



## Information concerning your application for review

### 1. Type of application

- **Application for review of a compensation or rehabilitation matter**

Enter the date of the decision you are contesting and the CSST file number identified by the 9-figure number indicated in the decision letter, under the worker's name, on the line entitled: «File number». Enter the name of the CSST officer who signed the letter. Enter the date of the initial event indicated in the CSST decision letter. If applicable, enter the date of the recurrence, relapse or aggravation indicated in the CSST decision letter.

- **Review of an inspection**

Enter the date of the contested inspection report. Enter the report number indicated on the report and beginning with the letters RAP. Enter the name of the inspector.

### 2. Reasons for application

Briefly explain why you are applying for review of the decision.

### 3. Processing the application

Indicate by checking Yes or No if you want the member of the review board to contact you before making the decision or if you prefer that the decision be made based on the documents on file.

### 4. Identification of the person applying for review

Check if the person applying for review is the worker or some other party (for example, an heir). By checking one of the boxes, you are declaring that the information provided in this application for review is true and complete, and you are acknowledging that you signed this application for review to the Commission de la santé et de la sécurité du travail.

### 5. Worker

Section that must always be completed in the case of an application for review of compensation and rehabilitation and, if applicable, an application for review of an inspection.

### 6. Other

To be completed if you checked Other in the section entitled «Identification of the person applying for review». In accordance with the CSST's language policy, employers must use the French form.

### 7. Representative

If applicable, enter the contact information of the representative of the person applying for review (Worker or Other).

### 8. Signature

If the application for review is submitted on the paper version, you must sign it.

## Commission de la santé et de la sécurité du travail

### List of regional offices

Dial a single number to contact any CSST regional office:

1 866 302-CSST (2778)

#### Abitibi-Témiscamingue

33, rue Gamble Ouest  
**Rouyn-Noranda**  
(Québec) J9X 2R3  
Fax: 819 762-9325

2<sup>e</sup> étage  
1185, rue Germain

**Val-d'Or**  
(Québec) J9P 6B1  
Fax: 819 874-2522

#### Bas-Saint-Laurent

180, rue des Gouverneurs  
Case postale 2180  
**Rimouski**  
(Québec) G5L 7P3  
Fax: 418 725-6237

#### Capitale-Nationale

425, rue du Pont  
Case postale 4900  
Succursale Terminus  
**Québec**  
(Québec) G1K 7S6  
Fax: 418 266-4015

#### Chaudière-Appalaches

835, rue de la Concorde  
**Saint-Romuald**  
(Québec) G6W 7P7  
Fax: 418 839-2498

#### Côte-Nord

Bureau 236  
700, boulevard Laure  
**Sept-Îles**  
(Québec) G4R 1Y1  
Fax: 418 964-3959

235, boulevard La Salle

**Baie-Comeau**  
(Québec) G4Z 2Z4  
Fax: 418 294-7325

#### Estrie

Place-Jacques-Cartier  
Bureau 204  
1650, rue King Ouest  
**Sherbrooke**  
(Québec) J1J 2C3  
Fax: 819 821-6116

#### Gaspésie-Îles-de-la-Madeleine

163, boulevard de Gaspé  
**Gaspé**  
(Québec) G4X 2V1  
Fax: 418 368-7855

200, boulevard Perron Ouest

**New Richmond**  
(Québec) G0C 2B0  
Fax: 418 392-5406

#### Île-de-Montréal

1, complexe Desjardins  
Tour Sud, 31<sup>e</sup> étage  
Case postale 3  
Succursale Place-Desjardins  
**Montréal**  
(Québec) H5B 1H1  
Fax: 514 906-3200

#### Lanaudière

432, rue De Lanaudière  
Case postale 550  
**Joliette**  
(Québec) J6E 7N2  
Fax: 450 756-6832

#### Laurentides

6<sup>e</sup> étage  
85, rue De Martigny Ouest  
**Saint-Jérôme**  
(Québec) J7Y 3R8  
Fax: 450 432-1765

#### Laval

1700, boulevard Laval  
**Laval**  
(Québec) H7S 2G6  
Fax: 450 668-1174

#### Longueuil

25, boulevard La Fayette  
**Longueuil**  
(Québec) J4K 5B7  
Fax: 450 442-6373

#### Mauricie et Centre-du-Québec

Bureau 200  
1055, boulevard des Forges  
**Trois-Rivières**  
(Québec) G8Z 4J9  
Fax: 819 372-3286

#### Outaouais

15, rue Gamelin  
Case postale 1454  
**Gatineau**  
(Québec) J8X 3Y3  
Fax: 819 778-8699

#### Saguenay-Lac-Saint-Jean

Place-du-Fjord  
901, boulevard Talbot  
Case postale 5400  
**Chicoutimi**  
(Québec) G7H 6P8  
Fax: 418 545-3543

Complexe du Parc  
6<sup>e</sup> étage

1209, boulevard du Sacré-Cœur  
Case postale 47  
**Saint-Félicien**  
(Québec) G8K 2P8  
Fax: 418 679-5931

#### Saint-Jean-sur-Richelieu

145, boulevard Saint-Joseph  
Case postale 100  
**Saint-Jean-sur-Richelieu**  
(Québec) J3B 6Z1  
Fax: 450 359-1307

#### Valleyfield

9, rue Nicholson  
**Salaberry-de-Valleyfield**  
(Québec) J6T 4M4  
Fax: 450 377-8228

#### Yamaska

2710, rue Bachand  
**Saint-Hyacinthe**  
(Québec) J2S 8B6  
Fax: 450 773-8126

Bureau 102

26, place Charles-De Montmagny  
**Sorel-Tracy**  
(Québec) J3P 7E3  
Fax: 450 746-1036