



## CLAIM FORM

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Form 1 [Rule 8.1(3)]

IN THE SUPREME COURT OF JUDICATURE OF JURISDICTION

CLAIM NO. HCV 0020 of 2015

<b>BETWEEN</b>	<b>JENNIFER LANGDON</b>	<b>FIRST CLAIMANT</b>
<b>AND</b>	<b>JAKE PARKER</b>	<b>SECOND CLAIMANT</b>
<b>AND</b>	<b>JEFFREY HURKEL</b>	<b>FIRST DEFENDANT</b>
<b>AND</b>	<b>VERVIN LIMITED</b>	<b>SECOND DEFENDANT</b>

The Claimants **JENNIFER LANGDON**, Basketballer, of 1806 Parkland Terrace, Florida 88762, United States of America and **JAKE PARKER**, Businessman, of 18 Stony Mill Drive, in the parish of Basseterre, Jurisdiction, claim against the Defendants, **JEFFREY HURKEL**, Deliveryman, of 19 Paddingway Terrace, in the parish of Belmopan, Jurisdiction and **VERVIN LIMITED**, a company incorporated under the laws of Jurisdiction with registered office located at 271 Nottingham Parkway, Kingston 5 in the parish of Saint Peter, Jurisdiction jointly and/or severally:

- i. damages for personal injury and loss arising out of a collision which occurred on December 24, 2014 on Trifle Road, Relaxton, and which was caused by the negligence of the First Defendant who was at all material times acting as the servant and/or agent of the Second Defendant.
- ii. interest pursuant to the Law Reform (Miscellaneous Provisions) Act on the amount found to be due to the Claimants at such rate and for such period as the Court shall think fit



iii. Costs

We certify that all facts set out in this Claim Form are true to the best of my knowledge, information and belief.

We certify that the amount claimed in this Claim form exceeds \$1,000,000.00.

Dated the 3rd day of MARCH 2015.

*JLangdon*

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**JENNIFER LANGDON  
FIRST CLAIMANT**

*Jake Parker*

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**JAKE PARKER  
SECOND CLAIMANT**

**NOTICE TO THE DEFENDANT**

See the notes in Form 1 A served with this Claim Form.

This Claim Form must contain or have served with it either a Particulars of Claim or a copy of a court order entitling the claimant to serve the Claim Form without a Particulars of Claim.

If you do not complete the form of Acknowledgment of Service served on you with this Claim Form and deliver or send it to the registry (address below) so that it is received within FOURTEEN days of service of this Claim Form on you, the Claimant will be entitled to apply to have judgment entered against you. See Rules 9.2(5) and 9.3(1).



The form of Acknowledgment of Service may be completed by you or an Attorney-at-Law acting for you.

You should consider obtaining legal advice with regard to this claim

This Claim Form has no validity if it is not served within one year of the date below unless it is accompanied by an order extending the same. See Rule 8.14(1)

[SEAL]

The Registry is at the Supreme Court, King Street, Kingston, Telephone number 922-8300. The office is open between 9:00am and 4:00pm Mondays to Fridays except Public Holidays

DATED THE 3<sup>RD</sup> DAY OF MARCH 2015

The Claimant's address for service is that of his Attorney-at- JOHNNY WALKER, 876 Lady Musgrave Road, Kingston 10 in the parish of Saint Andrew. Telephone number: 876-999-8765 and facsimile number:876-999-8766.

Filed by JOHNNY WALKER, 876 Lady Musgrave Road, Kingston 10, Attorney No. 40987, Attorney-at-Law for and on behalf of the Claimants, whose address for service is that of their Attorney-at-Law. Telephone number: 876-999-8765 and facsimile number: 876-999-8766.





## **PRESCRIBED NOTES FOR DEFENDANTS (CLAIM FORM)**

Form 1A [Rule 8.16(1)(c)]

This Form is important.

When you get this document you should consider getting legal advice.

### **ACTION TO BE TAKEN ON RECEIPT OF THIS FORM**

The Claimant is making a claim against you in the court. If you do nothing, judgment may be entered against you. That means that the Claimant will be entitled to take steps to enforce payments from you of any money he is claiming and you will have no right to be heard except as to the amount of any costs claimed and the way in which you can pay the judgment unless you apply to set judgment aside.

