

THE STATE OF SOUTH CAROLINA

In the Court of Appeals

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Commissioner T. Scott Beck, SC Workers' Compensation Commission  
Charleston County

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Case Number: 2011204708

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Megan Haley, Employee, ..... Respondent,

v.

Tire Kingdom, Employer,  
and Hartford Insurance Co. Of Midwest,  
Insurance Carrier..... Appellants.

---

**RECORD ON APPEAL**

---

**GREGORY D. KEITH**  
Post Office Box 399  
Post Office Box 9  
Charleston, South Carolina 29402  
(843) 720-2800  
**ATTORNEY FOR RESPONDENT**

**AJERENAL DANLEY**  
The Danley Law Firm, P.C.  
Post Office Box 1454  
Columbia, South Carolina 29201  
(803) 254-2269  
**ATTORNEYS FOR APPELLANTS**

**MEGAN HALEY**  
309 Meadow Street  
Walterboro, SC 29488  
**RESPONDENT**

**RECEIVED**  
APR 10 2012  
**SC Court of Appeals**

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# ASBILL & BECK

Lawyers Helping Injured People

Daniel A. Beck

Mary Ann Asbill (Of Counsel)

Etta K. Simons Collins

15 Mid Atlantic Wharf, Suite 200  
Charleston, South Carolina 29401

(843) 723-2525

Fax (843) 723-5594

Email [ab@asbillbeck.com](mailto:ab@asbillbeck.com)

June 1, 2010

Ms. Virginia Crocker  
Judicial Administrator  
SC Workers' Compensation Commission  
P.O. Box 1715  
Columbia, SC 29202-1715

REC'D JUN 04 2010

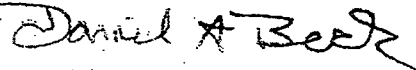
**RE: Employee : Megan Haley**  
**Employer : Tire Kingdom**  
**SCWCC No : 1002642**  
**D/A : 02/04/10**

Dear Ms. Crocker :

Enclosed please find the original and one copy of a Form 50 which I am filing on behalf of the above-named employee. By copy of this letter, I am serving the Employer, the Employer's attorney and the Employer's workers' compensation insurance carrier with this Form 50.

Thank you for your cooperation. Please call if you have any questions.

Sincerely yours,



Daniel A. Beck, Esq.

DAB/gac

Enclosures: Form 50  
Affidavit of Service  
Check for \$25.00

cc: Hartford Insurance Co. of the Midwest  
Ajerenal Danley  
Gallagher Bassett  
Megan Haley

1



BEFORE THE

SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION

WCC FILE NO. 1002642

Megan Haley, )  
 )  
 Employee/Claimant, )  
 )  
 v. )  
 )  
 Tire Kingdom, )  
 )  
 Employer/Defendant, )  
 )  
 and )  
 )  
 Hartford Insurance Co. of the Midwest, )  
 )  
 Carrier/Defendants. )

**AFFIDAVIT OF MAILING**

I, Gina A. Cornwell, do hereby certify that on June 1, 2010, I served a copy of the within Form 50, by depositing in the United States mail, at Charleston, South Carolina with postage prepaid to the following:

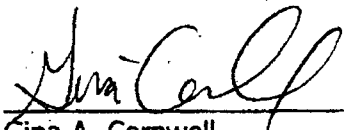
Ms. Virginia Crocker  
 Judicial Administrator  
 SC Workers' Compensation Commission  
 P.O. Box 1715  
 Columbia, SC 29202-1715

This Form 50 was copied to the following:

ATTN: Amy Klatt  
 Gallagher Bassett  
 821 University Executive Park Drive Suite 250  
 Charlotte, NC 28262

Hartford Insurance Co. of the Midwest  
 SE Workres' Comp Claim Center  
 P.O. Box 14473  
 Lexington, KY 40512

Ajerenal Danley  
 The Danley Law Firm, P.C.  
 P.O. Box 1454  
 Columbia, SC 29210



Gina A. Cornwell  
 Legal Assistant to Daniel A. Beck

North Carolina Workers' Compensation Commission

2 Marion Street • Post Office Box 1715

Columbia, South Carolina 29202-1715

Phone: (803) 737-5739

www.wcc.sc.gov



WCC Form #: 1002642

Carrier File #: 003192023843

Carrier Code #:

Employer FEIN #:

Employee's Name: Megan Haley SSN: 473-92-2704

Employer's Name: Tire Kingdom

Address: 268 Blume Road

Address: 1905 Savannah Highway

City: Elloree State: SC Zip: 29407

City: Charleston State: SC Zip: 29407

Home Phone: Work Phone: ( )

Insurance Carrier: Gallagher Bassett Services

Date of Injury: 02/04/2010

Preparer's Name: Ajerenal Danley Law Firm: The Danley Law Firm Preparer's Phone #: (803) 254-2269

Date of Injury or Illness: 02/04/2010

Complete each information blank. Specify clearly when contentions are admitted in part and denied in part. The employer/carrier in answer to the claim, respectfully shows:

