



New South Wales

## DISTRICT COURT RULES 1973—FORMS

In pursuance of Part 47 rule 2 (2) of the District Court Rules 1973, I have amended the Forms approved for use in the Court by omitting Form 27E—Certificate as to preparations—and inserting instead the following Forms:

### Form 27E

#### Plaintiff's Certificate as to Preparations

(Practice Notes 33 and 39)

I certify that, in respect of this action:

1. The statement of claim was served on ..... 199....
2. All preparations required to this point are complete.
3. The requirements on the plaintiff of the Timetable and Standard Directions to this point have been met.
4. The information in the attached sheet is as of this date complete and accurate.
5. Settlement negotiations are proceeding [or, *where appropriate, more detailed advice as to settlement negotiations*].
6. An order for referral to arbitration is sought [or will be sought at the review; or at the status conference; or at other time (specify)] [or will not be sought].
7. [Where the plaintiff seeks an order for referral to arbitration] The defendant has consented [or refused to consent] to the making of an order for referral to arbitration.

Dated:

Plaintiff's solicitor [or counsel]

**Form 27F**

**Defendant's Certificate as to Preparations**

(Practice Notes 33 and 39)

I certify that, in respect of this action:

1. Instructions to appear for the defendant were received on 199.....
2. All preparations required to this point are complete [*or* preparations required to this point are not complete because of the following failure(s) by the plaintiff (*specify*)].
3. The requirements on the defendant of the Timetable and Standard Directions to this point have been met [*or* have been met except to the extent that the defendant has been prevented from meeting them by the failure(s) specified in 21].
4. The information in the attached sheet is as of this date complete and accurate.
5. Settlement negotiations are proceeding [*or, where appropriate, more detailed advice as to settlement negotiations*].
6. An order for referral to arbitration is sought [*or* will be sought at the review; or at the status conference; *or* at other time (*specify*)] [*or* will not be sought].
7. [*Where the defendant seeks an order for referral to arbitration*] The plaintiff has consented [*or* refused to consent] to the making of an order for referral to arbitration.

Dated:

Defendant's solicitor [*or* counsel]

**Form 27G**

**Plaintiff's information sheet**

**PERSONAL INJURIES ACTIONS**

..... **V** .....

No. of 19.....

Solicitor:

phone no. **DX**

Counsel:

phone no. **DX**

**IS DATE SOUGHT FOR EARLY RETURN OF SUBPOENA: YES/NO**

**EXPERT WITNESSES**

**MEDICAL WITNESSES** (refer Annexure "A")

- \* Number to be called:
- \* Areas of expertise:
- \* Preferred day of week:
- \* Dates unavailable:

**NON-MEDICAL EXPERT WITNESSES** (refer Annexure "A")

- \* Number to be called:
- \* Areas of expertise:
- \* Preferred day of week:
- \* Dates unavailable:

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**LIABILITY/BREACH OF DUTY**

**LAY WITNESSES**

<u>NAME</u>	<u>AVAILABILITY</u>
1 .....	YES/NO Days to avoid:
2 .....	YES/NO Days to avoid:
3 .....	YES/NO Days to avoid:

(Attach list if space is insufficient)

**POLICE WITNESSES**

- \* Number to be called:
- \* Dates not suitable:

**QUANTUM**

**GENERAL DAMAGES/NON-ECONOMIC LOSS**

- \* All medical examinations have been held: YES/NO  
(list of outstanding examinations/reports set out in Annexure "A")
- \* All medical reports relied on have been served: YES/NO  
(list of reports set out in Annexure "A")
- \* Number of defendant's doctors required for cross-examination:

**OUT-OF-POCKET EXPENSES**

Past: Nil/Total \$.....

Future: Nil/Total \$...../Weekly or annual rate \$.....

**GRIFFITHS v KERKEMEYER CLAIM**

Any claim: YES/NO

If yes, periods claimed (past and future):

/ / - / / @ \$.....p.w.

/ / - / / @ \$.....p.w.

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**PAST ECONOMIC LOSS**

Any claimed: YES/NO

If yes, periods claimed:

/ / - / / @ \$.....p.w.

/ / - / / @ \$.....p.w.

/ / - / / @ \$.....p.w.

Have letters from employers / comparable wage records, awards, etc. been served for each period claimed: YES/NO

**WORKERS' COMPENSATION**

Is payback figure relevant: YES/NO

If Yes, what is it: \$.....

(this figure should be accurate to one week before the Review)

**FOX v WOOD FIGURE:** Nil/Total \$..... (this must be available at the Review, current to the time covered by the payback figure date)

**FUTURE ECONOMIC LOSS/LOSS OF EARNING CAPACITY**

Any claim for future economic loss: YES/NO

If Yes, at what net weekly rate: \$.....

Any claim for diminution: YES/NO

If Yes, method of quantification: \$..... per week/lump sum

**ACTUARIAL CALCULATIONS**

Are any being relied on: YES/NO

Has an up-to-date report been served: YES/NO

(refer Annexure "A")

Have details been obtained of any payments due to the Health Insurance Commission, Department of Social Security and/or Commonwealth Rehabilitation Service: YES/NO/N.A.

ANY COMPLICATIONS ANTICIPATED: If so, brief details.

## LISTING INFORMATION

<u>ESTIMATED DURATION:</u>	Arbitration:	hours/days
	Court hearing:	hours/days
<u>OVERSEAS WITNESSES:</u>	YES/NO	
<u>INTERSTATE WITNESSES:</u>	YES/NO	
<u>COUNTRY WITNESSES:</u>	YES/NO	
<u>IS INTERPRETER REQUIRED:</u>	YES/NO	

## ANNEXURE "A"

The following medical reports will be relied upon:

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The following medical reports / examinations are outstanding Nil / As follows:

NAME	DATE OF PENDING EXAMINATION

The following experts' reports (non medical) will be relied upon:

NAME AND EXPERTISE	DATE	DATE SERVED	TO CALL YES/NO

The following experts' reports (non medical) are outstanding Nil / As follows:

NAME AND EXPERTISE	DATE

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**Form 27H**

**Defendant's Information Sheet**

**PERSONAL INJURIES ACTIONS**

..... V .....

