpoenaed to appear at the request of the attorney for the .....(petitioner/employer/carrier)....., .....(name of attorney)....., .....(telephone number)....., and, unless excused from this subpoena by this attorney or by me, the Judge of Compensation Claims, you must respond as directed. Any questions should be directed to this attorney at the address listed above. You may wish to call the office of this attorney the day before to determine if your appearance still is required.

.....(name of person or official serving subpoena).....  
.....(title, if any).....  
.....(date).....

.....(signature of judge).....  
.....(name of judge).....  
JUDGE OF COMPENSATION CLAIMS  
.....(address of judge).....  
.....(telephone number).....

(d) **Subpoena *Duces Tecum* for Deposition for Issuance by Attorney of Record.**

STATE OF FLORIDA  
OFFICE OF THE JUDGE OF COMPENSATION CLAIMS  
DISTRICT .....(district number).....

EMPLOYEE/PETITIONER

.....(name).....  
.....(address).....  
.....(city, state, zip code).....

ATTORNEY FOR EMPLOYEE

.....(name).....  
.....(address).....  
.....(city, state, zip code).....

EMPLOYER/CARRIER/  
SERVICING AGENT

.....(name).....  
.....(address).....  
.....(city, state, zip code).....

ATTORNEY FOR EMPLOYER/  
CARRIER/SERVICING AGENT

.....(name).....  
.....(address).....  
.....(city, state, zip code).....

SUBPOENA *DUCES TECUM* FOR DEPOSITION

THE STATE OF FLORIDA

TO: .....(name of person being subpoenaed).....  
.....(address of person).....

YOU ARE COMMANDED to appear before a person authorized by law to take depositions at .....(address)....., in .....(city)....., Florida, on .....(date)....., at \_\_\_ o'clock \_\_\_ m. (Central) (Eastern) Time for the taking of your deposition in this action and to have with you at that time and place the following: \_\_\_\_\_.

This facility meets all current requirements for handicap accessibility; however, if you require any special additional accommodations, please advise the office of the attorney named below at once so that arrangements can be made. Also, if you are unable to clearly communicate in the English language, please advise so that arrangements for a translator can be made. **IF YOU FAIL TO APPEAR, YOU MAY BE HELD IN CONTEMPT OF COURT.**

As now authorized under Florida Rule of Civil Procedure 1.410, you are subpoenaed to appear by the following attorney under the direction of the Judge of Compensation Claims and, unless excused from this subpoena by the undersigned attorney or the Judge, the Honorable ..... (name of judge)....., you shall respond as directed. Any questions should be directed to this attorney at the address listed below. You may wish to call the office of this attorney the day before to determine if your appearance still is required.

.....(name of person or official serving subpoena).....  
.....(title, if any).....  
.....(date).....

.....(signature of attorney).....  
.....(name of attorney).....  
Attorney for \_\_\_\_\_  
.....(address).....  
.....(telephone number).....  
.....(Florida Bar No.).....

**(e) Subpoena *Duces Tecum* Issued by Attorney of Record for Witness to Produce Records Instead of Attending Formal Deposition.**

STATE OF FLORIDA  
OFFICE OF THE JUDGE OF COMPENSATION CLAIMS

DISTRICT .....(district number).....

EMPLOYEE/PETITIONER

ATTORNEY FOR EMPLOYEE

.....(name).....  
.....(address).....  
.....(city, state, zip code).....

.....(name).....  
.....(address).....  
.....(city, state, zip code).....

EMPLOYER/CARRIER/  
SERVICING AGENT

ATTORNEY FOR EMPLOYER/  
CARRIER/SERVICING AGENT

.....(name).....  
.....(address).....  
.....(city, state, zip code).....

.....(name).....  
.....(address).....  
.....(city, state, zip code).....

SUBPOENA *DUCES TECUM* TO FURNISH RECORDS AND OTHER ITEMS  
INSTEAD OF ATTENDING FORMAL DEPOSITION

THE STATE OF FLORIDA

TO: .....(name of person being subpoenaed).....  
.....(address of person).....