- 1. It is Denied the employee sustained an injury or illness on or about the date set forth in the Form 50. The reasons for denial are: General denial pending investigation
2. It is Denied both the employer and employee were subject to the Workers' Compensation Act at the time in question. The reasons for denial are: General denial pending investigation
3. It is Denied the relationship of employer and employee existed at the time in question. The reasons for denial are: General denial pending investigation
4. It is Denied at the time in question the employee was performing services arising out of and in the course of employment. The reasons for denial are: General denial pending investigation
5. It is Admitted notice of injury was given the employer. The reasons for denial are:
6. It is Denied the employee Needs / Is Entitled to Additional medical care as a result of injury or illness. The reasons for denial are: General denial pending investigation
7. It is Denied the employee is entitled to temporary total disability for the period(s) of : All periods requested.
8. It is Denied the employee is permanently disabled. The reasons for denial are: General denial pending investigation
9. It is Denied the employee has serious disfigurement.
10. It is contended that an average weekly wage of \$ 457.46 applies, according to attached Form 20 as provided by law.
11. Further contentions, grounds of defense, or unusual aspects are: Cooper vs. McDevitt & Street (fraudulent employment application)
12. Estimated time needed for hearing: One (1) hour

I certify I have served this document pursuant to R.67-212 by delivering a copy to:

Name: Daniel A. Beck, Esquire

Address: Asbill & Beck, 15 Mid Atlantic Wharf, Suite 200, Charleston, South Carolina 29401

on the 25th day of June, 2010 by [X] first class mail [ ] personal service [ ] certified mail. I certify the contents of this form are accurate and true to the best of my knowledge.

Preparer's Signature Attorney for Defendants Title Email: adanley@thedanleylawfirm.com Date: June 25, 2010

Refer to R.67-204 through R.67-210 and R.67-601 through R.67-615. Questions about the use of this form may be directed to the Commission's Judicial Department. Pursuant to R.67-606, a Form 20 must be filed with the Claims Department at least 30 days from the date of filing this form.

**CERTIFICATE OF SERVICE**


I, Sierra S. Folder, legal assistant, of The Danley Law Firm, P.C., attorney(s) for the Defendant, do hereby certify that I have, this date, served the following parties with the following document(s) by United States Mail to the following address(es):

Case Caption: Megan Haley vs. Tire Kingdom

W.C.C. File No.: 1002642

Pleading(s): Form 51

Parties Served: Daniel A. Beck, Esquire  
Asbill & Beck  
15 Mid Atlantic Wharf  
Suite 200  
Charleston, South Carolina 29401

  
Sierra S. Folder  
Legal Assistant

June 25, 2010  
Columbia, South Carolina



3. In her deposition, Claimant contended that she also sustained injury to her lumbar spine approximately one week prior to this accident arising out of and in the course of her employment with Tire Kingdom. Claimant failed to timely report that accident and injury, and Defendants have denied and continue to deny liability for that injury.

4. Claimant's average weekly wage is \$457.46, which yields a compensation rate of \$304.99. Defendants will pay Claimant temporary total disability for disability beginning August 6, 2010 and continuing until properly terminated pursuant to the Act. Claimant's alleged temporary disability prior to August 6, 2010 remains disputed by Defendants, and that issue is held in abeyance pending further hearing or agreement between the parties.

5. Defendants will pay medical bills that are outstanding with Concentra, HealthFirst Rapid Care, and Summerville Medical Center that are directly related only to Claimant's right shoulder and cervical spine injuries, but only in such amounts as are properly submitted by these healthcare providers on the proper form, and only in such amounts as are allowed by the SC Workers' Compensation Commission Medical Services Provider Manual.

6. Defendants shall choose the authorized treating physicians. Defendants shall provide medical, surgical, hospital, and other treatment, including medical and surgical supplies as reasonably may be required for Claimant's right shoulder and cervical spine that will tend to lessen the period of disability as evidenced by expert medical evidence stated to a reasonable degree of medical certainty pursuant to S.C. Code Ann. §42-15-60(A).

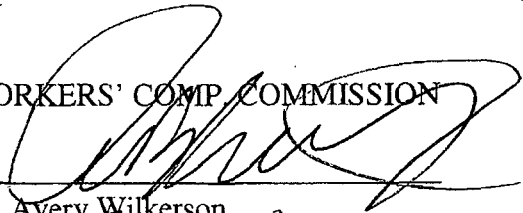
I find that the foregoing agreement is fair and reasonable. I conclude that it should be approved and adopted as the order in this case.

NOW, THEREFORE, IT IS ORDERED THAT the above agreement is approved and adopted as the order in this case.

IT IS SO ORDERED.

SC WORKERS' COMP COMMISSION

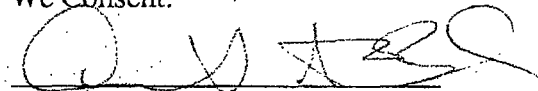
BY:

  
Avery Wilkerson  
Commissioner

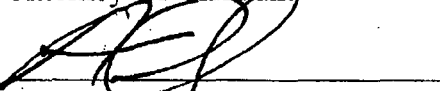
Columbia, South Carolina

Dated: September 21, 2010

We Consent:



Daniel Beck  
Attorney for Claimant



Ajerenal Danley  
Attorney for Defendants

CERTIFICATE OF SERVICE  
This is to certify that the undersigned has this date served this order in the above entitled action upon all parties to this cause by depositing a copy hereof, postage paid, in the United States mail addressed to the attorney or attorneys for said parties.

This 28 day of September, 2010

By Ernie M. Boyd  
Administrative Assistant to the Commissioner

DAB  
AD

THE DANLEY LAW FIRM, P.C.

Ajerenal "Al" Danley\*  
Matthew C. Robertson\*\*  
Andrew W. Fajardo

\* Certified Circuit Court Mediator  
\*\* Admitted in South Carolina  
& North Carolina

April 20, 2011

Virginia Crocker  
Judicial Director  
SC Workers' Comp. Commission  
Post Office Box 1715  
Columbia, South Carolina 29202-1715

RE: Megan Haley vs. TBC Corporation d/b/a Tire Kingdom  
W.C.C. File No.: 1002642  
Carrier File No.: 003192023843  
Date of Accident: 02/04/10

Dear Ginger:

Enclosed please find original and copy of Form 21 (Employer's Request for Hearing) and supporting medical report. We are requesting a hearing based on two (2) grounds, which is why we have checked Sections I and II of the Form 21.