### **WHAT CAN YOU DO**

You can:

#### **A. Defend the claim**

If you would like to do this you must:

- (i) Complete the form of Acknowledgement of Service and return it to the registry so that they receive it within **FOURTEEN DAYS** of the date on which you received this Form; and
- (ii) Provided that a Particulars of Claim was served on you with the Claim Form, complete the form of Defence, form 5, or submit some other form of Defence showing why you dispute the claim, giving full details of all the facts on which you intend to rely if there is a trial. This must be delivered or sent to the registry so that they receive it within **FORTY TWO DAYS** of the date on which you received this Form and a copy must be served on the Claimant's Attorney-at-Law (or the Claimant if he has no Attorney- at-Law) at the given address.

Note, where permission has been given under rule 8.2 for a Claim Form to be served without a Particulars of Claim, the period for filing a Defence is the period of **FORTY TWO DAYS** after the service of the Particulars of Claim.

After you have filed your Defence you will be given details of the date, time and place of a case management conference at which a judge will decide what issues have to be determined by the court and give directions about what needs to be done before the case is tried. You must attend that hearing.

#### **Admit the whole of the Claim**

Complete the form of Acknowledgement of Service stating that you admit to the claim and return it to the registry so that they receive it within **FOURTEEN DAYS** of the date on which





you received this Form.

If you can pay the amount stated on the Claim Form including fees, costs and interest you should pay this to the Claimant within FOURTEEN DAYS and no further steps can be taken against you. You must add interest at the daily rate shown from the date stated on the Claim Form.

If you cannot pay this sum in full you may apply to pay by instalments. If you wish to do so you must complete form 6 and return this to the court with your Acknowledgment of Service.

**Admit part of the claim and defend the rest**

Complete the form of Acknowledgement of Service stating how much you admit and return it to the registry so that they receive it within FOURTEEN DAYS of the date on which you received this form AND complete the Defence form, form 5.

You may also:-

Pay the amount that you admit directly to the Claimant OR apply to pay that sum by instalments. If so you should follow the procedure indicated under B.

**Make a claim against the Claimant**

**If you would like to do this you must:**

- (i) Complete the form of Acknowledgement of Service and return it to the registry so that they receive it within FOURTEEN DAYS of the date on which you received this Form; and
- (ii) Provided that a Particulars of Claim was served with the Claim Form, complete the form of Defence, form 5, giving details of your defence if any to the claim as under A above and also the claim that you are making against the Claimant and return it to the registry so that they receive it within FORTY TWO DAYS of the date on which you received this Form.

Note, where permission has been given under rule 8.2 for a Claim Form to be served without a Particulars of Claim, the period for filing a Defence is the period of FORTY TWO DAYS after the service of the Particulars of Claim.

If you admit the Claim but wish to counterclaim you should say so. If your counterclaim is for a lower sum than the claim, you may pay the difference between the amount that the Claimant claims from you and the amount that you claim from him, directly to the Claimant OR apply to pay the sum by instalments. If you wish to pay by instalments, you should follow the procedure directed under B.

You will then be given details of the date, time and place of a case management conference at which a judge will decide what issues have to be determined by the court and give directions about what needs to be done before the case is tried. You must attend that hearing.



**REMEMBER, IF YOU DO NOTHING, JUDGMENT MAY BE ENTERED AGAINST YOU WITHOUT ANY FURTHER WARNING.**

Copies of forms may be obtained from the registry or at [www.sc.gov.jm](http://www.sc.gov.jm)





**ACKNOWLEDGEMENT OF SERVICE OF CLAIM FORM**

Form 3 [Rule 8.16(1)(a)]

**IN THE SUPREME COURT OF JUDICATURE OF JURISDICTION**

**CLAIM NO.** HCV 0020 of 2015

**BETWEEN**                    **JENNIFER LANGDON**                    **FIRST CLAIMANT**  
**AND**                            **JAKE PARKER**                            **SECOND CLAIMANT**

**AND**                            **JEFFREY HURKEL**                            **FIRST DEFENDANT**  
**AND**                            **VERVIN LIMITED**                            **SECOND DEFENDANT**

**WARNING:** If this form is not fully completed and returned to the registry at the address below within **FOURTEEN DAYS** of service of the Claim Form on you, the Claimant will be entitled to apply to have the judgment entered against you. See Rules 9.2(5) and 9.3(1). If he does so you will have no right to be heard by the court except as to the costs or the method of paying any judgment unless you apply to set judgment aside.

