

## State of New York Industrial Board of Appeals

## **Designation of Representative**

Case Name: _		
Docket No.: _		
I hereby autho	orize:(Name of Representation	to represent me in
the Industrial labove-named	Board of Appeals' review of the Concase.	nmissioner of Labor's order(s) in the
My representa	tive's address is	
My representa	tive's telephone number is ()	
My representa	tive's fax number is ()	
I want my repr	resentative to represent me (check ea	ch that applies):
in	all of the proceedings before the Indu	ustrial Board of Appeals.
	the pre-hearing telephone conference Il schedule in this matter.	e that the Industrial Board of Appeals
	the formal evidentiary hearing that the	ne Industrial Board of Appeals will
I hereby state	that:	
my representa	tive has agreed to represent me in thi	s matter;
	nat the Industrial Board of Appeals win those aspects of the proceedings to	<del></del>
	nat I may revoke or change this designed statement to that effect.	nation by sending the Industrial Board
Date	Print Name of Petitioner	Signature on behalf of Petitioner