

Telephone Mediation

Claimant Case Summary

Claimant's Case Summary Form

Please complete this form and return it to the defendant with:

- the signed mediation agreement;
- schedule of special damages;
- medical reports;
- any other documents you want the Mediator to see.

The Defendant will send all of the documentation to Trust Mediation.

The appointed Mediator will contact you upon receipt of the documents from the Defendant.

CASE DETAILS

Claimant's name	
First Defendant's name	
Second Defendant's name	
Third Defendant's name	
Case Number – <i>if issued</i>	
Accident Date	

CLAIMANT'S DETAILS

Address	
Town/City	
Postcode	

CASE SUMMARY

Provide a brief summary of the case commenting on issues relating to liability, contributory negligence, causation and quantum as appropriate



CLAIMANT'S SOLICITORS DETAILS

Firm name	
Address	
Town/City	
Postcode	
DX	
Telephone	
Fax	
Reference	
Contact name	
Direct Dial	
Email	
Second contact name	
Direct Dial	
Email	

CLAIMANT'S COSTS ESTIMATES

Costs, disbursements and VAT up to and including the mediation	£
Post-mediation costs, disbursements and VAT up to and including trial	£