- . Have you received the Claim Form with the above claim number? YES/NO
- . If so, when? \_/\_/\_\_\_
- . Did you also receive the Claimant's Particulars of Claim? YES/NO
- . If so, when? \_/\_/\_\_\_
- . Are your names properly stated on the Claim Form? YES/NO  
If not, what are your full names?  
.....
- . Do you intend to defend the claim? YES/NO  
If so you must file a Defence within 42 days of the service of this claim on you. See Rule 10.3(1)
- . Do you admit to the whole of the claim? YES/NO  
If you do you should consider to either:



- (a) pay the claim directly to the Claimant or his attorney-at-law, or
- (b) complete the application form to pay the claim by instalments.

If you pay the whole claim together with the costs and interest as shown on the Claim Form within 14 days, you will have no further liability for costs.

8. Do you admit any part of the claim? YES/NO

If you do you may -

- (a) pay the money that you admit directly to the Claimant or his attorney-at-law, or
- (b) complete the application form to pay him by instalments

9. If so how much do you admit? .....

If you dispute the balance of the claim you must also file a Defence within 42 days of service of the Claim Form on you or judgment may be entered against you for the whole amount claimed.

10. What is your own address? .....

.....

11. What is your address for service?  
 If you are acting in person you must give an address to which documents may be sent either from other parties or from the court.  
 You should also give your telephone number and fax number if any.

.....

.....

.....

Dated day of 20

Signed .....

[Defendant in Person] [Defendant's Attorney-at-law]

Filed by (specify name and address of Attorney-at-Law or firm of Attorneys-at Law filing the Acknowledgement of Service).







**DEFENCE**

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Form 5 [Rule 8.16(1)(b)]

**IN THE SUPREME COURT OF JUDICATURE OF JURISDICTION**

**CLAIM NO.**

**HCV 0020 of 2015**

**BETWEEN  
AND**

**JENNIFER LANGDON  
JAKE PARKER**

**FIRST CLAIMANT  
SECOND CLAIMANT**

**AND  
AND**

**JEFFREY HURKEL  
VERSIN LIMITED**

**FIRST DEFENDANT  
SECOND DEFENDANT**

I dispute the claim on the following grounds -

I certify that all the facts set out in my Defence are true to the best of my knowledge information and belief.

Dated day of 20

Signed .....

Defendant

**COUNTERCLAIM**

I claim against the Claimant



(Set out details of the remedy or relief sought)

on the following grounds -

I certify that all the facts set out in my counterclaim are true to the best of my knowledge, information and belief and that I am entitled to the remedy claimed

Signed .....

Defendant

Dated day of 20

Filed by (specify name and address of Attorney-at-Law or firm of Attorneys-at- Law filing the Defence)

**NOTES:**

- (a) The Defendant may set out his defence in any way he chooses - it is not necessary to use this form.
- (b) The Defendant must state-
  - which allegations in the claim he admits
  - which he denies
  - which he neither admits or denies because he does not know whether they are true
  - identify any documents which he considers necessary to his case
- (c) The Defendant must give his reasons for denying any allegations made by the Claimant.
- (d) The Defendant must set out clearly all the facts on which he relies to dispute the Claim and must set out any different version of the events on which he relies.
- (e) The Defendant may not be allowed at the trial to give evidence about any fact which is not set out in the defence.
- (f) If the Defendant wishes to counterclaim he must-
  - specify any remedy that he seeks against the claimant
  - include a short statement of all facts on which he relies
  - identify any documents which he considers necessary to his case
- (g) Where the Defendant is represented by an attorney-at-law, he must also sign the Form and give his address for service.
- (h) A Defendant who defends in a representative capacity must say:-
  - . what that capacity is and
  - . whom he represents.





