

VEDANG VALUATIONS

Litigation Support For Personal Injury And Family Law

INFORMATION CHECKLIST - PERSONAL INJURY / FATALITY

Personal Information

Name:
Date Of Birth:
Date Of Accident/Incident:
Phone/Email:

Education/Work

Status At Time Of Accident/Incident: Working/Student
Copy Of Resume:
Details Of Education:
Employment Details (Start Date/Position/Wage Information):
Previous Employment Details:
Copy Of Employee Benefits Booklet:
If Unionized:
- Copy Of Collective Agreement And Pension Plan Booklet
If Self-Employed: Details Of Business/Services Offered

Financial Information

Income Tax Returns Atleast From 5-Years Before The Accident To Date:
T4 Statements Of Remuneration Paid:
Recent Paystubs, If Working Post-Accident:
If Self-Employed:
- Statement Of Business Activities Or Form T2125
- T2 Corporate Income Tax Returns
- Unaudited Financial Statements (Balance Sheet/Income Statement)

Accident/Collateral Benefits:

Income Replacement / Non-Earner Benefits Received:
- IRB Calculation Report, Employer's Confirmation Form (OCF-2)
- Settlement Disclosure Notice
Short-Term/Long-Term Disability Benefits, CPP Disability Benefits Received.

The above checklist is not exhaustive. Please contact for any additional information or clarification.