NORTHERN TERRITORY OF AUSTRALIA

*Return to Work Act*

**FORM 12B**

rule 12.03(1)

**REQUIREMENT FOR AFFIDAVIT VERIFYING LIST OF DOCUMENTS**

IN THE WORK HEALTH Claim No.
COURT AT

BETWEEN Worker/Applicant

and

Employer/Respondent

TO THE WORKER/EMPLOYER

You are required by the [*requesting party*] \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

to make an affidavit verifying your list of documents and to serve the affidavit on the [*requesting party*] \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 not later than 14 days after service of this notice on you.

Dated:

[*signature of party or*
*legal practitioner*]

Filed:

Prepared and filed by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
*(name, address, ph no, fax no and reference number of party or party’s legal practitioner. (If the legal practitioner is acting as the agent of another practitioner, also insert the name, address, ph, fax and reference numbers of the principal.)*