

HIETT, Darin

CM3-2024-04540 W (Neck, L Shldr, L Arm)

SS# XXX-X6-9918

City Council Date 10/14/25

Atty: Greg Barnard

Trial Date: NA Order Date: N/A

DOH: 3/11/13 Separation: N/A

RTW: 3/19/25 MMI: 5/8/25

Date of Injury: 1/15/24 (SI)

PPD Wage: \$360

Memo

Resolution R-2526-60

Purchase Requisitions

Permanent Partial Disability Settlement

\$25,920.00 20% Neck (Whole Body)

\$2,592.00 2% L Shldr (Whole Body)

\$0.00 0% L Arm

\$28,512.00

\$2,500.00 CMM

\$31,012.00

Attorney Fees (20% of PPD)

\$ (5,702.40)

Net to Claimant

\$25,309.60

Total PPD Settlement

\$28,512.00

Multiple Injury Trust Fund (3% of PPD-After 7/1/19)

(\$855.36)

11739

43330102-42134

Net to Attorney & Claimant (Less MITF)

27,656.642,500.00\$30,156.64

43330102-42131

City's Settlement Costs (953-092)

Workers Comp. Admn. Fund (2% of PPD)

\$ 570.24

Vendor

2267

43330102-42133

Occupational & Health Trust Fund (0.75%)

\$ 232.59

1950

43330102-42135

Filing Fee - Workers Compensation **Commission**

\$ 140.00

12122

43330102-44704

\$ 942.83

Filing Fee - Cleveland County District Court

\$ 154.14

434

43330102-44703

\$1,096.97

Total Settlement Cost (PPD, TTD, Costs)

\$32,108.97

Settlement forms:Copies

Filed in WCC

Filed in Dist.Ct.

IF Compromise Settlement

11

x

Affidavit of Foreign Judgment

4

x

Assignment of Judgment

4

x

Checks with case name on them

1

Certificate of Mailing

3

x

File Closing procedure

Completion

Date

Send Tax Roll Memo to Finance (1st) w/Agenda Approval

Send in Taxes to Tax Commission

Send filing fee to Comp Court

Mail Certified Copy of JP or CS - Maill to all providers

File Affidavit & Assignment in District Court

Send Tax Roll Memo to Finance (1nd) w/Aff & Assignment

Final Letter to Attorney (Sending Aff/Assignment)

Log onto Legal's tracking spreadsheet (Legal/WC/Audits)

Index in file list & place in storage

Send Closing Letter to Claimant's Attorney