By copy of this letter and enclosure to Daniel A. Beck, attorney for the claimant, we are hereby serving him.

Sincerely,

Ajerenal Danley

AD:sf  
Enclosures  
cc: Daniel A. Beck, Esquire  
Ann Wenner



Claimant's Name: Megan Haley SSN: 249 - 67 - 6264 Employer's Name: TBC Corporation  
Address: 316 cujo Lane Address: 4300 TBC Way  
City: Summerville State: SC Zip: 29483 City: Palm Beach State: FL Zip: 33410  
Home Phone: (843) 324 - 7390 Work Phone: ( ) Insurance Carrier: Harford Ins. Co. of the Midwes  
Preparer's Name: Ajerenal Danley Law Firm: The Danley Law Firm, P.C. Preparer's Phone #: (803) 254 - 2269

The date of injury reported on Form 12A is: 2/2/2010 (m/d/yyyy)

**Check appropriate section(s). The employer's representative requests a hearing to:**

- I. **Stop payment of compensation.** Compensation payments are current as of 4/14/2011 (m/d/yyyy) and shall continue until otherwise ordered or until Form 17 is signed by the claimant. A Form 17 was offered and refused on 04/18/2011 (m/d/yyyy).

The basis of the stop payment hearing is (check one):

- (a) The authorized health care provider states the claimant has reached maximum medical improvement.  
 (b) The authorized health care provider states the claimant is able to return to the same or other suitable job and has assigned an improvement rating, if any, and the same or suitable job has been offered to the claimant.  
 (c) The authorized health care provider states the claimant is unable to return to the same or other suitable job and has assigned an impairment rating, if any.

- II. **Terminate temporary compensation suspended per R.67-505.** Date Suspended: 4/18/2011 (m/d/yyyy)

The basis for suspension of benefits is (check one):

- (a) The claimant refuses medical treatment.  
 (b) The employer states the claimant is working, has worked for at least fifteen calendar days, and the claimant refuses to sign Form 17.  
Requesting:  Informal Conference  Hearing

- III. **Pay compensation** in the amount of \$\_\_\_\_, based on the following grounds:

- IV. **Request Credit for overpayment of temporary compensation.**

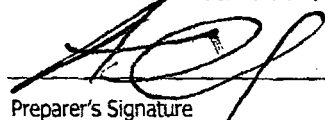
- V. **Reduce Payment of compensation** from \$\_\_\_\_ to \$\_\_\_\_, based on the following grounds:

Compensation payments are current as of \_\_\_\_\_ (m/d/yyyy) and shall continue until otherwise ordered or until a Form 17 is signed by the claimant.

I certify that I have served this document pursuant to R.67-211 by delivering a copy to \_\_\_\_\_

Daniel A. Beck, Asbill & Beck, 15 Mid Atlantic Wharf, Suite 200, Charleston, South Carolina 29401

on the 20th day of April, 2011, by  first class postage  certified mail  personal service.

  
Preparer's Signature

Attorney for Defendants

4/18/2011

Title

Date

Post Office Box 1454, Columbia, South Carolina 29202

Address

10

The claimant may respond by writing the preparer at the address above and filing a copy of the response with the Commission's Judicial Department at the address at the top of the form. Refer to R.67-208, R.67-211, R.67-505, R.67-506, and R.67-601 - R.67-616. Questions about the use of this form should be directed to the Judicial Department at 803-737-5675.

**CAROLINA NEUROLOGICAL CLINIC, L.L.P.**

**JAMES L. BUMGARTNER, M.D.**  
**THOMAS H. DUKES, III, M.D.**  
**CHARLES S. JERVEY, M.D.**  
**HAMID R. BAHADORI, M.D.**

**125 Doughty Street**  
**Suite 160**  
**Charleston, SC 29403**  
**(843) 723-0202**  
**Fax (843) 723-1052**

**PATIENT: MEGAN HALEY**  
**DATE: FEBRUARY 7, 2011**  
**FOR: NOTE**

Ms. Haley was last seen by me on 11/29/10. As per documented in the chart that day, she reported that she was taking her Elavil. She reported she had not missed any doses. She was sent to have an amitriptyline level done that day, which was done after she left our office. That lab result shows none detected. That finding is consistent with noncompliance and contradicts the patient's oral statements of being compliant with her medication. In view of that information, I do not have anything else I can offer for the patient as regards her complaints. Therefore, I do not think there should be any work restrictions from a neurologic standpoint and no impairment from a neurologic standpoint.

*Charles S. Jervy*

Charles S. Jervy, M.D.

