Form E. Uniform Interrogatories by Plaintiff in Motor Vehicle Collision Case: Special Civil Part

All questions must be answered unless the court otherwise orders or unless a claim of privilege or protective order is made in accordance with R. 4:17-1(b)(3).

PLEASE ANSWER THE FOLLOWING QUESTIONS WITH RESPECT TO THE COLLISION DESCRIBED IN THE PLAINTIFF'S COMPLAINT.

- 1. Did you own one of the vehicles involved in the accident?
- 2. Were you driving one of the vehicles involved in the accident?
- 3. If it was your vehicle, but you were not driving, who was?
- 4. If it was your vehicle, but you were not driving, what was the driver doing with your vehicle?
- 5. If you were not the owner of the vehicle you were driving, give the name, address and telephone number of the owner.
- 6. If you were not the owner of the vehicle you were driving, list the vehicles you owned on the date of the accident.
- 7. If you were not driving your vehicle, give the name, address and telephone number of the person who was driving.
- 8. If you were not the driver, how did the driver get your vehicle and what was the driver doing with it?
- 9. List the names and addresses of the occupants of the vehicle and their location in the vehicle.
- 10. List the registration number, year, make and model of the vehicles involved in the collision.
- 11. Give details of the accident: A) date; B) time; C) weather; D) visibility and E) road condition.
- 12. Where did the accident happen? Street and town.
- 13. Which street was your vehicle on at the time of the accident?
- 14. Which way was your vehicle going at the time of the accident?
- 15. Where on the roadway did the collision take place? You may include a sketch for greater clarity.
- 16. Please state: A) How did this accident happen? B) Who was at fault and how? C) Any other factors you believe contributed to the accident.
- 17. Did the other driver break any laws? If so, which laws?
- 18. Please state: A) Were there traffic lights, signs, or other controls for any of the vehicles involved in the accident? B) What kind of lights, signs or controls? C) Where were they? D) Who were they for?
- 19. Please state: A) Did the accident happen in an intersection? B) Who was in the intersection first? C) Did your vehicle stop before it entered the intersection? D) How fast was your vehicle going when it entered the intersection?
- 20. Please state: A) How far was your vehicle from the other vehicle when it was first seen? B) How fast was your vehicle going when the other vehicle was first seen? C) How fast was the other vehicle going when it was first seen?
- 21. After the accident where did the vehicles stop?
- 22. State what part of your vehicle came into contact with what part of the other vehicle or vehicles involved.
- 23. List the names and addresses of anyone who may have direct knowledge of any facts relating to the collision or case. Include in your answer eyewitnesses and experts or other witnesses who may testify at trial. Attach copies of expert reports, if any.
- 24. State whether you had insurance at the time of the accident. If yes, state name and address of all insurance companies and policy numbers.

CERTIFICATION

I hereby certify that the foregoing answers to interrogatories are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

I hereby certify that the copies of the reports annexed hereto rendered by proposed expert witnesses are exact copies of the entire report or reports rendered by them; that the existence of other reports of said experts, are unknown to me, and if such become later known or available, I shall serve them promptly on the propounding party.

DATED:	SIGNED: