



Civil Resolution Tribunal

Claim Application Form – Accident Benefits (AB)



This application form is for accident benefits claims, for vehicle accidents that happened on or after May 1, 2021.

If your accident happened between April 1, 2019 and April 30, 2021, use our “Dispute Application Form – MVI – Person” instead. Download the form:

<https://civilresolutionbc.ca/forms>

Get a discount, save time, and have your application processed faster by applying online: <https://civilresolutionbc.ca/solution-explorer/vehicle-accidents>

Instructions

1. Complete this form. Please print clearly.
2. Fields marked * are required. If your form is missing information, it will take longer to process.
3. Attach any additional pages you need.
4. Submit your completed form and fee payment to the CRT. (See the end of this form.)

Helpers and Representatives

- For most vehicle accident claims, you can be represented by a lawyer.
- If you would like someone who is not a lawyer to represent you, you must ask the CRT for permission.
- The lawyer or representative speaks on your behalf, submits your evidence and other information, and makes agreements to settle the claim for you.
- If you want to have a lawyer or other representative for this dispute, attach a Representative Request form. Download the form: <https://civilresolutionbc.ca/forms>

Personal Information and Privacy: Your personal information is collected for the purpose of a Civil Resolution Tribunal dispute resolution process, pursuant to the Civil Resolution Tribunal Act and the CRT's Rules. You can view the CRT's Access to Information and Privacy Policy at <https://civilresolutionbc.ca/privacy>.

If you have any questions regarding the collection of your personal information, please contact us.

Email: info@crtbc.ca

Mail: ATTN Registrar and Executive Director
Civil Resolution Tribunal
PO Box 9239, Stn Prov Govt
Victoria BC V8W 9J1



Application Overview

* Required fields

Section 1: Applicant Information - The applicant is the person making the claims.

- This application form asks for your legal name, contact information, and mailing address. We need this so we can contact you about your dispute. Your legal name is also important in case you want to file your CRT decision with a court to enforce it.
- If there's more than one applicant, include a separate applicant page for each.

Section 2: Respondent - The respondent is who the claim is against.

- You don't have to enter anything in this section. Claims for accident benefits are against the Insurance Corporation of British Columbia (ICBC). We'll automatically add them as the respondent when we process your application form.

Section 3: Accident & Claim Details - What are you claiming?

- We need to know when and where the accident happened. We also need to know what accident benefits you're claiming, and why you feel you're entitled to them.
- Later in the CRT process, you will be expected to give evidence to support your claims.
- We'll automatically add a claim for dispute-related fees and expenses. This means the CRT may order ICBC to reimburse you for things like CRT fees and courier costs for sending documents. If you don't want this, you can ask us to remove it after we process your claim application form.
- Interest claim: Pursuant to section 48 (1) of the Civil Resolution Tribunal Act, you may be entitled to interest on any amount the CRT orders the respondent to pay to you. A claim for interest under the Court Order Interest Act will automatically be added to this claim.

Section 4: Declarations and Signature

- Read and acknowledge the declarations by marking the checkboxes.
- Sign and date the form.

Section 5: Instructions for Fee Payment and Form Submission

- Mark the checkbox for how you'll be paying your application fee.
- Send us your completed form(s).



Section 1: Applicant Information

| Name and Contact Information | | |
|---|--|---|
| * Title: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Mx. <input type="checkbox"/> Dr. <input type="checkbox"/> Other | | |
| * Legal first name | Legal middle name (optional) | |
| * Legal last name | Preferred name (optional) | |
| What are your pronouns? (We're asking so we can refer to you respectfully during the CRT process. If you don't specify a pronoun, we'll use "they/them" in our communications, decisions, and orders.) <input type="checkbox"/> He/Him/His <input type="checkbox"/> She/Her/Hers <input type="checkbox"/> They/Them <input type="checkbox"/> Other, please specify | | |
| * Mailing address (Street or P.O. Box) | Apartment, suite, etc (optional) * Postal Code | |
| * City | * Province/State | Country <input type="checkbox"/> Canada <input type="checkbox"/> US <input type="checkbox"/> Other |
| * Primary phone number (Include extension if applicable.) | Secondary phone number (optional) (Include extension if applicable.) | |
| * Email address (This is the email for your account, and it can't be modified.) | | |

Additional Supports



Let us know if the CRT can make the process easier for you in any of these areas. Your answers are confidential, and we won't share them with any other participants in the claim. You might want to ask a trusted friend or family member for help.

| | | |
|--|---|--|
| <input type="checkbox"/> Reading and writing | <input type="checkbox"/> English language | <input type="checkbox"/> Blind, partially sighted, or low vision |
| <input type="checkbox"/> Deaf or hard of hearing | <input type="checkbox"/> Mental health | |



☐ Is there an immediate risk you'll lose your job or become homeless because of this dispute? (This won't be shared with other people in your dispute. We're asking because we might be able to expedite parts of the CRT process if your job or housing are at risk. Once a CRT case manager is assigned to your dispute, they will review this information and discuss it with you.)