CSJ/sun

cc: Workman's Comp faxed 2/10/11.

fax# 866-806-2834 - faxed 4/13/11 DR

**South Carolina Workers' Compensation Commission**

2 Marion Street • Post Office Box 1715  
Columbia, South Carolina 29202-1715  
(803) 737-5675



WCC File #: 1002642

Carrier File #: 003192-023841-wc-01

Carrier Code #: 395

Employer FEIN #: 58-1823826

Claimant's Name: Megan Haley SSN: 249 - 67 - 6264 Employer's Name: TBC Corporation  
 Address: 316 cujo Lane Address: 4300 TBC Way  
 City: Summerville State: SC Zip: 29483 City: Palm Beach State: FL Zip: 33410  
 Home Phone: (843) 324 - 7390 Work Phone: ( ) - Insurance Carrier: Harford Ins. Co. of the Midwes  
 Preparer's Name: Ajerenal Danley Law Firm: The Danley Law Firm, P.C. Preparer's Phone #: (803) 254 - 2269

Date of injury reported on Form 12A is: 2/2/2010 (m/d/yyyy)

**Check appropriate section(s). The employer's representative requests a hearing to:**

I. **Stop payment of compensation.** Compensation payments are current as of \_\_\_\_\_ (m/d/yyyy) and shall continue until otherwise ordered or until Form 17 is signed by the claimant. A Form 17 was offered and refused on 04/18/2011 (m/d/yyyy).

The basis of the stop payment hearing is (check one):

- (a) The authorized health care provider states the claimant has reached maximum medical improvement.
- (b) The authorized health care provider states the claimant is able to return to the same or other suitable job and has assigned an improvement rating, if any, and the same or suitable job has been offered to the claimant.
- (c) The authorized health care provider states the claimant is unable to return to the same or other suitable job and has assigned an impairment rating, if any.

II. **Terminate temporary compensation suspended per R.67-505.** Date Suspended: 4/18/2011 (m/d/yyyy)

The basis for suspension of benefits is (check one):

- (a) The claimant refuses medical treatment.
- (b) The employer states the claimant is working, has worked for at least fifteen calendar days, and the claimant refuses to sign Form 17.

Requesting:  Informal Conference  Hearing

III. **Pay compensation** in the amount of \$\_\_\_\_\_, based on the following grounds:

**SCWCC**

MAY 08 2011

**JUDICIAL**

IV. **Request Credit for overpayment of temporary compensation.**

V. **Reduce Payment of compensation** from \$\_\_\_\_\_ to \$\_\_\_\_\_, based on the following grounds:

Compensation payments are current as of \_\_\_\_\_ (m/d/yyyy) and shall continue until otherwise ordered or until a Form 17 is signed by the claimant.

**certify that I have served this document pursuant to R.67-211 by delivering a copy to** \_\_\_\_\_

Daniel A. Beck, Asbill & Beck, 15 Mid Atlantic Wharf, Suite 200, Charleston, South Carolina 29401

on the 4th day of May, 2011, by  first class postage  certified mail  personal service.

*Ajerenal Danley*  
Preparer's Signature

**Attorney for Defendants**

**5/4/2011**

Title

Date

**Post Office Box 1454, Columbia, South Carolina 29202**

Address

The claimant may respond by writing the preparer at the address above and filing a copy of the response with the Commission's Judicial Department at the address at the top of the form. Refer to R.67-208, R.67-211, R.67-505, R.67-506, and R.67-601 - R.67-616. Questions about the use of this form should be directed to the Judicial Department at 803-737-5675.

**CAROLINA NEUROLOGICAL CLINIC, L.L.P.**

**JAMES L. BUMGARTNER, M.D.**  
**THOMAS H. DUKES, III, M.D.**  
**CHARLES S. JERVEY, M.D.**  
**HAMID R. BAHADORI, M.D.**

*125 Doughty Street*  
*Suite 460*  
*Charleston, SC 29403*  
*(843) 723-0202*  
*Fax (843) 723-1052*

**PATIENT: MEGAN HALEY**  
**DATE: FEBRUARY 7, 2011**  
**FOR: NOTE**

Ms. Haley was last seen by me on 11/29/10. As per documented in the chart that day, she reported that she was taking her Elavil. She reported she had not missed any doses. She was sent to have an amitriptyline level done that day, which was done after she left our office. That lab result shows none detected. That finding is consistent with noncompliance and contradicts the patient's oral statements of being compliant with her medication. In view of that information, I do not have anything else I can offer for the patient as regards her complaints. Therefore, I do not think there should be any work restrictions from a neurologic standpoint and no impairment from a neurologic standpoint.

*Charles Jervy*

Charles S. Jervy, M.D.

CSJ/sun

cc: Workman's Comp faxed 2/10/11.

fax# 866-806-2834 - faxed 4/13/11 DJ

**CERTIFICATE OF SERVICE**

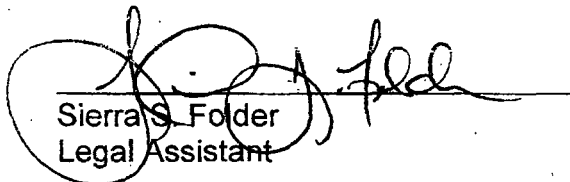
I, Sierra S. Folder, legal assistant, of The Danley Law Firm, P.C., attorney(s) for the Defendant, do hereby certify that I have, this date, served the following parties with the following document(s) by United States Mail to the following address(es):

Case Caption: Megan Haley vs. Tire Kingdom

W.C.C. File No.: 1002642

Pleading(s): Form 21

Parties Served: Daniel A. Beck, Esquire  
Asbill & Beck  
15 Mid Atlantic Wharf  
Suite 200  
Charleston, South Carolina 29401

  
Sierra S. Folder  
Legal Assistant

May 4, 2011  
Columbia, South Carolina

## South Carolina Workers' Compensation Commission

1333 Main Street, Suite 500  
P.O. BOX 1715  
Columbia, SC 29202-1715  
(803) 737-5723



WCC File #: 1002642  
Carrier File #: 003192023841WC01  
July 7, 2011

### NOTICE OF HEARING RESET

MEGAN HALEY v. TBC CORPORATION

**Subject:** To determine if employer/carrier may stop payment, and if so, to determine if claimant is entitled to any further benefits. Carrier also request credit for temporary total benefits paid in excess of award.