YOU ARE COMMANDED to appear at .....(address)....., in .....(city)....., Florida, on .....(date)....., at \_\_\_o'clock  
\_\_\_m. (Central) (Eastern) Time and to have with you at that time and place the following: \_\_\_\_\_.

This facility meets all current requirements for handicap accessibility; however, if you require any special additional accommodations, please advise the office of the attorney named below at once so that arrangements can be made. Also, if you are unable to clearly communicate in the English language, please advise so that arrangements for a translator can be made.

The items listed above will be inspected and may be copied at that time. You may comply with this subpoena by providing legible copies of the records and items to be produced to the undersigned attorney on or before the scheduled date of production. You may require from the attorney whose name appears on this subpoena advance payment of the reasonable cost of the preparation of the copies and items furnished. Under section 440.13(4)(b), Florida Statutes (1994), the Division of Workers' Compensation sets standard copy costs for medical records of an injured employee. You may mail or deliver the copies to the undersigned attorney and thereby eliminate your appearance at the time and place specified above. You have the right to object to the subpoenaed documents or items by filing a written notice of the objections with the undersigned attorney at any time before the production deadline noted above. THIS WILL NOT BE A DEPOSITION. NO TESTIMONY WILL BE TAKEN.

As now authorized under Florida Rule of Civil Procedure 1.410, you are subpoenaed to appear by the following attorney under the direction of the Judge, the Honorable .....(name of judge)..... Unless excused from this subpoena by the undersigned attorney or the Judge, you must respond to this subpoena as directed. If you fail to: (1) appear as specified; or (2) furnish the records instead of appearing as provided above; or (3) object to this subpoena in writing, YOU MAY BE IN CONTEMPT OF COURT.

.....(signature of attorney).....  
.....(name of attorney).....  
Attorney for \_\_\_\_\_



.....(address).....  
.....(telephone number).....  
.....(Florida Bar No.).....

**(f) Subpoena for Trial for Issuance by Judge of Compensation Claims.**

STATE OF FLORIDA  
OFFICE OF THE JUDGE OF COMPENSATION CLAIMS  
DISTRICT .....(district number).....

EMPLOYEE/PETITIONER

ATTORNEY FOR EMPLOYEE

.....(name).....  
.....(address).....  
.....(city, state, zip code).....

.....(name).....  
.....(address).....  
.....(city, state, zip code).....

EMPLOYER/CARRIER/  
SERVICING AGENT

ATTORNEY FOR EMPLOYER/  
CARRIER/SERVICING AGENT

.....(name).....  
.....(address).....  
.....(city, state, zip code).....

.....(name).....  
.....(address).....  
.....(city, state, zip code).....

SUBPOENA FOR TRIAL

THE STATE OF FLORIDA

TO: .....(name of person being subpoenaed).....  
.....(address of person).....

YOU ARE COMMANDED to appear before me, .....(name of Judge)....., Judge of Compensation Claims, at my offices located at Room .....(number)....., at the .....(county)..... County Courthouse at .....(address).....in.....(city)....., Florida, at \_\_\_o'clock \_\_\_m, (Eastern)(Central) Time on ....., (date).....to testify in this action. This facility meets all current requirements for handicap accessibility; however, if you require any special additional accommodations, please advise my office at once so that arrangements can be made. Also, if you are unable to clearly communicate in the English language, please advise so that arrangements for a translator can be made. **IF YOU FAIL TO APPEAR, YOU MAY BE HELD IN CONTEMPT OF COURT.**

You have been subpoenaed to appear at the request of the attorney for the petitioner/employer/carrier, .....(name of attorney)....., .....(telephone number)....., and, unless excused from this subpoena by the attorney or by me, the Judge of Compensation Claims, you shall respond to this subpoena as directed. It is suggested that you telephone the office of the attorney the day before the hearing to confirm that your presence still is required.

