

OCCUPATIONAL DISEASE STIPULATION AND CONTESTED ISSUES

KENTUCKY DEPARTMENT OF WORKERS' CLAIMS

CLAIM NO(S). _____

BEFORE ALJ _____

PLAINTIFF/EMPLOYEE

VS.

DEFENDANT/EMPLOYER(S)

**STATEMENT OF PROPOSED STIPULATIONS
AND NOTICE OF CONTESTED ISSUES**

I. STIPULATIONS

1. Coverage under the Act: Yes At issue
2. The Defendant/Employer had due and timely notice of Plaintiff/Employee's claim:
 Yes At issue
3. Plaintiff/Employee's average weekly wage: _____ At issue
4. Plaintiff/Employee's date of last exposure: _____, 20____. At issue
5. Plaintiff has developed the occupational disease of: _____.
6. Plaintiff/Employee was last exposed to the hazards of the disease while employed by this
Defendant/Employer. Yes At issue
7. Plaintiff/Employee had _____ years of exposure. At issue
8. Plaintiff/Employee _____ is _____ is not continuing to be exposed to the hazards of this disease.
9. Plaintiff/Employee _____ has _____ has not returned to work. If Plaintiff/Employee returned to work,
When? _____, 20____. Where? _____.
10. Plaintiff/Employee's date of birth: _____, _____.

11. Plaintiff/Employee's education level: _____.

12. The following medical expenses are in dispute:

Medical Provider	Service	Date	Amount	Nature of Dispute

13. Other matters:

II. CONTESTED ISSUES

The following issues are contested:

1. _____
2. _____
3. _____
4. _____
5. _____

PLEASE NOTE:

1. All matters not in controversy should be stipulated.
2. The issues listed above will be considered by the Administrative Law Judge.

This the _____ day of _____, 20_____.

Attorney