**Date:** July 26, 2011 at 01:30 PM

**Location:** North Charleston City Hall, 2500 City Hall Lane, 1st Floor Court Administration Conference Room  
Charleston, SC 29406

South Carolina Regulations 67-601 through 67-615 govern hearings before the South Carolina Workers' Compensation Commission. The claimant must attend when not represented by an attorney or when disfigurement is involved. Corporations must be represented by an attorney, and uninsured employers must attend.

Attorneys must file a Form 58 with proof of service pursuant to Regulation 67-611. Postponements are only granted pursuant to Regulation 67-613. Please visit [www.wcc.sc.gov/Commissioners](http://www.wcc.sc.gov/Commissioners) to view Commissioners' Preferences. If you have questions regarding this matter, please contact the office of the undersigned Jurisdictional Commissioner.

Commissioner Andrea C. Roche  
803-737-5678, [bcheeseboro@wcc.sc.gov](mailto:bcheeseboro@wcc.sc.gov)

CERTIFICATE OF SERVICE – This is to certify the undersigned has served this notice in the above entitled action upon all parties to this cause by sending a copy hereof by electronic mail or United States mail.

By: Barbara Cheeseboro, SC Workers' Compensation, July 7, 2011

Party

Employee: MEGAN HALEY

Employer: TBC CORPORATION  
Carrier: Hartford Ins. Co. of the Midwest

Attorney

Daniel A. Beck  
[ab@asbillbeck.com](mailto:ab@asbillbeck.com)  
843-723-2525

Ajerenal Danley  
[adanley@thedanleylawfirm.com](mailto:adanley@thedanleylawfirm.com)  
803-254-2269

**ASBILL & BECK**

Lawyers Helping Injured People

Daniel A. Beck

Mary Ann Asbill (Of Counsel)

Etta K. Simons Collins

15 Mid Atlantic Wharf, Suite 200  
Charleston, South Carolina 29401

(843) 723-2525

Fax (843) 723-5594

Email ab@asbillbeck.com

June 30, 2011

**VIA FACSIMILE : 803-779-9577**

Ajerenal Danley  
The Danley Law Firm, P.C.  
P.O. Box 1454  
Columbia, SC 29210

**RE: WORKERS' COMPENSATION**

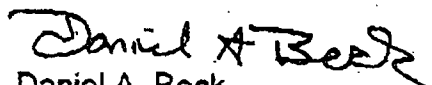
**CLAIMANT : Megan Haley**  
**EMPLOYER : Tire Kingdom**  
**DOI : 02/04/10**  
**CLAIM NO : 003192023843**  
**SCWCC NO : 1002642**

Dear Al:

This is an admitted injury to her neck and shoulder. I recommend the case be settled for 10% of the neck and 10% of the shoulder on a Form 16. Ms. Haley's compensation rate is \$304.99, therefore 10% of the neck equals \$9,149.70 and 10% of the shoulder is equal to \$9,149.70, for a total of \$18,299.40. If I can be of any other help, please let me know.

Thank you.

Sincerely yours,



Daniel A. Beck  
DAB@gao

c: Megan Haley

**Al Danley**

---

**From:** "Cheeseboro, Barbara" <BCheeseboro@wcc.sc.gov>  
**To:** <adanley@thedanleylawfirm.com>  
**Cc:** "Gina" <gina@asbillBeck.com>; <ssfolder@thedanleylawfirm.com>  
**Sent:** Wednesday, July 20, 2011 9:04 AM  
**Subject:** RE: Megan Haley WCC #1002642

Thanks,

This hearing have been removed from our docket.

---

**From:** adanley@thedanleylawfirm.com [mailto:adanley@thedanleylawfirm.com]  
**Sent:** Wednesday, July 20, 2011 9:33 AM  
**To:** Cheeseboro, Barbara  
**Subject:** Re: Megan Haley WCC #1002642

Hey, Barbara: This is settled on a clincher.

Sent from my Verizon Wireless BlackBerry

---

**From:** "Cheeseboro, Barbara" <BCheeseboro@wcc.sc.gov>  
**Date:** Wed, 20 Jul 2011 09:21:52 -0400  
**To:** Gina<gina@asbillBeck.com>  
**Cc:** adanley@thedanleylawfirm.com<adanley@thedanleylawfirm.com>;  
ssfolder@thedanleylawfirm.com<ssfolder@thedanleylawfirm.com>  
**Subject:** RE: Megan Haley WCC #1002642

Mr. Danley is the moving party. He will have to notify our office before I can remove this hearing from our docket.

---

**From:** Gina [mailto:gina@asbillBeck.com]  
**Sent:** Wednesday, July 20, 2011 9:04 AM  
**To:** Cheeseboro, Barbara  
**Cc:** adanley@thedanleylawfirm.com; ssfolder@thedanleylawfirm.com  
**Subject:** Megan Haley WCC #1002642

Dear Barbara,

Please know that Al Danley and Danny Beck have settled Megan Haley's claim on a clincher; therefore, we will no longer need the hearing scheduled for July 26, 2011 at 1:30 pm in North Charleston. Please confirm receipt of this message and confirm we have been taken off Commissioner Roche's calendar.

Thank you.

Gina A. Cornwell  
Paralegal to Daniel A. Beck  
Asbill & Beck  
15 Middle Atlantic Wharf, Suite 200  
Charleston, SC 29401  
phone: 843-723-2525; fax: 843-723-5594  
e-mail: gina@asbillbeck.com



counsel advising that Claimant could not accept the settlement offer. All settlement documents were returned to Defense counsel.