## **PARTICULARS OF CLAIM**

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IN THE SUPREME COURT OF JUDICATURE OF JURISDICTION

CLAIM NO. HCV 0020 of 2015

<b>BETWEEN</b>	<b>JENNIFER LANGDON</b>	<b>FIRST CLAIMANT</b>
<b>AND</b>	<b>JAKE PARKER</b>	<b>SECOND CLAIMANT</b>
<b>AND</b>	<b>JEFFREY HURKEL</b>	<b>FIRST DEFENDANT</b>
<b>AND</b>	<b>VERVIN LIMITED</b>	<b>SECOND DEFENDANT</b>

1. On December 24, 2014 the Claimants were standing by a stall on the sidewalk at the Spend Money Market located at 18-22 Trifle Road, Relaxton, when they were struck, thrown to the ground and partially run over by the VW T2 Bay Window panel van licence number BK001 owned by the Second Defendant and driven by the First Defendant who was at all material times acting as the servant and/or agent of the Second Defendant.
2. This collision was caused by the negligence of the First Defendant.

### **PARTICULARS OF NEGLIGENCE OF THE FIRST DEFENDANT**

- (a) Failing to keep any or any proper lookout;
- (b) Failing to see the Claimants in time or at all;
- (c) Failing to stop, slow down or steer so as to avoid the collision;
- (d) Driving at an excessive and/or improper speed;
- (e) Driving in a reckless and dangerous manner;



- (f) Driving without due care and attention;
  - (g) Failing to give any or any sufficient warning of his approach;
  - (h) Speaking on his cellular phone when it was manifestly unsafe to do so;
  - (i) Failing to stop, slow down, swerve or otherwise manage and/or operate the Second Defendant's motor vehicle so as to avoid the said collision;
  - (j) Causing the Second Defendant's motor vehicle to run off the road and onto a sidewalk at the Spend Money Market on Trifle Road, Relaxton; and
  - (k) Causing the Second Defendant's motor vehicle to collide with persons standing on the sidewalk by a stall located at the Spend Money Market.
3. As a result of the matters set out above the Claimants have suffered personal injuries, loss and damage.

### **PARTICULARS OF INJURY OF THE FIRST CLAIMANT**

The First Claimant who is 24 years old at the date of the accident, having been born on February 16, 1990 was hospitalized in Jamaica from December 24-31, 2014 and in Florida, the United States of America from January 1-20, 2015.

She suffered:

- (a) unconsciousness;
- (b) shock and pain;
- (c) fractures of the left humerus, radius, ulna, femur, patella, tibia, fibula and tarsal;
- (d) Injury to neurovascular structure of the left arm and left leg;





- (e) Multiple bruises, lacerations and abrasions;
- (f) 90% permanent partial disability of the left upper extremity;
- (g) 90% permanent partial disability of the left lower extremity;  
and
- (h) 80% disability of the whole person.

The First Claimant will rely, as part of her case, on the medical report of Dr. Jonathon Pollack dated 25<sup>th</sup> February 2015 which sets out further particulars of the First Claimant's injuries. A copy of the medical report is attached hereto.

### **PARTICULARS OF INJURY OF THE SECOND CLAIMANT**

The Second Claimant who was 25 years old at the time of the accident, having been born on February 21, 1989 was hospitalized in Jamaica December 24, 2014 to January 25, 2015.

He suffered:

- (a) unconsciousness;
- (b) severe pain;
- (c) fractured skull;
- (d) traumatic brain injury;
- (e) loss of memory;
- (f) fractured pelvis; and
- (g) Multiple lacerations and abrasions.

The Second Claimant will rely, as part of his case, on the medical report of Dr. Maria Kersink, which sets out further particulars of the



Second Claimant's injuries. A copy of the medical report is attached hereto.

