## Court Proceedings Pack (Part A) Form (Form RTA6)

Low value personal injury claims in road traffic accidents (£1,000 - £10,000)

Date of accident	
Claimant's full name	Defendant's full name
Age	
Occupation, if any	
Claimant's representative	Defendant's representative
Contact details	Contact details
Contact details Company name	<b>Contact details</b> Company name
Company name	Company name
Company name Contact name	Company name Contact name

## Court Proceedings Pack (Part A)

Claimant Losses	ltem being pursued	Evidence attached	% Interest rate	Claimant			Defendant response					
	Yes <b>/</b> No			Gross value claimed	% contributory negligence deductions	Net value claimed	Comments	Gross value offered	% contributory negligence deductions	Net value offered	Comments	
Policy excess												
Loss of use												
Car hire												
Repair costs												
Fares - taxis, buses, tube etc.												
Medical expenses												
Clothing												
Care/Services												
Loss of earnings a) Claimant												
b) Employer												
Other losses												
General damages												
						CRU	benefits received					
					Up to date CRU Certificate attached							

Are all disbursements agreed and paid?	Yes	No	If No, please give the following details:	
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Disbursements disputed	Amount claimed	Amount paid	Reason given by defendant for not paying full disbursement

Has the defendant named a legal representative to accept service of legal proceedings on the defendant's behalf	Yes No
If Yes, please give details of the legal representative	

## Statement of truth

Signed

- I am the claimant's solicitor The claimant believes that the facts stated in this claim form are true. I am duly authorised by the claimant to sign this statement.
- I am the claimant I believe that the facts stated in this claim form are true.

	Date					
		/		/		

Position or office held

(if signed on behalf of firm or company)

I have retained a signed copy of this form including the statement of truth.

## Court Proceedings Pack (Part B) Form (Form RTA 7)

Low value personal injury claims in road traffic accidents (£1,000 - £10,000)

This form should be submitted to the court in a sealed envelope

Date of accident	
Claimant's full name	Defendant's full name
Claimant's representative	Defendant's representative
Contact details	Contact details
Company name	Company name
Contact name	Contact name
Telephone number	Telephone number
E-mail address	E-mail address
Reference number	Reference number
Claimant final offer Jud	ge's award Defendant final offer

Fixed costs Stage 1 fixed costs paid

Stage 2 fixed costs paid