Defendants are informed and believe that a valid and enforceable settlement was reached between Claimant and Defendants on July 19, 2011, which was confirmed by Claimant through her lawyer's office by email to Comm. Roche's office on July 20, 2011.

While the clincher had not been approved by the commission, Defendants are informed and believe that the settlement is enforceable because the accident giving rise to the claim occurred after July 1, 2007. Pursuant to S. C. Code Ann. §42-9-390, approval of the settlement was not necessary for enforcement.

WHEREFORE, Defendants move for an Order requiring Claimant to execute the clincher agreement based on the settlement terms reached between the parties on July 19, 2011.

By: \_\_\_\_\_



Ajerenal Danley  
Post Office Box 1454  
Columbia, South Carolina 29202  
(803) 254-2269  
[adanley@thedanleylawfirm.com](mailto:adanley@thedanleylawfirm.com)  
ATTORNEY FOR DEFENDANTS

Columbia, South Carolina

August 25, 2011

**CERTIFICATE OF SERVICE**

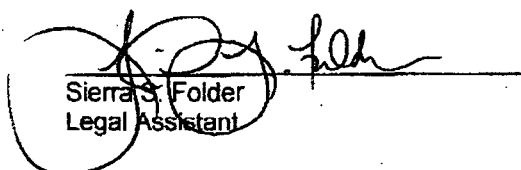
I, Sierra S. Folder, legal assistant, of The Danley Law Firm, P.C., attorney(s) for the Defendants, do hereby certify that I have, this date, served the following parties with the following document(s) by mailing a copy of the same by United States Mail, postage prepaid, to the following address(es):

Case Caption: Megan Haley vs. Tire Kingdom c/o Gallagher Bassett Services

W.C.C. File No.: 1002642

Pleading(s): Motion to Enforce Settlement

Parties Served: Daniel A. Beck, Esquire  
Asbill & Beck  
15 Mid Atlantic Wharf  
Suite 200  
Charleston, South Carolina 29401

  
Sierra S. Folder  
Legal Assistant

August 26, 2011  
Columbia, South Carolina

BEFORE THE  
SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION

---

Megan Haley,

Claimant,

WC FILE NO:1002642

vs.

Tire Kingdom,

TRANSMITTAL ORDER

Employer,

and

Hartford Insurance Co. of the  
Midwest,

Carrier/Defendant,

---

A Motion regarding the following issue(s) has been received:

**Defendants moves for an Order requiring Claimant to execute the clincher agreement based on the terms reached between the parties on July 19, 2011**


The following disposition has been made:

**DENIED**

By Barbara Cheeseboro

Assistant to Commissioner Andrea C. Roche

CC: Ajerenal Danley, Esquire  
Daniel A. Beck, Esquire  
Greg Keith, Esquire

  
\_\_\_\_\_  
Commissioner Andrea C. Roche

CERTIFICATE OF SERVICE

This is to certify the undersigned has this date served this order in the above entitled action upon all parties to this cause by sending an electronic copy hereof by electronic mail addressed to the attorney or attorneys for said parties or by depositing a copy hereof, postage paid, in the United States certified mail addressed to any unrepresented party.  
October 4, 2011

21

By: Barbara Cheeseboro, Administrative Assistant to Commissioner Roche

# THE DANLEY LAW FIRM, P.C.

Ajerenal "Al" Danley\*  
Andrew W. Fajardo

\* Certified Circuit Court Mediator

October 15, 2011

Honorable Virginia Crocker  
Judicial Director  
SC Workers' Comp. Commission  
Post Office Box 1715  
Columbia, South Carolina 29202-1715

RE: Megan Haley vs. Tire Kingdom  
WCC File No.: 1002642  
Carrier File No.: 003192023843

Dear Ginger:

Enclosed please find original and four copies of Form 30 (Request for Commission Review), copy of Transmittal Order being appealed, and our office check in the amount of One Hundred Fifty and 00/100 (\$150.00) Dollars. Please file the original and return a date-stamped copy to me in the return envelope provided.

By copy of this letter and enclosure to other counsel of record, I am hereby serving them.

Sincerely,

Ajerenal Danley

AD:sf

Enclosures

cc: Ms. Ann Wenner  
Daniel A. Beck, Esquire  
Greg Keith, Esquire



Claimant's Name: Mean Haley SSN: 249-67-6264 Employer's Name: Tire Kingdom  
Address: 268 Blume Road Address: 1905 Savannah Highway  
City: Elloree State: SC Zip: 29407 City: Charleston State: SC Zip: 29407  
Home Phone: ( ) Work Phone: ( ) Insurance Carrier: The Hartford Ins. Co. of Midwest  
Preparer's Name: Ajerenal Danley Law Firm: The Danley Law Firm, P.C. Preparer's Phone #: ( )

**REQUEST FOR COMMISSION REVIEW**

Request for Commission Review by  claimant  employer (check one) Date of injury: 02/04/2010 (m/d/yyyy)

The undersigned makes application for review of the findings of the Commissioner in the above-captioned case. The request for review is based on the following grounds: (State the grounds of your appeal in the form of questions presented. Each question presented must contain a concise statement of one proposition of law or fact. Refer to evidence by title and exhibit number. Use additional pages if necessary).