**PARTICULARS OF SPECIAL DAMAGES**  
**OF THE FIRST CLAIMANT**

	US\$
(a) loss of earnings from December 24, 2014 to present and continuing at US\$100,000 a month;	300,000.00
(b) cost of nurse from January 20, 2015 to present at \$5,000 per month and continuing;	10,000.00
(c) Transportation expenses to and from hospital and continuing;	2,000.00
(d) Power wheelchair	1,500.00
(e) Hospital expenses	100,000.00
(f) Doctor's fees for medical visits and continuing	50,000.00
(g) Physiotherapy Sessions: 20 sessions at US\$500 per session and continuing	10,000.00
(h) Other Medical Expenses and continuing	<u>4,000.00</u>
	<u>477,500.00</u>

**PARTICULARS OF SPECIAL DAMAGE**  
**OF THE SECOND CLAIMANT**

	J\$
(a) loss of earnings from December 24, 2014 to present and continuing at J\$1,000,000.00 per month;	2,000,000.00
(b) cost of nurse from January 25, 2015	



	to present at \$80,000.00 per month and continuing;	100,000.00
(c)	Transportation expenses to and from hospital and the doctor and continuing;	80,000.00
(d)	Hospital expenses	1,000,000.00
(e)	Doctor's fees for medical visits and continuing	50,000.00
(f)	Other Medical Expenses and continuing	<u>40,000.00</u>
		<u>3,270,000.00</u>

4. Further, the Claimants claim interest pursuant to the Law Reform (Miscellaneous Provisions) Act on the amount found to be due to the Claimant at such rate and for such period as the court shall think fit.

AND THE CLAIMANT claims:-

- (a) General damages
- (b) Special damages
- (c) Interest
- (d) Costs

Dated the 3<sup>rd</sup> day of March 2015.

*Johnny Walker*

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**JOHNNY WALKER**  
**Claimants' Attorney-at-law**



We certify that all facts set out in this Claim Form are true to the best of our knowledge, information and belief. We certify that the amount claimed in this Claim form exceeds \$1,000,000.00

*JLangdon*

---

**JENNIFER LANGDON  
FIRST CLAIMANT**

*Jake Parker*

---

**JAKE PARKER  
SECOND CLAIMANT**

Filed by JOHNNY WALKER, 876 Lady Musgrave Road, Kingston 10, Attorney No. 40987, Attorney-at-Law for and on behalf of the Claimants, whose address for service is that of their Attorney-at-Law. Telephone number: 876-999-8765 and facsimile number: 876-999-8766.





**MEDICAL REPORT FOR JENNIFER LANGDON**

**TO: THE SUPREME COURT OF JUDICATURE OF THE JURISDICTION**

**DATE: FEBRUARY 25, 2015**

**FROM: DR. JONATHON POLLACK, DEPARTMENT OF SPORTS MEDICINE, FLORIDA HOSPITAL, 765 PENCHANT STREET, FLO089, UNITED STATES OF AMERICA**

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1. **DR. POLLACK**

1.1 My name is Dr. Jonathon Pollack and I am the Chief Resident of the Sports Medicine Unit at the Florida Hospital.

1.2 My scholastic history is as follows:

1.2.1 MD, Cornshell University of Medicine, New York, 1985;

1.2.2 Intern, Bethesda Hospital, New York, 1985-1986;

1.2.3 Resident, Peakachoo Orthopaedic Hospital, Miami, Florida 1986-1990;

1.2.4 Sports Medicine Fellow, University of Cycin Peak, Florida 1990-1991.

1.3 Further details of my qualifications, awards, publications and otherwise are set out in my attached resume.<sup>114</sup>

2. **CONSULTATION ON FEBRUARY 18, 2015**

Ms. Jennifer Langdon is a twenty-six year old right hand dominant female who has been a patient of this hospital since January 1, 2015.

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<sup>114</sup> Not included

She has been and continues to be constantly in pain and is currently unable to walk and has lost function in her left arm.

Her injuries resulted from a motor vehicle accident in Jamaica December 24, 2014. She was initially admitted to the Relaxton Hospital, Jurisdiction and then flown to this hospital on January 1, 2015.

When she arrived at the hospital she presented with many broken bones in particular to the left side of her body including fractures of the left humerus, radius, ulna, femur, patella, tibia, fibula and tarsal. She also exhibited injury to neurovascular structure of the left arm and left leg. Ms. Langdon also had multiple bruises, lacerations and abrasions.

