

State of New Jersey Department of Labor and Workforce Development Division of Workers' Compensation WC-100 (r. 9/18/15)	ORDER ☐ JUDGMENT ☒ APPROVING SETTLEMENT	Case No.: 2017-18868 Vicinage: CAMDEN
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PETITIONER/ APPLICANT	NAME: THOMAS PACE	
	ADDRESS: 15 MILLBURN AVE GRENLOCH, NJ 08032	
	DATE OF BIRTH: 06/26/1983	MEDICARE ELIGIBLE: ☐ YES ☒ NO

VS

RESPONDENT	NAME: BOROUGH OF LINDENWOLD	
	ADDRESS: 861 GIBBSBORO ROAD LINDENWOLD, NJ 08021	
	NAME: KENT & MCBRIDE PC	
	ADDRESS: 1040 KINGS HIGHWAY NORTH SUITE 600 CHERRY HILL, NJ 08034	
ATTORNEY FOR RESPONDENT	TELEPHONE NUMBER(AREA CODE): (856) 667-3113 Ext:	
	APPEARING ATTORNEY: EVE KOKOLIS, ESQ.	

ATTORNEY FOR PETITIONER/APPLICANT	EMPLOYER IDN: 223495265	
	NAME: ADAM M KOTLAR ESQ	
	ADDRESS: 1913 GREENTREE RD CHERRY HILL, NJ 08003	
	TELEPHONE NUMBER(AREA CODE): (856) 751-7676 Ext:	
	APPEARING ATTORNEY: JAMMIE N. JACKSON, ESQ.	
	NAME: AMERIHEALTH CASUALTY SERVICES	
	ADDRESS: 1700 MARKET ST SUITE 700 PHILADELPHIA, PA 19103	
	CLAIM NUMBER: 650-117-1443	
	DATE OF ACCIDENT: 06/26/2017	
	DESCRIBE (Briefly): Lifting a manhole cover	

ADMINISTRATIVE DISMISSALS
 (List Other Insurance Carriers to be
 dismissed from case, without prejudice):

Weekly Wages: \$ 1,392.83 Rate(s): \$ 896.00 / \$ 239

IF RE-OPENED PETITION, INDICATE FOR LAST AWARD:

Date: _____ Award: _____ Permanent Paid: \$ _____ Temporary Paid: \$ _____

THIS MATTER HAVING COME BEFORE THE COURT ON THIS 20th DAY OF December 2018

☐ ORDER FOR JUDGMENT

It appearing that the Petitioner suffered a compensable injury on the above mentioned date while in the employ of respondent;
 It is Ordered and Adjudged that Petitioner be awarded compensation benefits, payable as indicated on Page 2.

☒ ORDER APPROVING SETTLEMENT

The parties have settled the matter and a finding by the Court having been made that the terms of the settlement are fair and just;
 It is Ordered that this settlement be approved and the petitioner be paid as indicated on page 2.

PERMANENT DISABILITY (Describe Percentages below followed by the nature and Extent of Injury and Members involved):

15.00 % of _____ partial total

for a right and left inguinal hernia, necessitating a right and left inguinal hernia repair.

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DISABILITY AWARDED:

TEMPORARY: _____ weeks at \$ _____ = \$ _____ less \$ _____ paid = Balance due \$ 0.00

PERMANENT: 90.000 weeks at \$ 239.00 = \$ 21,510.00 less \$ _____ paid = Balance due \$ 21,510.00

☐ Bonafide Voluntary Tender
 ☐ Non Bonafide Voluntary Tender
 ☐ Reopener Credit
 ☐ N.J.S.A 34:15-40
 ☐ Other _____

MEDICAL BILLS (Doctors and/or Institutions) AND/OR MISCELLANEOUS INFORMATION:

TTD deemed adequate as paid.
 All causally related medical bills have been or will be paid by the Respondent.

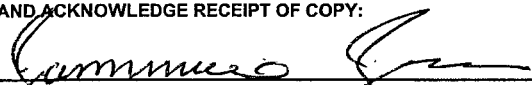
Net = \$ 19,489

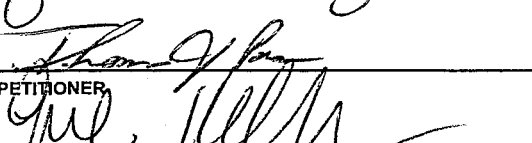
☐ ORDER FOR CHILD SUPPORT	☐ MEDICARE ADDENDUM ATTACHED	☐ ADDENDUM ATTACHED
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ALLOWANCES	REIMBURSE	TAX ID	TOTAL AMT. ALLOWED	PAYABLE BY PETITIONER	PAYABLE BY RESPONDENT
Medical Fee Allowed: (report and/or testimony) REGIONAL INDEPENDENT MEDICAL EVALUATION	PET. ATTN	2234925265	600.00	300.00	300.00
Interpreter:					
Attorney(s) Fee: ADAM M KOTLAR ESQ		2234925265	4,302.00	1,721.00	2,581.00
Stenographic service:	Guy J. Renzi & Associates Tax ID: 22-3190096		90	—	90
Miscellaneous Fees: (list below)					

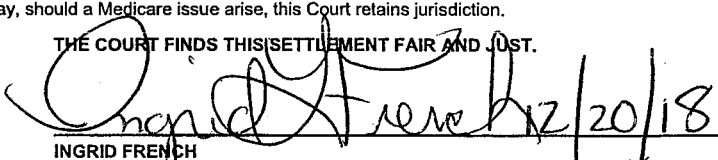
☐ This Court finds the parties adequately considered Medicare interest, be that as it may, should a Medicare issue arise, this Court retains jurisdiction.

WE HEREBY CONSENT TO THE ENTRY AND FORM OF THIS ORDER AND ACKNOWLEDGE RECEIPT OF COPY:


 ADAM M KOTLAR ESQ, Attorney for Petitioner


 KENT & MCBRIDE PC, Attorney for Respondent

THE COURT FINDS THIS SETTLEMENT FAIR AND JUST.


 INGRID FRENCH
 JUDGE OF COMPENSATION

12/20/18
DATE

THE ORIGINAL OF THIS DOCUMENT, SIGNED BY THE JUDGE OF COMPENSATION WILL BE MAINTAINED ON FILE IN THE DIVISION OF WORKERS' COMPENSATION, PURSUANT TO N.J.S.A. 34:15-121 et seq.