.....(signature of judge).....  
.....(name of judge).....  
JUDGE OF COMPENSATION CLAIMS  
.....(address of judge).....

**(g) Subpoena for Trial for Issuance by Attorney of Record.**

STATE OF FLORIDA  
OFFICE OF THE JUDGE OF COMPENSATION CLAIMS  
DISTRICT .....(district number).....

EMPLOYEE/PETITIONER

.....(name).....  
.....(address).....  
.....(city, state, zip code).....

ATTORNEY FOR EMPLOYEE

.....(name).....  
.....(address).....  
.....(city, state, zip code).....

EMPLOYER/CARRIER/  
SERVICING AGENT

.....(name).....  
.....(address).....  
.....(city, state, zip code).....

ATTORNEY FOR EMPLOYER/  
CARRIER/SERVICING AGENT

.....(name).....  
.....(address).....  
.....(city, state, zip code).....

SUBPOENA FOR TRIAL

THE STATE OF FLORIDA

TO: .....(name of person being subpoenaed).....  
.....(address of person).....

YOU ARE COMMANDED to appear before .....(name of Judge)....., Judge of Compensation Claims, at his/her offices located at Room .....(number)....., at the .....(county)..... County Courthouse at .....(address)..... in .....(city)....., Florida, at \_\_\_o'clock \_\_\_m. (Eastern) (Central) Time on .....(date)....., to testify in this action. This facility meets all current requirements for handicap accessibility; however, if you require any special additional accommodations, please advise my office at once so that arrangements can be made. Also, if you are unable to clearly communicate in the English language, please advise so that arrangements for a translator can be made. IF YOU FAIL TO APPEAR, YOU MAY BE HELD IN CONTEMPT OF COURT.

As now authorized under Florida Rule of Civil Procedure 1.410, you are subpoenaed to appear by the following attorney under the direction of the Judge of Compensation Claims and, unless excused from this subpoena by the undersigned attorney or the Judge, the Honorable .....(name of judge)....., you must respond to this subpoena as directed. You may wish to call the office of the attorney the day before the hearing to determine if your presence still is required.

.....(name of person or official serving subpoena).....  
.....(title, if any).....  
.....(date).....

.....(signature of attorney).....  
.....(name of attorney).....  
Attorney for \_\_\_\_\_  
.....(address).....  
.....(telephone number).....  
.....(Florida Bar No.).....

**FORM 4.9135. AFFIDAVIT OF SERVICE OF SUBPOENA**

STATE OF FLORIDA  
OFFICE OF THE JUDGE OF COMPENSATION CLAIMS  
DISTRICT .....(district number).....

**AFFIDAVIT ATTESTING TO SERVICE OF WITNESS SUBPOENA  
FOR (TRIAL) (DEPOSITION)**

Before me the undersigned authority authorized to administer oaths and take acknowledgments under the laws of the State of Florida, personally appeared, .....(name of person serving subpoena)..... who, upon first being duly sworn by me, testified that (he)(she) served a copy of the attached witness subpoena for (trial) (deposition) in the case of .....(style of case )..... on ..... (name of person subpoenaed)..... by: (check one alternative)

Personally handing the original subpoena to the person named in the subpoena.

Leaving a copy of the original subpoena at the usual residence of the individual named in the subpoena with a person also residing in the same residence who is 15 years of age or older and informing that person that the subpoena is to summon the individual to testify (at a trial before the Judge of Compensation Claims) (at a deposition before a person authorized to administer oaths) on the date, time, and place designated in the subpoena.

Date and time of service: .....(month, day, year)....., at \_\_\_\_ o'clock \_\_m. (Eastern)(Central) Time.

\_\_\_\_\_  
.....(Signature of person serving subpoena and giving oath).....

SWORN TO AND SUBSCRIBED BEFORE ME ON .....(month, day, year)....., .....(name of county)..... County, State of Florida.

