{INCLUDETEXT
"C:\\Users\\rebecca\\AppData\\Local\\Packages\\PraccticeLimited.OspreyApproachSupervisor
App_expxx2x1s6rv4\\LocalState\\OspreyDocuments\\2dd2bdb6-2080-4781-a041-
a147c9d37ddf\\header.doc"**}**

Our Ref: **{** MERGEFIELD MATTER_FEE_EARNER_ID **}**/**{** MERGEFIELD
              client_no **}**/**{** MERGEFIELD matter_no **}**

Your Ref:

{ SET LETTER**{** DATE \@ "d MMMM yyyy" **}** **}{**ref LETTER \@ "d MMMM yyyy" \ *
MERGEFORMAT **}**

{ IF **{** MERGEFIELD TK_PICLIENTINFO_tkCLIENTMINOR **}** = "Yes" "**{** MERGEFIELD
TK_PICLIENTINFO_TK_LITFRNDTITLE **}** **{** MERGEFIELD
TK_PICLIENTINFO_TK_LITFRNDFORE **}** **{** MERGEFIELD
TK_PICLIENTINFO_TK_LITFRNDSURN **}**
{ MERGEFIELD TK_PICLIENTINFO_TK_LITFRNDADDR **}**" "**{** MERGEFIELD
LINKNAME_TITLE_1 **}** **{** MERGEFIELD LINKNAME_INITIALS_1 **}** **{** MERGEFIELD
LINKNAME_SURNAME_1 **}**
{ MERGEFIELD CALCULATION_ADDRESS **}**" **}**

Dear **{** IF **{** MERGEFIELD TK_PICLIENTINFO_tkCLIENTMINOR **}** = "Yes" "**{** MERGEFIELD
TK_PICLIENTINFO_TK_LITFRNDTITLE **}** **{** MERGEFIELD
TK_PICLIENTINFO_TK_LITFRNDSURN **}**" "**{** IF **{** MERGEFIELD
TK_PICLIENTINFO_tk_SALUTATION **}** = "" "**{** MERGEFIELD LINKNAME_TITLE_1 **}** **{**
MERGEFIELD LINKNAME_SURNAME_1 **}**" "**{** MERGEFIELD
TK_PICLIENTINFO_tk_SALUTATION **}**" **}**" **}**

Re: { MERGEFIELD MATTER_MATTER_DESCRIPTION }

Further to our recent discussion, I would like to thank you for instructing us in connection with
your claim for damages arising from the above accident.

I enclose an Accident Questionnaire and would be obliged if you would kindly complete this as
fully as you can and return it to me as soon as possible. I will use this information as the basis
for your claim, and it is therefore important that the information you provide is as accurate as
possible. If therefore you have any queries regarding the questionnaire, please do not hesitate
to contact me to discuss this further.

I also enclose two forms of consent, which I request you sign and return to me, to enable me to
apply for copies of your Hospital and GP records.

Liability

To succeed in a claim for damages for personal injury you will have to prove that you have
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App_expxx2x1s6rv4\\LocalState\\OspreyDocuments\\2dd2bdb6-2080-4781-a041-
a147c9d37ddf\\footer.doc"**}**

suffered injury, that someone else was negligent and that this negligence has caused your injury. It is not sufficient to only prove that you have been injured. If the claim is about the Defendant's negligence and/or breach of statutory duties, you will have to show, on balance of probabilities (i.e. that is more likely than not) that the Defendants were negligent or in breach of their statutory duties. In order to do this you will need to give full details of the allegations against the Defendants.

On the information I have currently to hand, I consider the prospects of a successful outcome in your case are reasonably good. I will of course review liability upon receipt of the completed Accident Questionnaire, and when I have been able fully to investigate the circumstances of the accident. I will keep you informed of developments as they occur, with my further views on liability.

Limitation

As you may be aware personal injury cases are subject to certain time limits. One of the most important is known as the Limitation Date. This is the date by which one of two events must have happened; either your case must have settled or proceedings must have been issued. If neither of these events have occurred then your case is known as "Statute Barred", and you will be unable to proceed.

Calculating the Limitation Date can sometimes be complicated; in your case I have calculated it as **{** MERGEFIELD TK_PICOURTDETS_TK_LIMDATE \@ "d"*ordinal **} {** MERGEFIELD TK_PICOURTDETS_TK_LIMDATE \@ "MMMM yyyy" **}**.

