

**Form 11**

**QUANTUM NEUTRAL EVALUATION FORM**

Case Number: DC/MC\* OC \_\_\_\_ of \_\_\_\_

Interlocutory judgment entered for claimant for \_\_\_\_% of the damages to be assessed

Nature of claim: PIMA/ IA\*/ \_\_\_\_ (\*delete as applicable)

*Note: Neutral evaluations will only be given in matters where the claimant and at least one other party is represented, and will only be given for claims listed in State Courts Practice Direction 45(9).*

Heads of claim		Claimant's submissions	Defendant's submissions <sup>1</sup>
<b>(I) Pain and suffering</b>		<i>Please state:</i> <ul style="list-style-type: none"> <li>- The severity of/treatment applied to the injuries, and residual disabilities (if any);</li> <li>- <u>All relevant references</u> to documents exhibited within the Court papers filed via eLitigation and/or attachments of the relevant documents to parties' electronic mail; and</li> <li>- The relevant sections of the Guidelines for the Assessment of General Damages in Personal Injury Cases applicable (if any).</li> </ul>	
1.	<b>Nature of injury:</b>  <b>Pg ____ of medical report by Dr _____</b>		
2.	<b>Nature of injury:</b>  <b>Pg ____ of medical report by Dr _____</b>		
<b>(II) Loss of future earnings / loss of earning capacity</b>		<i>Where parties rely on a multiplier and multiplicand in their submissions, parties are to ensure that their submissions also address and make reference to State Courts Practice Direction 109 and the "Actuarial Tables with Explanatory Notes for use in Personal Injury and Death Claims" referred to therein (if applicable).</i>	
		Multiplier: _____ Multiplicand: _____  Claimant's pre-accident age / occupation / salary: _____  Claimant's current age / occupation / salary: _____	Multiplier: _____ Multiplicand: _____
<b>(III) Loss of dependency</b>		<i>Where parties rely on a multiplier and multiplicand in their submissions, parties are to ensure that their submissions also address and make reference to State Courts Practice Direction 109 and the "Actuarial Tables with Explanatory Notes for use in Personal Injury and Death Claims" referred to therein (if applicable).</i>	

<sup>1</sup> Parties may modify the table above for the purposes of including the position(s) of additional parties in the action.

	(State dependants' age / relationship to the deceased and the proposed multiplier and multiplicand)	(State the proposed multiplier and multiplicand for each dependant)
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