

To: Texas Workers' Compensation System Participants

From: Kara Mace, Deputy Commissioner, Legal Services

Date: March 22, 2022

RE: DWC Forms Updated for Letterhead and Mailing Address

On June 8, 2021, the Texas Department of Insurance, Division of Workers' Compensation (DWC) issued [a plan](#) to update DWC notices and forms with a new letterhead and mailing address.

The plan included updates to the English and Spanish versions of some forms with DWC's new letterhead and return address only (Group Two Forms). There are no updates to the form revision date in the lower left corner or to barcode information.

The forms listed below are ready for immediate use. We will post updated forms to use immediately with no comment period.

- DWC Form-051, *Employee's Election for Commuted (Lump Sum) Impairment Income Benefits*
- DWC Form-054, *Notice to Employee: Intention to Request Division Permission to Adjust Benefits*
- DWC Form-055, *Request to Adjust Average Weekly Wage for Seasonal Employee*
- DWC Form-056, *Carrier's Request for Seasonal Employee Wage Information from Texas Workforce Commission Records*

For questions or other information, contact Jeff Nelson, director of External Relations, at 512-804-4405 or jeff.nelson@tdi.texas.gov.