

,									
	Plaintiff								
	vs.								
,									
	Defendant								

**PLAINTIFF'S ARBITRATION DISCOVERY REQUESTS
PERSONAL INJURY CLAIMS**

These discovery requests are directed to _____

Within thirty (30) days of service of these discovery requests, you shall provide the information sought in these discovery requests to every other party to this lawsuit.

IDENTITY OF DEFENDANT(s)

1. Set forth your full name and address. _____

INSURANCE

2. (a) Is there any insurance agreement that may provide coverage to you for this incident?

Yes ____ No ____

(b) If so, list the name of each company and the amount of protection that may be available.

WITNESSES

3. List the names, present addresses, and telephone numbers (if known) of any persons who witnessed the incident (including related events before and after the incident) and any relationship between the witness and you.

STATEMENTS AND OTHER WRITINGS

4. (a) Do you have any written or oral statements from any witness, including any plaintiff?

Yes ____ No ____

(b) If you answered yes, attached any written statements signed, adopted or approved by any witness, attach a written summary of any other statements (including oral statements), and identify any witness from whom you obtained a stenographic, mechanical, electrical or other recording that has not been transcribed. (This request does not cover a statement by a party to that party's attorney.)

I have ____ have not ____ fully complied with request 4(b).

(c) Do you have any photographs, maps, drawings, diagrams, etc. that you may seek to introduce at trial or that may otherwise pertain to this lawsuit?

Yes ____ No ____

(d) If you answered yes, attach each of these writings.

I have ____ have not ____ fully complied with request 4(c).

MEDICAL DOCUMENTS

5. (a) Do you have any medical documents relating to the plaintiff?

Yes ____ No ____

(b) If you answered yes, attach each of these documents.

I have ____ have not ____ fully complied with request 4(b).

CRIMINAL CHARGES

6. (a) Were any felony or misdemeanor criminal charges filed against you or any of your agents as a result of the incident that is the subject of this lawsuit?

Yes ____ No ____

(b) If you answered yes, list each felony or misdemeanor charge that is pending and each felony or misdemeanor conviction.

Defendant verifies that the statements made herein are true and correct. Defendant understands that false statements herein are made subject to the penalties of 18 Pa.C.S. § 4904 relating to unsworn falsifications to authorities.

Date: _____

Defendant _____