

Form 5

Statement of claim—death or personal injury other than motor vehicle or employment-related

Court Procedures Rules 2006

(see r 50 (Originating claim—content etc))

In the *[Supreme/Magistrates] Court of the Australian Capital Territory

No *[SC/MC] of (year) (*Court to complete*)

(name)

Plaintiff

(name)

Defendant

The plaintiff claims damages for *[death/personal injury] in relation to the defendant's negligence.

Details of the claim are as follows:

- time, date, place, circumstances and acts or omissions making up the negligence:
- precise particulars of the defendant's negligence:

*(*if a claim is made for personal injury*)

- injuries and disabilities suffered by the plaintiff:

Filed on behalf of the plaintiff by:

(the plaintiff's address for service and telephone number (if any) or, if the plaintiff is represented by a solicitor and the solicitor is the agent of another solicitor, the name and place of business of the other solicitor)

- the name of each health professional who has treated the plaintiff for the injuries and disabilities:

**(if a claim is made for economic loss)*

- nature of claims for past or future economic loss:
- the name and address of each employer of the plaintiff during a reasonable period before and since the acts or omissions making up the negligence:

**(other material facts relied on in support of claim)*

Date:

(signature of plaintiff or plaintiff's solicitor):

(name of plaintiff or plaintiff's solicitor)

**omit if, or whichever is, inapplicable*