She underwent three surgical procedures and was discharged from the hospital on January 20, 2015. Her home had been suitably outfitted for her recovery and she requires and has thus far been provided with twenty-four hour care.

Ms. Langdon has been engaging in physiotherapy.

She now comes in for my opinion.

### 3. PAST MEDICAL HISTORY

Her history before December 24, 2014 is not remarkable.

### 4. MEDICATION

She is currently on hydrocodone-acetaminophen oral for pain.

### 5. ALLERGIES

She is allergic to penicillin.

6. SOCIAL HISTORY

Ms. Langdon is a social drinker. She does not smoke.

7. PHYSICAL EXAM & CONCLUSION

After reviewing Ms. Langdon's history and her current state it is my opinion that she will not recover much beyond her current state. She is therefore left with:

- (a) 90% permanent partial disability of the left upper extremity;
- (b) 90% permanent partial disability of the left lower extremity; and
- (c) 80% disability of the whole person.

She is a professional basketball player and her current injuries will prevent her from ever playing basketball professionally again.

She will not be able to carry out usual everyday tasks, must use a wheelchair and will require professional medical care for the rest of her life.

DATED THE 25<sup>th</sup> DAY OF February, 2015

*JonPollack*

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Dr. Jonathon Pollack



February 20, 2015

Supreme Court  
King Street  
Kingston

Dear Sirs:

**Re: Medical Report of Mr. Jake Parker**

I am Dr. Maria Kersink and I am a registered medical practitioner specialising in Neurology. My practice is at the Brain Specialists located at the address stated above.

I studied at the University of the West Indies and have a Bachelor of Medicine, Bachelor of Surgery (MB BS) (Hon.), Post Graduate Doctor of Medicine, Surgery (DM), eight years neurosurgical residency at the Camwall Hospital, United Kingdom.

I first saw Jake Parker at the Relaxton Hospital on December 26, 2014 where I had been asked to visit, as he needed to see a neurosurgeon.

He had no remarkable history prior to December 24, 2014 when he was involved in a motor vehicle accident.

When I saw Mr. Parker on December 26, 2014 he was unconscious. In light of the injuries he had received including a fractured skull I induced a medical coma and revived him from same January 2, 2015.

His injuries included a fractured skull and traumatic brain injury. He also suffered a fractured pelvis, multiple lacerations and abrasions.

Mr. Parker has in most part recovered from his injuries.

He is however constantly in pain and has been prescribed oxycodone.

Mr. Parker also presents with memory loss for approximately one year prior to the accident.

It is my opinion that he will not recover those memories.

DATED THE 20<sup>th</sup> DAY OF February, 2015

*MKersink*

Dr. Maria Kersink



**ACKNOWLEDGEMENT OF SERVICE OF CLAIM FORM OF THE FIRST DEFENDANT**

Form 3 [Rule 8.16(1)(a)]

**IN THE SUPREME COURT OF JUDICATURE OF JURISDICTION**

**CLAIM NO.** HCV 0020 of 2015

<b>BETWEEN</b>	<b>JENNIFER LANGDON</b>	<b>FIRST CLAIMANT</b>
<b>AND</b>	<b>JAKE PARKER</b>	<b>SECOND CLAIMANT</b>
 <b>AND</b>	 <b>JEFFREY HURKEL</b>	 <b>FIRST DEFENDANT</b>
<b>AND</b>	<b>VERVIN LIMITED</b>	<b>SECOND DEFENDANT</b>

**WARNING:** If this form is not fully completed and returned to the registry at the address below within **FOURTEEN DAYS** of service of the Claim Form on you, the Claimant will be entitled to apply to have the judgment entered against you. See Rules 9.2(5) and 9.3(1). If he does so you will have no right to be heard by the court except as to the costs or the method of paying any judgment unless you apply to set judgment aside.

