

This application is for any person who was dependent for support on a worker who has passed away and who did not receive compensation from icare Dust Diseases Care. If the deceased worker did receive compensation from icare Dust Diseases Care, please contact us or visit our website to obtain our Transition to Dependant Form.

Completing this application

If you are unable to complete this form, another person may complete it on your behalf. However, only you or your Power of Attorney can declare the information to be true and correct and sign it.

If you (or the person you are completing this application for) need an interpreter please contact us on one of the telephone numbers below.

Our team are available to answer any questions you have about this form or the compensation benefits eligible dependents are entitled to. We can also assist you complete this form if needed.

Please be aware that our staff can only deal directly with you, your appointed Power of Attorney or any authorised person that you have listed in your application form for all matters relating to your claim for compensation.

Where do I send this form?

Post Dust Diseases Care, GPO Box 5323, Sydney NSW 2001

email DDAenquiries@icare.nsw.gov.au

Fax 02 9279 1520

Need more information?

Information and fact sheets are available from our website icare.nsw.gov.au

If you'd like to speak to us directly, we can be contacted during business hours (weekdays 9am to 5pm) on **02 8223 6600** or **1800 550 027** (free call).

Who are we?

icare Dust Diseases Care provides compensation and support to people who have a dust disease as a result of exposure to dust while working in NSW. Where a worker dies as a result of a compensable dust disease icare Dust Diseases Care also provides compensation and support to the worker's eligible dependants.

Privacy statement

Personal and health information is collected about you and the deceased worker on this form and may also be collected during the processing, assessing and management of your claim. It may be collected from your or the deceased worker's current and previous employers, other government agencies, health service providers and other persons who can provide information relevant to the claim. Personal and health information is collected for the purposes of enabling icare Dust Diseases Care to process, assess and manage your claim and to verify any evidence you may submit in support of a claim or to assist icare Dust Diseases Care to better manage claims generally. By completing this application you are taken to consent to this privacy notice. If you require further information on how we collect, use, store and dispose of your personal and health information please refer to our website icare.nsw.gov.au.

OFFICE USE ONLY DDC file number

Date received

1. Deceased worker's details

First name	Middle name	Surname
Date of birth	Place of birth	Date of death
		Gender

2. Disease

What dust disease(s) was the deceased worker diagnosed with?

Mesothelioma	Asbestosis	Silicosis	Lung cancer	ARPD	Other (If other please list/describe below)
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Please note that pleural plaques are not considered a dust disease.

3. Your details

First name	Middle name	Surname
Date of birth	Place of birth	Gender
Address (street & number)		
Suburb/Town	State	Post code
		Country
Home telephone	Mobile telephone	Other contact telephone
Email	Preferred method of contact	

Access Requirements - Do you have any access requirements in making this application? If so, please describe below: eg. language interpreter, hearing impairment, disability or health issues, cultural, religious

4. Dependants of the deceased worker at time of death

Please list all person(s), including yourself, who were a dependant of the deceased worker at the time of their death, include their relationship and their date of birth (e.g. includes married and de facto partners and children)

Name of dependant	Relationship	Their date of birth

5. Your authorised person(s)

Please list all person(s) you authorise to provide and receive information from us on your behalf. If you nominate your lawyer as an authorised person, please also include at least one other person.

Name of authorised person	Relationship to you	Telephone

6. Deceased worker's employers and dust exposure

Please list all employments the deceased worker had, including all employments where you think they had exposure to hazardous dusts. If there are more employments please attach a list.

Year start	Year end	Employer	State/Country	Occupation and task(s) performed (when exposed)

7. Deceased worker's treating doctors (relevant to their dust disease)

Treating doctors	Name of doctor	Address/Location	Telephone
GP			
Respiratory physician			
Oncologist			
Other specialist			
Other specialist			

8. Declaration

I declare that I believe the answer to each and every question on this form and the particulars contained therein or attached hereto to be true. I make this declaration in the knowledge that I am subject to punishment by law under the Workers' Compensation (Dust Diseases) Regulation 2008 for the making or signing of a statement that I know to be false or misleading in a material particular.

Signature

Date

What happens next?

Your application will be registered and one of our team members will contact you to discuss your application. We will then determine what, if any, further medical information or supporting documents are required to process your claim. We will also prepare an Industrial History Report. Your icare contact is here to help and will guide you through these requirements.

What is an Industrial History Officer Report?

An Industrial History Report outlines all of the deceased worker's employment and dust exposure history. One of our specialist Industrial History Officers may get in contact to discuss this with you and to gather more information. This is generally done by telephone or if you prefer, our Industrial History Officer can visit you to discuss this in person.

The Industrial History Officer will then conduct research to establish and/or corroborate dust exposure in the deceased worker's employments. They will also endeavour to verify some of the worker's employments. If you have any documents that verify your past employments please provide copies as these can assist in processing your application more quickly.

What medical information is required?

An independent panel of three Respiratory Specialists (the Medical Assessment Panel) will be appointed to confirm whether the worker had a compensable dust disease and, if so, whether the dust disease was reasonably attributable to exposure to dust in employment in NSW.

The Medical Assessment Panel will require a variety of medical information in order to make this determination. This may include copies of doctor's letters, reports and radiological images such as CT scans and x-rays.

What if I don't have any medical information or employment documents?

If you do not have any employment verification documents or medical information about your condition, icare will try to obtain these for you on your behalf. To allow us to do this, we will need you to complete and sign enclosed Next of Kin Authority to Release Medical Records form.

What other supporting documents do I need to provide?

In order to process your application we will require copies of supporting documentation regarding your identity, income and dependency. Some examples include, but are not limited to, copy of your driver license, pension card, medicare card and/or income statements.

Do I have to provide these documents with my application?

No, you do not have to provide any of the above required documents at the time of submitting this application form. However, you may choose to provide copies of them at this time if it is convenient for you to do so. Once your application has been submitted, we will contact you to discuss what is required and to arrange the collection of the required documents in a manner and at a time that is convenient to you.

How will my claim be determined?

icare will provide the Medical Assessment Panel with your supplied medical information, supporting documents and an Industrial History Report. This information will be used to confirm whether the deceased worker had a compensable dust disease and, if so, whether death was reasonably attributable to the exposure to dust in employment in NSW.

Your assigned icare team member will be in contact with you during the application process and they will contact you as soon as your claim has been determined.