If you have any feedback on this document, you may email <u>eau@lab.gov.sg.</u>

[Your Name] [Your Address] [Your Contact Number] [Your Email] [Date of letter]

[Name of other party] [Address of other party]

FOR IMMEDIATE ATTENTION

[Note: You can send this Letter of Claim by any preferred mode, e.g. post, email, fax, etc – but remember to keep proof of the communication, e.g. a read receipt, certificate of posting or registered post.]

Dear Sir/Madam,

Claim for Injury from [Describe Incident] on [Date]

1. I am writing to seek compensation for injuries I suffered from an accident that occurred on [*Date*] at [*Address*].

Details of the Accident

- 2. [State the details of the accident -i.e.
 - (a) date of the accident,
 - (b) what happened to cause the accident,
 - *(c)* what happened after the accident, in terms of seeking medical treatment, being hospitalised, what medical treatment you received etc, and
 - (d) any other relevant matters.]
- 3. [State any evidence you have to support your case, such as photographs, witnesses, police reports and so on.]

Injuries and Impact

- 4. Due to the accident, I sustained the following injuries:
 - (a) [List the injuries resulting from the accident, as stated in your medical report(s)].
- 5. [State whether you were on medical leave, and for how long, and whether this affected your ability to work, and if so, what your occupation is. State the medical records you have confirming your injuries, treatment, medical leave, and whether your ability to work was affected.]

Claim for Compensation

- 6. I believe you have been negligent as you had/ had failed to: [*State why you think the accident is the other party's fault*].
- 7. I am claiming the following amounts:

a. General Damages (Pain and Suffering)

[This is the amount for pain and suffering from your injuries. You can refer to the following research materials for guidance on how to estimate such amounts: Guideline for the Assessment of General Damages in Personal Injury Cases, Academy Publishing, 2010, by the Subordinate Courts and Practitioners' Library, Assessment of Damages: Personal Injuries and Fatal Accidents (Third Edition), LexisNexis, 2017.]

b. Special Damages (Medical Expenses)

[You can list the expenses for your medical treatment, follow-up consultations, medical reports and any other costs, for example loss of earnings for the period you were not able to work, and state the bills, receipts, payslips and other documents to support your claim.]

Total Claim: [State amount]

Supporting Documents

- 8. I have enclosed copies of the following:
 - (a) [*Attach the documents you have referred to in paragraphs 3, 6 and 8(b) above*]

Next Steps

- 9. If you have insurance that covers such incidents, please forward this letter and all enclosed documents to your insurer immediately. Please acknowledge receipt of this letter within 14 days and inform me whether you accept my claim. If I do not receive a response by [14-day deadline], I may take legal action against you, without communicating with you any further.
- 10. If you have any questions, please contact me at [*state your contact details*]. I hope to resolve this matter amicably and look forward to your prompt response.

Yours sincerely,

[Your Signature] [Your Name]

[Sample Letter of Claim applied to a Slip and Fall scenario]

Tan Ah Kow 100 Whiteacre Avenue Blk 1-01 Singapore 123456 H/p: 91234567 <u>TAK@xmail.com</u> 1 January 2025

Greenacre Shopping Centre 100 Greenacre Road Singapore 456789

FOR IMMEDIATE ATTENTION By Registered Post

Dear Sir/Madam,

Claim for Injury from Slip and Fall at Greenacre Shopping Centre on 1 November 2024

1. I am writing to seek compensation for injuries I suffered from a fall at your outlet located at 100 Greenacre Road Singapore 456789 on 1 November 2024.

Details of the Accident

- 2. On 1 November 2024, I went shopping at Greenacre Shopping Centre. As I stepped into the Shopping Centre at the main entrance, I tripped over a 5-cm high unmarked step ("the step") and hurt myself. There was nothing to show that there was a step, like a different colour for the step, or some other warning sign.
- 3. After my fall, a store employee assisted me, and an ambulance was called. I was treated at YYY Hospital Accident & Emergency. When I later returned to the store after my discharge, I noticed that red tape had been placed on the step I tripped on. I took photographs before and after the change, which are attached to this letter. The store employee who assisted me and the paramedics who attended to me are witnesses to the incident.

Injuries and Impact

- 4. Due to the fall, I sustained the following injuries:
 - a. Fracture of my right little finger;
 - b. Left knee contusion (bruising); and
 - c. Facial contusion (bruising).
- 5. I was hospitalised for a few days and unable to work as a private driver from 1 November 2024 to 31 December 2024 (2 months) due to these injuries, so I could not earn any money during this time. Medical records from YYY Hospital confirm these injuries. I have attached the relevant documents.

If you have any feedback on this document, you may email <u>eau@lab.gov.sg.</u>

Claim for Compensation

- 6. I believe you have been negligent as you had failed to ensure a safe shopping environment by doing anything to make the step clearly visible to customers.
- 7. I am claiming the following amounts:

a. General Damages (Pain and Suffering)

- i. Fracture of right little finger: **\$2,500**
- ii. Left knee contusion: **\$2,000**
- iii. Facial contusion: \$1,500
- iv. Loss of earnings (Monthly salary of \$1,200 x 2 months): \$2,400

b. Special Damages (Medical Expenses)

- i. Hospital treatment: **\$2,000**
- ii. Follow-up consultations: \$60
- iii. Medical report fees: \$180

<u>Total Claim: \$10,640</u>

Supporting Documents

- 8. I have enclosed copies of the following:
 - a. Photographs of the accident site (before and after the red tape was added to the step);
 - b. Police report filed on 6 November 2024;
 - c. Medical records from YYY Hospital;
 - d. Documents showing my monthly income at the time of the accident; and
 - e. Medical bills and receipts.

Next Steps

- 9. If you have insurance that covers such incidents, please forward this letter and all enclosed documents to your insurer immediately. Please acknowledge receipt of this letter within 14 days and inform me whether you accept my claim. If I do not receive a response by 15 January 2025, I may take legal action against you, without communicating with you any further.
- 10. If you have any questions, please contact me at the address/email/phone number above. I hope to resolve this matter amicably and look forward to your prompt response.

Yours sincerely,

Tan Ah Know