No. of 19 .....

Solicitor:

phone no. DX

Counsel:

phone no. DX

**IS DATE SOUGHT FOR EARLY RETURN OF SUBPOENA: YES/NO**

**ISSUES**

Liability in dispute:	YES/NO
Breach of duty of care in dispute:	YES/NO
Quantum in dispute:	YES/NO
Contributory negligence alleged:	YES/NO

**EXPERT WITNESSES**

**MEDICAL WITNESSES** (refer Annexure "A")

- \* Number to be called:
- \* Areas of expertise:
- \* Preferred day of week:
- \* Dates unavailable:

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**NON-MEDICAL EXPERT WITNESSES** (refer Annexure "A")

- \* Number to be called:
- \* Areas of expertise:
- \* Referred day of week:
- \* Dates unavailable:

**LIABILITY/BREACH OF DUTY**

**LAY WITNESSES**

	<u>NAME</u>	<u>AVAILABILITY</u>
1	.....	YES/NO Days to avoid:
2	.....	YES/NO Days to avoid:
3	.....	YES/NO Days to avoid:

(Attach list if space is insufficient)

**POLICE WITNESSES**

- \* Number to be called:
- \* Dates not suitable:

**QUANTUM**

**GENERAL DAMAGES/NON-ECONOMIC LOSS**

- \* All medical examinations have been held: YES/NO  
(list of outstanding examinations/reports set out in Annexure "A")
- \* All medical reports relied on have been served: YES/NO  
(list of reports set out in Annexure "A")
- \* Number of plaintiff's doctors required for cross-examination:

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**PARTICULARS**

Are any particulars outstanding: YES/NO

If yes, give details:

**ACTUARIAL CALCULATIONS**

Are any being relied on: YES/NO

Has an up-to-date report been served: YES/NO

(copies of all such reports relied on must be available at the Review and set out in Annexure "A")

**ANY COMPLICATIONS ANTICIPATED:** If so, brief details.

**LISTING INFORMATION**

**ESTIMATED DURATION:** Arbitration: hours/days

Court hearing: hours/days

**OVERSEAS WITNESSES:** YES/NO

**INTERSTATE WITNESSES:** YES/NO

**COUNTRY WITNESSES:** YES/NO

**IS INTERPRETER REQUIRED:** YES/NO

1996 No 461

District Court Rules 1973—Forms

## ANNEXURE “A”

The following medical reports will be relied upon:

The following medical reports / examinations are outstanding Nil / As follows:

NAME	DATE OF PENDING EXAMINATION

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The following experts' reports (non medical) will be relied upon:

NAME AND EXPERTISE	DATE	DATE SERVED	TO CALL YES/NO

The following experts' reports (non medical) are outstanding Nil / As follows:

NAME AND EXPERTISE	DATE

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**Form 27I**  
**Information Sheet**  
**ACTIONS OTHER THAN FOR PERSONAL INJURIES**

PLAINTIFF  DEFENDANT  OTHER PARTY

..... v .....

No. of 19 .....

Solicitor:

phone no. DX

Counsel:

phone no. DX

**IS DATE SOUGHT FOR EARLY RETURN OF SUBPOENA: YES/NO**

**INTERLOCUTORIES**

1	PARTICULARS	SOUGHT	YES/NO
		FURNISHED	YES/NO
2	DISCOVERY	SOUGHT	YES/NO
		MADE	YES/NO
3.	INSPECTION	SOUGHT	YES/NO
		CONDUCTED	YES/NO
4.	INTERROGATORIES	APPROPRIATE	YES/NO

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IF YES: ASKED	YES/NO
ANSWERED	YES/NO
5. NOTICES TO ADMIT SERVED	YES/NO
DISPUTED	YES/NO

**LAY WITNESSES**

<u>NAME</u>	<u>STATEMENT TAKEN</u>	<u>AVAILABILITY</u>
1 .....	YES/NO	YES/NO Days to avoid:
2 .....	YES/NO	YES/NO Days to avoid:
3 .....	YES/NO	YES/NO Days to avoid:

(Attach list if space is insufficient)

**EXPERT WITNESSES**

<u>NAME</u>	<u>WHETHER REPORTS AVAILABLE/SERVED</u>	<u>AVAILABILITY</u>
1 .....	YES/NO	YES/NO Days to avoid:
2 .....	YES/NO	YES/NO Days to avoid:
3 .....	YES/NO	YES/NO Days to avoid:

(Attach list if space is insufficient)

**DOCUMENTS**

1. Has duty been paid on all stampable documents? YES/NO
2. Have all books of account, invoices and the like been inspected by the party against whom they are to be introduced? YES/NO

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ANY COMPLICATIONS ANTICIPATED: If so, brief details.

**LISTING INFORMATION**

<u>ESTIMATED DURATION:</u>	Arbitration:	hours/days
	Court hearing:	hours/days
<u>OVERSEAS WITNESSES:</u>	YES/NO	
<u>INTERSTATE WITNESSES:</u>	YES/NO	
<u>COUNTRY WITNESSES:</u>	YES/NO	
<u>IS INTERPRETER REQUIRED:</u>	YES/NO	

Dated this 3rd day of September 1996

The Hon Justice R.O. Blanch

Chief Judge