- |    |  |            |
|----|--|------------|
| 1. | Have you received the Claim Form with the above claim number?  | YES        |
| 2. | If so, when?   | 31/03/2015 |
| 3. | Did you also receive the Claimant's Particulars of Claim?  | YES/NO     |
| 4. | If so, when?   | 31/03/2015 |
| 5. | Are your names properly stated on the Claim Form?<br>If not, what are your full names?<br>.....  | YES        |
| 6. | Do you intend to defend the claim?<br>If so you must file a Defence within 42 days of the service of this claim on you. See Rule 10.3(1) | YES        |
| 7. | Do you admit to the whole of the claim?<br>If you do you should consider to either:<br>(a) pay the claim directly to the Claimant or his | NO         |





- attorney-at-law, or
- (b) complete the application form to pay the claim by instalments.

If you pay the whole claim together with the costs and interest as shown on the Claim Form within 14 days, you will have no further liability for costs.

8. Do you admit any part of the claim? NO

If you do you may -

- (b) pay the money that you admit directly to the Claimant or his attorney-at-law, or
- (b) complete the application form to pay him by instalments

9. If so how much do you admit? .....N/A.....

If you dispute the balance of the claim you must also file a Defence within 42 days of service of the Claim Form on you or judgment may be entered against you for the whole amount claimed.

10. What is your own address? 19 Paddingway Terrace, Belmopan, Jurisdiction

11. What is your address for service?

If you are acting in person you must give an address to which documents may be sent either from other parties or from the court.  
You should also give your telephone number and fax number if any.

c/o Kate Bosman  
Bosnan, Channing & Green  
First Defendant's Attorney-at-Law  
32 Marchesa Avenue,  
Belmopan

Dated 5<sup>th</sup> day of April 2015

**BOSNAN, CHANNING & GREEN**

*K Bosmann*

Signed .....

First Defendant's Attorney-at-Law

Filed by Kate Bosman, 32 Marchesa Avenue, in the parish of Belmopan, Attorney No. 42225, of Bosnan, Channing and Green, Attorney-at-Laws for and on behalf of the First Defendant, whose address for service is that of his Attorneys-at-Law. Telephone number: 876-444-2256 and facsimile number: 876-444-2257.





**ACKNOWLEDGEMENT OF SERVICE OF CLAIM FORM OF THE  
SECOND DEFENDANT**

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Form 3 [Rule 8.16(1)(a)]

**IN THE SUPREME COURT OF JUDICATURE OF JURISDICTION**

**CLAIM NO.**      HCV 0020 of 2015

**BETWEEN                      JENNIFER LANGDON                      FIRST CLAIMANT**  
**AND                              JAKE PARKER                              SECOND CLAIMANT**

**AND                              JEFFREY HURKEL                              FIRST DEFENDANT**  
**AND                              VERSIN LIMITED                              SECOND DEFENDANT**

**WARNING:** If this form is not fully completed and returned to the registry at the address below within **FOURTEEN DAYS** of service of the Claim Form on you, the Claimant will be entitled to apply to have the judgment entered against you. See Rules 9.2(5) and 9.3(1). If he does so you will have no right to be heard by the court except as to the costs or the method of paying any judgment unless you apply to set judgment aside.

- |    |  |               |
|----|--|---------------|
| 1. | Have you received the Claim Form with the above claim number?  | YES           |
| 2. | If so, when?   | April 3, 2015 |
| 3. | Did you also receive the Claimant's Particulars of Claim?  | YES           |
| 4. | If so, when?   | April 3, 2015 |
| 5. | Are your names properly stated on the Claim Form?<br>If not, what are your full names?<br>.....  | YES           |
| 6. | Do you intend to defend the claim?<br>If so you must file a Defence within 42 days of the service of this claim on you. See Rule 10.3(1) | YES           |
| 7. | Do you admit to the whole of the claim?<br>If you do you should consider to either:  | NO            |



- (a) pay the claim directly to the Claimant or his attorney-at-law, or
- (b) complete the application form to pay the claim by instalments.

If you pay the whole claim together with the costs and interest as shown on the Claim Form within 14 days, you will have no further liability for costs.