Method of Identification of Individual Giving Affidavit:

- Personally known to me
- Automobile driver's license with photo of individual
- Passport .....(name of country).....
- Other photo identification \_\_\_\_\_
- Other method of identification \_\_\_\_\_

Notary Seal or Stamp

\_\_\_\_\_  
Notary Public, State of Florida (signature)  
.....(print name of notary).....  
My Commission Expires: \_\_\_\_\_  
Commission Certificate No. \_\_\_\_\_

**DO NOT FILE WITH COURT UNLESS REQUESTED**

**FORM 4.914. PROOF OF CLAIM FOR SUBMISSION TO SPECIAL DISABILITY TRUST FUND**

PROOF OF CLAIM  
THE SPECIAL DISABILITY TRUST FUND  
535 JOHN KNOX ROAD  
TALLAHASSEE, FLORIDA 32399

- a. Employee's Social Security Number:
- b. Date of Accident for Which Reimbursement Is Claimed:
- c. Date of This Claim:
- d. Name of Employee:  
.....(address).....  
.....(telephone number).....
- e. Name of Employer:  
.....(address).....  
.....(telephone number).....
- f. Name of Carrier/Service Agent/Self Insured:  
.....(address).....  
.....(telephone number).....
- g. Brief summary of theory of merger, including preexisting condition claimed and explanation of how it merged with instant accident to cause payment of excess permanent compensation. State whether merger is a wage loss or a medical merger.
  - 1. Preexisting
  - 2. Subsequent
  - 3. Merger
  - 4. Excess
  - 5. Employer Knowledge
- h. Date of Maximum Medical Improvement:
- i. Date of First Payment of Permanent Benefits:
- j. Permanent Impairment Rating:
- k. Amount of Permanent Benefits Paid:
- l. January 1, 1994: Temporary Compensation/Medical:
- m. Deductible Met and Date:

PLEASE COMPLETE THE ATTACHED SCHEDULES AND FURNISH APPROPRIATE DOCUMENTATION. ONCE A COMPLETED APPLICATION IS RECEIVED, YOUR CLAIM WILL BE FILED AND PLACED IN LINE FOR REVIEW. INCOMPLETE CLAIMS WILL NOT BE PLACED IN LINE.

I hereby certify that I have made a good-faith effort to enclose all pertinent materials requested.

\_\_\_\_\_  
Attorney for Employer/Carrier/Service Agent  
.....(address).....  
.....(telephone number).....  
Florida Bar No. ....

Date \_\_\_\_\_

**FORM 4.915. UNIFORM SPECIAL DISABILITY TRUST FUND PRETRIAL STIPULATION, PRETRIAL COMPLIANCE QUESTIONNAIRE, AND ORDER**

STATE OF FLORIDA  
DEPARTMENT OF LABOR AND EMPLOYMENT SECURITY  
OFFICE OF THE JUDGE OF COMPENSATION CLAIMS  
DISTRICT .....(district number).....

EMPLOYER:  
.....(name).....  
.....(address).....

ATTORNEY FOR EMPLOYER/CARRIER:  
.....(name).....  
.....(address).....

CARRIER:  
.....(name).....  
.....(address).....

CLAIM NO:  
EMPLOYEE:  
DATE OF ACCIDENT:

vs.

SPECIAL DISABILITY TRUST FUND

Uniform Special Disability Trust Fund Pretrial Stipulation,  
Pretrial Compliance Questionnaire, and Order

As authorized under Florida Rules of Workers' Compensation Procedure 4.025 and 4.045, and as ordered by the judge of compensation claims, the parties provide the following information and make the following stipulations:

FINAL HEARING SCHEDULED:

DATE:  
TIME:  
PLACE:

**NOTE: THIS IS THE ONLY NOTICE OF FINAL HEARING YOU WILL RECEIVE.**

I. STIPULATIONS

	Employer/Carrier	SDTF
1. JURISDICTION OF THE PARTIES AND SUBJECT MATTER	_____	_____
2. VENUE	_____	_____
3. NOTICE OF REIMBURSEMENT FILED ON	_____	_____
4. DATE OF DENIAL AND DATE OF APPLICATION FOR HEARING	_____	_____