(Please specify) (maximum 1,000 characters)

☐ Other (please specify) (maximum 1,000 characters):

* Are you 19 or older?

☐ Yes ☐ No

If you're under 19, you must have a Litigation Guardian help you apply to the CRT. Fill out our Litigation Guardian Form and send it to us separately after you submit your application.

Legal name of litigation guardian

* Do you make all of your legal and financial decisions on your own?

☐ Yes ☐ No

If no, who else makes legal and financial decisions for you? (Provide the name of the committee, attorney, representative, or other person who makes legal or financial decisions for you and indicate the type of document that gives them that power.)

* Name

Type:

- ☐ Committee of Estate
☐ Representative appointed in a representation agreement
☐ Attorney appointed in an enduring power of attorney

If you consider yourself to be Indigenous,

☐ First Nations ☐ Metis ☐ Inuit ☐ Other ☐ Prefer not to answer

We are asking participants to self-identify as Indigenous so we can offer additional supports and provide equitable opportunities for Indigenous peoples navigating the CRT processes. This includes providing a Navigator. The Navigator can help you understand the CRT process and guide you through it. Self-identifying and access to additional supports is completely optional. This information will also help the CRT better understand the needs of Indigenous participants and is part of the CRT's Reconcili(action) Plan.

Do you want someone from the CRT to contact you about our Navigator service?

☐ Yes ☐ No



Section 2: Respondent

The respondent is who the claim is against. Since your claim is for accident benefits, we'll add the Insurance Corporation of British Columbia (ICBC) as the respondent for this claim.

Insurance Corporation of British Columbia
808 Nelson Street, Suite 800
Vancouver, BC
V6Z 2H1

Section 3: Accident & Claim Details

Accident Details

To understand your dispute, we need to know when and where the accident happened. After your dispute is reviewed and accepted, we'll ask you to give evidence about the accident and what you're claiming.

* When the accident happened (YYYY/MM/DD)

* Where the accident happened

City (optional):

Province:

Country: ☐ Canada ☐ Somewhere else

My Claims

* What happened and why do you think you are entitled to accident benefits?
(maximum 10,000 characters)



Select the category that best describes the benefits you're claiming. You can select more than one. For the claim amount, how much do you want to claim for this benefit? (Optional: enter the total amount you want to be reimbursed for, or the total expected costs that were denied.)

I want to claim accident benefits from ICBC for:

☐ **Health care and rehabilitation**

Covers medical treatments and expenses as you recover from your accident injuries.

Claim amount (optional): \$

☐ **Caregiver**

Covers costs if you normally care for children under 16 or dependents but can't because of your accident injuries.

Claim amount (optional): \$

☐ **Family business**

Covers costs if you normally do unpaid work in a family business but can't because of your accident injuries.

Claim amount (optional): \$

☐ **Accident scene helpers**

Covers expenses if you volunteered to help at an accident scene where someone was injured.

Claim amount (optional): \$

☐ **Income replacement**

Replaces employment income if you can't work because of your accident injuries.

Claim amount (optional): \$

☐ **Permanent impairment**

Compensates if your accident injuries resulted in permanent impairment, including catastrophic injuries.

Claim amount (optional): \$

☐ **Loss of studies**

Compensates if you didn't finish a school term because of your accident injuries.

Claim amount (optional): \$

☐ **Death, funeral, and grief counselling**

Covers survivor and dependant benefits, plus funeral expenses and grief counselling, if you're related to someone who died from a motor vehicle accident.

Claim amount (optional): \$

* Why do you believe you should receive the accident benefits you selected?
(maximum 500 characters per benefit type)



Additional Details

* Are these claims part of another legal case or process?

For example, your claims are part of another claim with the Civil Resolution Tribunal, or part of a case filed in a BC court, Human Rights Tribunal, etc.

☐ Yes ☐ No

If yes, where is it and how far along in the process is it?

If these claims are part of another legal process, the CRT might not be able to accept them. For example, the CRT can't take claims appealing decisions by another court or tribunal. We'll contact you about this when we process your completed form.