8. Do you admit any part of the claim? NO

If you do you may -

- (c) pay the money that you admit directly to the Claimant or his attorney-at-law, or
- (b) complete the application form to pay him by instalments

9. If so how much do you admit? .....

If you dispute the balance of the claim you must also file a Defence within 42 days of service of the Claim Form on you or judgment may be entered against you for the whole amount claimed.

10. What is your own address? 271 Nottinghill Parkway, Kingston 5 in the parish of Saint Peter, Jurisdiction.

11. What is your address for service?

If you are acting in person you must give an address to which documents may be sent either from other parties or from the court.

You should also give your telephone number and fax number if any.

c/o Kate Bosman  
 Bosnan, Channing & Green  
 Defendants' Attorney-at-Law  
 32 Marchesa Avenue,  
 Belmopan

Dated 10th day April of 2015

**BOSNAN, CHANNING & GREEN**

*K Bosman*

Signed .....

Attorneys-at-Law for the Defendants

Filed by Kate Bosman, 32 Marchesa Avenue, in the parish of Belmopan, Attorney No. 42225, of Bosnan, Channing and Green, Attorney-at-Laws for and on behalf of the Defendants, whose address for service is that of their Attorneys-at-Law. Telephone number: 876-444-2256 and facsimile number: 876-444-2257.





**DEFENCE**

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**IN THE SUPREME COURT OF JUDICATURE OF JURISDICTION**

**CLAIM NO.**

**HCV 0020 of 2015**

<b>BETWEEN</b>	<b>JENNIFER LANGDON</b>	<b>FIRST CLAIMANT</b>
<b>AND</b>	<b>JAKE PARKER</b>	<b>SECOND CLAIMANT</b>
<b>AND</b>	<b>JEFFREY HURKEL</b>	<b>FIRST DEFENDANT</b>
<b>AND</b>	<b>VERSIN LIMITED</b>	<b>SECOND DEFENDANT</b>

1. Save that it is denied that the Claimants were standing by a stall on a sidewalk paragraph 1 of the Particulars of Claim is admitted. The collision occurred because the Claimants suddenly stepped onto the roadway and into the path of the Second Defendant's motor vehicle.
2. The Defendants deny that the First Defendant was negligent as alleged in paragraph 2 of the Particulars of Claim or at all. The Defendants will say that the said collision was caused by and/or contributed to by the negligence of the Claimants.

**PARTICULARS OF NEGLIGENCE OF THE  
FIRST AND SECOND CLAIMANTS**

- (a) Stepping into a road when it was manifestly unsafe to do so;
- (b) Failing to have any or any proper lookout;
- (c) Failing to avoid the Second Defendant's motor vehicle;





- (d) Failing to stay on the sidewalk;
  - (e) Traversing the Spend Money Market without due care and attention;
  - (f) Failing to look to see if it was safe to step into the road before doing so; and
  - (g) Failing to stop, step aside or take any other action to avoid being struck by the Defendant's car.
3. In response to paragraph 3 of the Particulars of Claim the Defendants deny liability to the Claimants of any loss and damage sustained and/or any future losses and expenses as alleged.
  4. The Defendants require the Claimants to prove the extent of their injuries and any loss and damage sustained.
  5. Save as is hereinbefore expressly admitted the Defendants deny each and every allegation contained in the Particulars of Claim as if same had been set out and denied seriatim.

We, **JEFFREY HURKEL and VERSIN LIMITED** certify that all the facts set out in this Defence are true to the best of our knowledge, information and belief.

**DATED 24<sup>th</sup> DAY OF APRIL 2015**

*JHurkel*

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**JEFFREY HURKEL  
FIRST DEFENDANT**



*Putin Sanchay*

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**PUTIN SANCHAY  
MANAGING DIRECTOR  
VERSIN LIMITED**

**BOSNAN, CHANNING & GREEN**

*K Bosmann*

Signed .....

Attorneys-at-Law for the Defendants

Filed by Kate Bosman, 32 Marchesa Avenue, in the parish of Belmopan, Attorney No. 42225, of Bosnan, Channing and Green, Attorney-at-Laws for and on behalf of the Defendants, whose address for service is that of their Attorneys-at-Law. Telephone number: 876-444-2256 and facsimile number: 876-444-2257.