**1. Did the single commissioner err in denying Defendants' motion to compel execution of settlement paperwork by Claimant, the error being that since the parties verbally reached an agreement in this case and the accident giving rise to the claim is after July 1, 2007, the settlement is valid and enforceable?**

**2. Did the single commissioner err in failing to set forth sufficient findings of fact and conclusions of law in her order to support her denial of Defendants' motion?**

(Check one) Oral argument  is  is not requested. Appellant's request for oral argument is waived if not indicated on this form.

I certify that I have served this document pursuant to R.67-211 by delivering a copy to See attachment

Name

on the 15th day of October, 2011 by  first class mail  personal service  certified mail.

Preparer's Signature

Attorney for Employer/Carrier  
Title

10/15/2011  
Date

Check this box if you are not represented by an attorney.

If the claimant appeals and is representing himself or herself, the Judicial Department will prepare the additional copies of this form and serve this form on the opposing party. R.67-701B. Otherwise, file the original and four copies of this form with the Judicial Department. The appeal must be postmarked no later than 1 days from the date of service of the Hearing Commissioner's decision. R.67-701 and R.67-205. Attach the filing fee to this form. Attach a Form 32 if you are unable to pay the filing fee. Refer to R.67-701 through R.67-711 for additional information.

## ATTACHMENT

1. Daniel A. Beck, Esquire  
Asbill & Beck  
15 Mid Atlantic Wharf  
Suite 200  
Charleston, South Carolina 29401
  
2. Greg Keith, Esquire  
Uricchio, Howe, Krell, Jacobson, Toporek, Theos & Keith, PA  
17 ½ Broad Street  
Charleston, South Carolina 29401

BEFORE THE  
SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION

---

Megan Haley,

Claimant,

WC FILE NO:1002642

vs.

Tire Kingdom,

TRANSMITTAL ORDER

Employer,

and

Hartford Insurance Co. of the  
Midwest,

Carrier/Defendant,

---

A Motion regarding the following issue(s) has been received:

**Defendants moves for an Order requiring Claimant to execute the clincher agreement based on the terms reached between the parties on July 19, 2011**


The following disposition has been made:

**DENIED**

By Barbara Cheeseboro

Assistant to Commissioner Andrea C. Roche

CC: Ajerenal Danley, Esquire  
Daniel A. Beck, Esquire  
Greg Keith, Esquire

  
\_\_\_\_\_  
Commissioner Andrea C. Roche

CERTIFICATE OF SERVICE

This is to certify the undersigned has this date served this order in the above entitled action upon all parties to this cause by sending an electronic copy hereof by electronic mail addressed to the attorney or attorneys for said parties or by depositing a copy hereof, postage paid, in the United States certified mail addressed to any unrepresented party.  
October 4, 2011

25

By: Barbara Cheeseboro, Administrative Assistant to Commissioner Roche

**SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION  
JUDICIAL CONFERENCE DECISION AND ORDER**

**Megan Haley v Tire Kingdom  
SCWCC: 1002642  
Commissioner: Roche**

This matter was heard before the South Carolina Workers' Compensation Full Commission in Judicial Conference. The Commissioners considered the matter and ordered the matter handled in the following manner:

**IT IS, THEREFORE, ORDERED** the pending appeal of the Administrative Order of the Commission is hereby;

Dismissed as Interlocutory.  Set for Oral Argument.

**IT IS, THEREFORE, ORDERED** the pending motion be, and hereby is;

Granted.  Denied.  Dismissed  Set for Hearing.

**BEFORE THE;**

Hearing Comm.  Jurisdictional Comm.  Full Commission.

**IT IS, THEREFORE, ORDERED** this matter be, and hereby is; remanded to take such action and enter an Order consistent with the Court's directive.

Remand to Panel as indicated below.

<input type="checkbox"/> Barden	<input type="checkbox"/> Lyndon	<input type="checkbox"/> Williams
<input type="checkbox"/> Beck	<input type="checkbox"/> Roche	<input type="checkbox"/> Wilkerson
<input type="checkbox"/> Huffstetler		

Remand for Order consistent with the Order of the Court.

Remand to the Hearing Commissioner.

Remand to the Jurisdictional Commissioner.

Other: \_\_\_\_\_

Remand:  Panel Oral Argument.  En Banc Oral Argument.

**AND IT IS SO ORDERED.**

  
\_\_\_\_\_  
**T. Scott Beck, Chair**

Columbia, South Carolina

\_\_\_\_\_  
11/14 2011

**CONCURRING:**

Commissioner David Huffstetler  
Commissioner Susan S. Barden  
Commissioner G. Bryan Lyndon  
Commissioner Derrick Williams  
Commissioner Avery Wilkerson  
Commissioner Andrea C. Roche

**NOT PARTICIPATING:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DISSENTING:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CERTIFICATE OF SERVICE**

**THIS IS TO CERTIFY THE UNDERSIGNED HAS THIS DATE SERVED THIS ORDER IN THE ABOVE ENTITLED ACTION UPON ALL PARTIES ELECTRONICALLY OR BY DEPOSITING A COPY HEREOF, POSTAGE PAID, IN THE UNITED STATES MAIL**

This 14 day of November, 2011.