I will make sure that your case is dealt with expeditiously so that this does not become a problem. In return you must deal with any correspondence I send you as quickly as you are able.

Damages

Damages will be awarded provided it is established that your injury was caused by fault or blame on the part of the third party. The calculation of the sum due will be based on several matters including compensation for pain, suffering and discomfort arising from your injury, loss of wages and other financial losses such as out of pocket expenses, which are directly related to the injury or accident. Any future losses which can be established will also be included.

Documentary Evidence

Because you must prove your claim it is very important:

a. that you keep all documents including:-
    i) any expenses and receipts relating to your injuries, e.g. taxi fares to hospital or special equipment purchased;
    ii) all correspondence you have had regarding this claim;
    iii) all documents relating to your treatment; **{** IF **{** MERGEFIELD TK_ACCDETS_tkACCTYPE **}** = "Employers Liability" "

    If your claim is against your employer:-

iv)   your contract of employment;
v)   your job description;
vi)   correspondence with your employer;
vii)   copies of the accident book or any other relevant documents;
viii)   any other documents which you think may be relevant." "" **}**

IMPORTANT - you must keep all documents relevant to the claim, not only those that you will help your case.

{ IF **{** MERGEFIELD TK_ACCDETS_tkACCTYPE **}** = "Employers Liability" "
b.   Photographs of your workplace where the injuries were sustained at work: you should take photographs yourself as soon as possible so that important evidence is not lost if the situation changes;" "
b.   Photographs of the scene of the accident; you should take photographs yourself as soon as possible so that important evidence is not lost if the situation changes;" **}**

c.   Photographs of your injuries; if you have bruising or cuts and scars it would be helpful if you could take photographs of these at the earliest possible opportunity.

Next Steps

Once I have received the completed Accident Questionnaire and forms of consent from you **{** IF **{** MERGEFIELD TK_ACCDETS_tkACCTYPE **}** <> "RTA" "**{** IF **{** MERGEFIELD TK_ACCDETS_tkACCTYPE **}** <> "Please Select" "I will send a detailed letter of claim to the third party involved in this incident, along with his/her insurers." "**{** IF **{** MERGEFIELD TK_PIDEF1DETAIL_tkDEF1SURNAME **}** = "" "**{** IF **{** MERGEFIELD TK_PIDEF1DETAIL_tkDEF1CONAME **}** = "" "I will be contacting the police to find the details of the other vehicle and driver. Once I have these we will sent a detailed letter of claim to them inviting their insurance company to contact me." "I will send a detailed letter of claim to the other driver's insurance company inviting them to contact me." **}**" "" **}**" **}**" "" **}{** IF **{** MERGEFIELD TK_ACCDETS_tkACCTYPE **}** = "RTA" "**{** IF **{** MERGEFIELD TK_PIDEF1DETAIL_tkDEF1SURNAME **}** = "" "**{** IF **{** MERGEFIELD TK_PIDEF1DETAIL_tkDEF1CONAME **}** = "" "I will be contacting the police to find the details of the other vehicle and driver. When I have these I will sent a detailed letter of claim to them inviting their insurance company to contact me." "" **}** "I will send a detailed letter of claim to the other driver's insurance company inviting them to contact me." **}**" "" **}**

A medical Report will be needed to give an accurate estimate of the value of your claim in respect of injury and I will arrange for you to be medically examined in due course. If you agree with the Medical Report, I will then send it to the Defendants with a document detailing all your financial losses.

Enclosed with this letter you will also find my firm's standard Terms and Conditions, containing information about funding, which I would request that you read carefully. If you have any queries please do not hesitate to contact me. As soon as I have received the requested documentation from you I will proceed to deal with your matter.

I look forward to hearing from you.

Yours sincerely

{ MERGEFIELD CALCULATION_FEE_EARNER_DESCRIPTION }
{ MERGEFIELD PRACTICEINFO_PRACTICE_NAME*UPPER }

Enc: Accident Questionnaire
        Medical Records Authority (2 copies)
        Terms and Conditions of Business
        (enc: List of Hourly Rates**{** IF **{** MERGEFIELD TK_PICLIENTINFO_tkTYPEFUNDING **}** =
"CFA" "
                Conditional Fee Agreement)" ")" **}**