5. PREEXISTING PERMANENT IMPAIRMENT  
(please specify)

\_\_\_\_\_

6. THE EMPLOYER REACHED AN INFORMED CONCLUSION PRIOR TO THE INSTANT ACCIDENT THAT THE EMPLOYEE HAD A PHYSICAL IMPAIRMENT THAT WAS PERMANENT AND WAS OR WAS LIKELY TO BE A HINDRANCE OR OBSTACLE TO EMPLOYMENT

\_\_\_\_\_

7. PERMANENT IMPAIRMENT AS A RESULT OF INSTANT ACCIDENT

\_\_\_\_\_

8. MERGER

\_\_\_\_\_

9. PAYMENT OF EXCESS

\_\_\_\_\_

## II. CLAIMS AND DEFENSES

1. The E/C's reasons why their claim should be approved. (State theory of merger and cite with specificity).
  
2. Type of reimbursement(s) to which E/C claims they are entitled. (Permanent total, permanent impairment, death, etc.) List:
  - A. Type of permanent benefits claimed for reimbursement.
  
  - B. Specify whether reimbursement is being claimed on medical and temporary benefits without permanent impairment.
  
  - C. Specify whether reimbursement is being claimed on medical and temporary benefits with permanent impairment.
  
3. The E/C's issues to be decided by this court.
  
4. The SDTF's reason(s) for denying this claim (cite with specificity).
  
5. The SDTF's issues to be decided by this court.

THE JUDGE OF COMPENSATION CLAIMS RESERVES THE RIGHT TO IMPOSE SANCTIONS FOR FAILURE TO SPECIFICALLY ANSWER THIS STIPULATION IN GOOD FAITH. A REFERENCE TO ANOTHER PLEADING OR TO A GENERAL CLASS OF BENEFITS IS INSUFFICIENT. ANY ISSUE NOT SPECIFICALLY RAISED IN THIS SECTION WILL BE DEEMED WAIVED OR ABANDONED UNLESS GOOD CAUSE IS SHOWN.

III. WITNESSES AND EVIDENCE

- List witnesses to testify live, by telephone, or by deposition. Final witness lists must be filed with the judge and served on opposing parties at the time of the pretrial hearing or 30 days before the final hearing. All discovery must be noticed at least 21 days before the final hearing. Depositions and stipulated medical composites must be filed 48 hours before the final hearing.

Employer/Carrier:

Depo	Live	Phone	Name & Address Of Witness	Expected Area of Testimony	Objection (if any)
[ ]	[ ]	[ ]	_____	_____	_____
[ ]	[ ]	[ ]	_____	_____	_____
[ ]	[ ]	[ ]	_____	_____	_____

Special Disability Trust Fund:

Depo	Live	Phone	Name & Address Of Witness	Expected Area of Testimony	Objection (if any)
[ ]	[ ]	[ ]	_____	_____	_____
[ ]	[ ]	[ ]	_____	_____	_____
[ ]	[ ]	[ ]	_____	_____	_____

- Attach copies of all documentary evidence (including medical and rehabilitation reports and bills) to be used at the final hearing if not previously furnished to opposing party or counsel. If previously furnished, identify the documentary evidence to be introduced at the final hearing in a separate schedule attached to this compliance. Each party must indicate any documents NOT stipulated into evidence without sworn proof.

Documentary Evidence Listed Below:

Employer/Carrier:

	SDTF Disagrees	SDTF Agrees	State Objection
1. Medical Reports	_____	_____	_____
2. Special Disability Composite	_____	_____	_____
3. Prior Orders	_____	_____	_____
4. _____	_____	_____	_____

SDTF:



	E/C Disagrees	E/C Agrees	State Objection
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____

3. Estimated time for final hearing:

E/C: \_\_\_\_\_ SDTF: \_\_\_\_\_

Total Estimated Time: \_\_\_\_\_

#### IV. ATTORNEYS' CERTIFICATE

We certify that we have personally discussed the pretrial stipulations and the issues raised by the claim and have been unable to resolve the issues.