By: Valerie D Deller  
SCWCC Judicial Department

Ajerenal Danley  
David A. Beck

South Carolina Workers' Compensation Commission  
1333 Main Street, Suite 500  
P.O. BOX 1715  
Columbia, SC 29202-1715  
803-737-5675



WCC File #: 1002642  
Carrier File #: 003192023843  
Carrier Code #: \_\_\_\_\_  
Employer FEIN #: \_\_\_\_\_

Claimant's Name: Mean Haley SSN: 249-67-6264 Employer's Name: Tire Kingdom  
Address: 268 Blume Road Address: 1905 Savannah Highway  
City: Eloree State: SC Zip: 29407 City: Charleston State: SC Zip: 29407  
Home Phone: ( ) Work Phone: ( ) Insurance Carrier: The Hartford Ins. Co. of Midwest  
Preparer's Name: Ajerenal Danley Law Firm: The Danley Law Firm, P.C. Preparer's Phone #: ( )

**REQUEST FOR COMMISSION REVIEW**

Request for Commission Review by  claimant  employer (check one) Date of injury: 02/04/2010 (m/d/yyyy)

The undersigned makes application for review of the findings of the Commissioner in the above-captioned case. The request for review is based on the following grounds: (State the grounds of your appeal in the form of questions presented. Each question presented must contain a concise statement of one proposition of law or fact. Refer to evidence by title and exhibit number. Use additional pages if necessary).

1. Did the single commissioner err in denying Defendants' motion to compel execution of settlement paperwork by Claimant, the error being that since the parties verbally reached an agreement in this case and the accident giving rise to the claim is after July 1, 2007, the settlement is valid and enforceable?
2. Did the single commissioner err in failing to set forth sufficient findings of fact and conclusions of law in her order to support her denial of Defendants' motion?

(Check one) Oral argument  is  is not requested. Appellant's request for oral argument is waived if not indicated on this form.

I certify that I have served this document pursuant to R.67-211 by delivering a copy to See attachment

Name

Address

on the 15th day of October, 2011 by  first class mail  personal service  certified mail.

*AJP*  
Preparer's Signature

Attorney for Employer/Carrier  
Title

10/15/2011  
Date

Check this box if you are not represented by an attorney.

If the claimant appeals and is representing himself or herself, the Judicial Department will prepare the additional copies of this form and serve this form on the opposing party. R.67-701B. Otherwise, file the original and four copies of this form with the Judicial Department. The appeal must be postmarked no later than 14 days from the date of service of the Hearing Commissioner's decision. R.67-701 and R.67-205. Attach the filing fee to this form. Attach a Form 32 if you are unable to pay the filing fee. Refer to R.67-701 through R.67-711 for additional information.

ATTACHMENT

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Charleston, South Carolina 29401
  
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17 ½ Broad Street  
Charleston, South Carolina 29401

BEFORE THE  
SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION

Megan Haley,

Claimant,

WC FILE NO:1002642

vs.

Tire Kingdom,

TRANSMITTAL ORDER

Employer,

and

Hartford Insurance Co. of the  
Midwest,

Carrier/Defendant,

A Motion regarding the following issue(s) has been received:

Defendants moves for an Order requiring Claimant to execute the clincher agreement based on the terms reached between the parties on July 19, 2011


The following disposition has been made:

**DENIED**

By Barbara Cheeseboro

Assistant to Commissioner Andrea C. Roche

CC: Ajerenal Danley, Esquire  
Daniel A. Beck, Esquire  
Greg Keith, Esquire

  
Commissioner Andrea C. Roche

CERTIFICATE OF SERVICE

This is to certify the undersigned has this date served this order in the above entitled action upon all parties to this cause by sending an electronic copy hereof by electronic mail addressed to the attorney or attorneys for said parties or by depositing a copy hereof, postage paid, in the United States certified mail addressed to any unrepresented party.  
October 4, 2011

By: Barbara Cheeseboro, Administrative Assistant to Commissioner Roche

THE STATE OF SOUTH CAROLINA

In the Court of Appeals

---

Commissioner T. Scott Beck, SC Workers' Compensation Commission  
Charleston County

---

Case Number: 2011204708

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Megan Haley, Employee, ..... Respondent,

v.

Tire Kingdom, Employer,  
and Hartford Insurance Co. Of Midwest,  
Insurance Carrier..... Appellants.

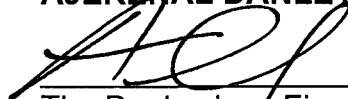
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**CERTIFICATE OF COUNSEL**

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Counsel hereby certifies that this Record on Appeal complies with the requirements of Rule 210 of the South Carolina Appellate Court Rules and contains all material proposed to be included by any party and no material irrelevant to the case before the Court

**AJERENAL DANLEY**



---

The Danley Law Firm, P.C.  
Post Office Box 1454  
Columbia, SC 29202  
Attorney for Appellants  
(803) 254-2269

April 5, 2012

THE STATE OF SOUTH CAROLINA

In the Court of Appeals

---

Commissioner T. Scott Beck, SC Workers' Compensation Commission  
Charleston County

---

Case Number: 2011204708

---

Megan Haley, Employee, ..... Respondent,

v.

Tire Kingdom, Employer,  
and Hartford Insurance Co. Of Midwest,  
Insurance Carrier..... Appellants.

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**PROOF OF SERVICE BY MAIL**

---

I, Ajerenal Danley, do hereby certify that on February 9, 2012, I served copy of ***Record on Appeal*** in the above-captioned case upon Respondent and counsel for the Respondent, Gregory D. Keith, Esquire, by depositing a copy of same in the United States Mail with sufficient postage affixed and addressed to:


**GREGORY D. KEITH**

Post Office Box 399  
Charleston, SC 29402  
(843) 723-7491

**ATTORNEY FOR RESPONDENT**

Megan Haley  
309 Meadow Street  
Walterboro, SC 29488  
**RESPONDENT**

Columbia, South Carolina  
April 10, 2012

  
\_\_\_\_\_  
Ajerenal Danley,  
Attorney for Appellants