(maximum 1,000 characters)

Section 4: Declarations and Signature

Access to Information and Privacy Policy

The Civil Resolution Tribunal (CRT) collects a wide variety of information from participants in claims brought to the Tribunal. Most of this information is shared with the participants and their representatives during the dispute resolution process. In some cases, members of the public may also be able to access CRT dispute records.

The CRT only asks for information that is needed to resolve a claim. The CRT will collect the following types of information, and share it with the participants:

- Contact information for the participants and their representatives, including names, addresses, telephone numbers, fax numbers, and email addresses;
- Each participant's description of the dispute and position on its resolution;
- Communications between the participants and the CRT;
- Information and evidence provided by participants, which may include information about damages and injuries, health and financial records, and other information of a personal nature;
- Information about witnesses, including their contact information and evidence they might be called upon to provide.

The CRT might also collect information from a participant about special circumstances they might have. These circumstances might include language or capacity issues, or the ability to pay CRT fees. This information will not normally be shared with other participants, unless the circumstances require the CRT to do so.

Generally, discussions between the participants aimed at resolving a claim through negotiation will be confidential. This means the CRT will not disclose these negotiations unless the participants agree to the disclosure or the law requires it. If the participants settle a claim by negotiation and agreement, the public will be able to request copies of any CRT order documenting the settlement.

If a claim is not resolved by agreement, it will move into the Tribunal Decision Process. The CRT will decide the claims and make any necessary orders to give effect to the decision. Members of the public may access the names of participants in a CRT Tribunal Decision Process, as well as a general description of the claim and its status. Members of the public may also request copies of submissions and evidence provided during the Tribunal Decision Process. The Civil Resolution Tribunal Act requires that final decisions and orders must be posted to the CRT's website and available to the public. Normally, a member of the public will have to submit a request to search for dispute records that are not publicly available through the CRT or another public website.

If a participant or witness is concerned that information in a final decision or order would be harmful to their privacy or security, they may request that this information be redacted or anonymized. All information that the CRT receives from participants and witnesses is stored in Canada.

The CRT's complete Access to Information and Privacy Policy on collecting and disclosing information gathered during the dispute resolution process can be found online at <https://civilresolutionbc.ca/privacy>. If you have other questions about the CRT's policy for accessing dispute records or storage of the records, contact the CRT at:

Email: info@crtbc.ca / Phone (toll-free): 1-844-322-2292

Mail: ATTN: Registrar and Executive Director
PO Box 9239, STN PROV GOVT
Victoria, BC V8W 9J1



Declarations and Signature

*** Please acknowledge the following:**

- ☐ I confirm that I have a reasonable basis for believing that the information provided in this application is accurate. I understand that, under section 92 of the *Civil Resolution Tribunal Act*, providing false or misleading evidence or other information to the Civil Resolution Tribunal is an offense that can lead to imprisonment, a \$10,000 fine, or both.
- ☐ I am responsible for providing evidence to support my position on each claim in the dispute. I understand that if the dispute goes to the Tribunal Decision Process, there will be deadlines for providing my evidence, and failure to prepare that evidence in advance may not be a basis for the CRT to extend those deadlines.
- ☐ I confirm that all applicants are aware of the CRT's Access to Information and Privacy Policy and understand that, unless otherwise indicated, the information I entered in this application will be shared with the other participants in the dispute.

* Applicant signature:

* Date signed:



Section 5: Instructions for Fee Payment and Form Submission



Application fees must be paid in full when you submit your application. If not, your application may not be accepted.

Application fee for claims filed by email, mail or courier:

| | |
|---|-------|
| CRT Application – Accident Benefits claim | \$100 |
|---|-------|

Payment

* How I'm paying my application fee: (select one)

- ☐ **By mail.** Include a cheque or money order with your application. Make your cheque or money order payable to "Minister of Finance". There is a \$30 fee for dishonoured cheques.
- ☐ **In person at ServiceBC.** ServiceBC accepts payment by cash, cheque, credit card, and debit. Find your nearest ServiceBC location at <http://www.servicebc.ca>
- ☐ **By fee waiver.** If you can't afford the application fee, complete our Fee Waiver Request form and attach it to your application. Download the form: <https://civilresolutionbc.ca/forms>

How to submit your completed application:

- **By email.** Email your completed form(s) to RSC@crtbc.ca
- **Or by mail or courier.** Mail your completed form(s) to:

ATTN: Intake
Civil Resolution Tribunal
PO Box 9239 STN Prov Govt
Victoria BC V8W 9J1