\_\_\_\_\_  
 Attorney for E/C  
 Date: \_\_\_\_\_  
 ....(address).....  
 ....(telephone number).....  
 Florida Bar No. ....

\_\_\_\_\_  
 Attorney for SDTF  
 Date: \_\_\_\_\_  
 ....(address).....  
 ....(telephone number).....  
 Florida Bar No. ....

#### V. PRETRIAL ORDER

1. If done by mail, it is the responsibility of the E/C's counsel to see that a single pretrial questionnaire is completed and executed by all counsel and filed with the judge before the time noticed for the pretrial hearing; otherwise, personal appearance by all counsel is mandatory.
2. All depositions or stipulated medical reports that are to be admitted into evidence must be filed with the undersigned judge 48 hours before the time of the final hearing to be considered and received into evidence.
3. If medical reports are stipulated into evidence, it shall be the responsibility of E/C's counsel to file a tabulated and indexed medical composite.
4. All discovery must be noticed at least 21 days before the final hearing.
5. Witness lists must be filed with the judge and exchanged between the parties at the time of the pretrial hearing or 30 days before final hearing.
6. The above stipulations of the parties are accepted and approved by the undersigned.
7. The final hearing is hereby scheduled as noted above.

DONE AND ORDERED in Chambers.

\_\_\_\_\_  
Judge of Compensation Claims

I certify that a copy of this stipulation was mailed or hand delivered to the above-named parties and counsel on .....(date).....

\_\_\_\_\_  
Assistant to the  
Judge of Compensation Claims

**FORM 4.916. UNIFORM PRETRIAL STIPULATION AND ORDER FOR PENALTY CASES**

STATE OF FLORIDA  
DEPARTMENT OF LABOR AND EMPLOYMENT SECURITY  
OFFICE OF THE JUDGE OF COMPENSATION CLAIMS  
DISTRICT .....(district number).....

STATE OF FLORIDA,  
DEPARTMENT OF LABOR AND  
EMPLOYMENT SECURITY,  
DIVISION OF WORKERS' COMPENSATION

ATTORNEY FOR STATE:  
.....(name).....  
.....(address).....

CLAIMANT:  
.....(name).....  
.....(address).....

ATTORNEY FOR CLAIMANT:  
.....(name).....  
.....(address).....  
Florida Bar No: .....

EMPLOYER:  
.....(name).....  
.....(address).....

ATTORNEY FOR EMPLOYER/CARRIER  
.....(name).....  
.....(address).....

CARRIER/SERVICING AGENT  
.....(name).....  
.....(address).....

CLAIM NUMBER:  
  
DATE OF ACCIDENT:

Uniform Pretrial Stipulation and Order:  
Penalty Case

As authorized under Florida Rule of Workers' Compensation Procedure 4.045, or as ordered by the judge, the parties provide the following information and make the following stipulations:

I. STIPULATIONS

1. Date of Accident:  
E/C/SA \_\_\_\_\_ State \_\_\_\_\_
2. Date employee first notified employer of accident:  
E/C/SA \_\_\_\_\_ State \_\_\_\_\_
3. Transmittal of form DWC-1, Notice of Injury, by employer to carrier or by carrier/servicing agent to state (to be completed by E/C/SA):  
 \_\_\_\_\_(date) via fax to ( ) \_\_\_\_ - \_\_\_\_\_  
 \_\_\_\_\_(date) via U.S. Mail to \_\_\_\_\_  
 \_\_\_\_\_(date) via other method \_\_\_\_\_  
 (explain): \_\_\_\_\_

II. DEFENSES TO PENALTY  
ASSESSMENT ORDERS

1. State: Attach copies of all Penalty Assessment Orders.
2. Employer: Specify each defense to the state's allegation that you failed to timely file form DWC-1, Notice of Injury, with your insurance carrier.

