ESTIMATES OF LOSSES IN WRONGFUL DEATH CASES
DOCUMENTS & INFORMATION REQUIRED

Dates of Birth and The Date of Death

1. Deceased: date of birth and date of death.

2. Partner: date of birth.

3. Length of marriage or common law partnership.

4. Children (if applicable): names and dates of birth. Please specify whether or not the children are resident in the family home. If any children are not resident in the family home, please advise as to the date that they left the family home.

5. The names and dates of birth of dependant relatives.

6. The date for the calculations to be based upon. If a trial date has been set, please advise. Otherwise, we recommend a valuation date that is at least 3 or 4 months ahead of the date from which all the information has been collected.

Employment Income and Interest Income

1. Income tax returns of deceased (T1 General Income Tax Forms preferred). It is preferable to provide income tax returns for at least 4 or 5 years.

2. Income tax returns of partner. It is preferable to provide income tax returns for at least 4 or 5 years before the accident and all years from the accident to the valuation date/trial date.

3. For both partners if (applicable) - job title, union affiliation, union agreements or copies of hourly/annual rates of pay before and after the accident.

4. Information regarding career intentions details of retraining if applicable for the surviving spouse or partner. If re-training is being undertaken or considered, outline possible date of completion and whether or not the course is full-time or part-time.

5. For both partners (if applicable), provide details of non-wage benefits. These may include M.S.P., M.S.A., dental, long term disability, wage indemnity, life insurance, accidental death and dismemberment coverage and related benefits. Please advise if the non-wage benefits are paid for by the employer of the surviving spouse or were paid for by the employer of the deceased.

Retirement Income

1. Did the deceased or the surviving spouse of the deceased (if applicable) have a pension plan through employment? If yes, then please provide the pension plan statement(s) and members' pension plan booklet.

2. Contributions to the Canada Pension Plan. If possible, please provide a statement of contributions to the Canada Pension Plan for both the deceased and the surviving spouse.

3. Entitlement to Old Age Security. If either the deceased or the spouse of the deceased was not born in Canada, please advise as to the dates of immigration as this may impact entitlement to Old Age Security.

4. Retirement Savings: the balance of the deceased's and his/her partner's RRSP portfolio at the time of death. Also provide the current value of the partner's RRSP portfolio together with the value of funds inherited as a result of the death.

5. Other savings: the value of savings accounts held at the time of the death. The value of any funds inherited by the partner of the deceased as a result of the death. The value of savings held by the partner at the valuation or trial date.

Assumptions For Economic Dependancy Calculations

1. Assumed date(s) of retirement for the deceased and his/her partner.

2. If children are present, the assumed dates at which they are assumed to become independent. Typically, calculations assume that the children will become independent between the ages of 19 to 22. If the children who are either enrolled in further education or intend to enter into further education, please advise as to the expected start dates and completion dates.

3. Please try and complete the attached family expenses form **for the year before the accident**.

Housing and Mortgage Payments For Each Property Owned

1. The value of the unpaid balance of the mortgage outstanding at the time of the death.

2. The current interest rate charged on the mortgage, term of the current mortgage agreement, monthly payment.

3. For the current year, the amount of mortgage payments devoted to interest and principal payments (if known).

Other Expenditures

1. If payments are being made to the children or dependant adult relatives (perhaps for education or by way of an allowance), the amount of payments being made to each child or adult and confirmation of the number of years that payments are expected to continue. Include absent accident information and with accident information.

Loss of Household Services

1. Please try and complete the attached inventory of time use form. Remember, the form **must be completed for the period before the accident**.

2. If children are present, specify the number of children living at home at the time of the accident. Also advise as to the dates that children either left the family home or the dates in which they are assumed to leave the family home. Note that if children are studying away from home, they may return to the family home for periods during their years of study. If this is the case, please specify the amount of time that children living away from home spend at home (in months per year).

3. If the deceased performed household work not listed in the time inventory questionnaire, please specify the additional household work, and the frequency time spent performing the work.

Other information

1. Please provide details on any property that had to be sold as a result of the accident. In particular, the purchase price, the selling price and an indication as to whether the selling price was below the fair market value of the property.

2. Please advise if the deceased and his/her family had Native Indian status. If so, please specify if the place of residence was on a reserve and if the place of employment was located on or off a reserve.