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OR

3. Carrier/Servicing Agent: Specify each defense to the state's allegation that you failed to timely file form DWC-1, Notice of Injury, with the Department of Labor and Employment Security, Division of Workers' Compensation.

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III. WITNESSES AND EVIDENCE

1. List witnesses to testify live, by telephone, or by deposition. Final witness lists shall be served on opposing parties no later than 5 days before the final hearing. Depositions shall be filed 5 days before the final hearing.

Employer/Carrier/SA:

Depo	Live	Phone	Name & Address Of Witness	Expected Area of Testimony	Objection (if any)
[ ]	[ ]	[ ]	_____	_____	_____
[ ]	[ ]	[ ]	_____	_____	_____
[ ]	[ ]	[ ]	_____	_____	_____

State of Florida

Depo	Live	Phone	Name & Address Of Witness	Expected Area of Testimony	Objection (if any)
[ ]	[ ]	[ ]	_____	_____	_____
[ ]	[ ]	[ ]	_____	_____	_____
[ ]	[ ]	[ ]	_____	_____	_____

2. Attach copies of all documentary evidence to be used at the final hearing. Each party must indicate any documents NOT stipulated into evidence.

3. Documentary evidence NOT stipulated into evidence:

(a) Employer/carrier/servicing agent:

- (1) \_\_\_\_\_
- (2) \_\_\_\_\_

(3) \_\_\_\_\_

(b) State of Florida:

(1) \_\_\_\_\_

(2) \_\_\_\_\_

(3) \_\_\_\_\_

THE OFFICE OF THE JUDGE MUST BE NOTIFIED BY TELEPHONE OR BY SEPARATE LETTER IMMEDIATELY IF THE FINAL HEARING WILL REQUIRE MORE THAN 1 HOUR. THE JUDGE RESERVES THE RIGHT TO IMPOSE SANCTIONS FOR FAILURE TO SPECIFICALLY ANSWER THIS STIPULATION IN GOOD FAITH. A REFERENCE TO ANOTHER PLEADING OR TO A GENERAL DEFENSE IS INSUFFICIENT. ANY ISSUES OR EVIDENCE NOT SPECIFICALLY RECITED IN THIS STIPULATION WILL BE DEEMED WAIVED OR ABANDONED UNLESS GOOD CAUSE IS SHOWN.

\_\_\_\_\_  
Employer/Carrier/Servicing Agent

Date: \_\_\_\_\_

\_\_\_\_\_  
Attorney for Employer/Carrier/Servicing Agent

Date: \_\_\_\_\_

.....(name).....  
.....(address).....  
Florida Bar No. ....

\_\_\_\_\_  
Attorney for State of Florida,  
Division of Workers' Compensation

Date: \_\_\_\_\_

.....(name).....  
.....(address).....  
Florida Bar No. ....

To be completed by the Employer/Carrier/Servicing Agent:

CERTIFICATE OF SERVICE

I certify that the original of this stipulation has been furnished to .....(name)....., Department of Labor and Employment Security, Office of the General Counsel, .....(address)....., on .....(date).....

\_\_\_\_\_  
For Employer/Carrier/Servicing Agent

To be completed by the State of Florida:

CERTIFICATE OF SERVICE

I certify that the original and one copy of this stipulation has been furnished to The Honorable \_\_\_\_\_, Judge of Compensation Claims, and a copy furnished to the Employer/Carrier/Service Agent as follows:

\_\_\_\_\_  
For State of Florida, Department of  
Labor and Employment Security

PRETRIAL ORDER

The above pretrial stipulations are approved and accepted. The State of Florida, Department of Labor and Employment Security, Division of Workers' Compensation, shall schedule and file a notice of final hearing within 30 days from the date of this order.

Done and Ordered in Chambers.

\_\_\_\_\_  
Judge of Compensation Claims

I certify that a copy of this stipulation and order was mailed or hand delivered to the above-named parties and counsel of record on .....(date).....

\_\_\_\_\_  
Assistant to the  
Judge of Compensation Claims