

CIRCUIT COURT – 15TH JUDICIAL CIRCUIT
PALM BEACH COUNTY, FLORIDA

CASE NO: 50 2022 CA 004389 MB AF

PETRI R. CARMEN,

Plaintiff,

vs.

STATE FARM MUTUAL AUTOMOBILE
INSURANCE COMPANY,

Defendant.

REQUEST FOR ADMISSIONS

COMES NOW Defendant, pursuant to Florida Rule of Civil Procedure 1.370(a), and hereby requests Plaintiff to admit or deny the truth of the following statements, considering that these requests are intended to limit the issues at trial and should the Defendant prove any statement stated below not admitted by the Plaintiff, that the Defendant shall seek attorney's fees and costs incurred in proving the statement. The definition of "subject accident" is the accident that is described in the current complaint filed by the Plaintiff. "You" means the Plaintiff.

THEREUPON, do you ADMIT or DENY:

1. That at the time of the subject accident, the vehicle occupied by you was equipped with operational seat belts which were available for your use.
2. That at the time of the subject accident, you were not wearing a seat belt.
3. That you received or are entitled to receive benefits from a collateral source, as defined by Florida Statute 627.736 or Florida Statute 768.76, for medical bills alleged to have been incurred as a result of the incident described in the Complaint.
4. That you received or are entitled to receive benefits from a collateral source, as defined by Florida Statute 627.736 or 768.76, for loss of wages or income alleged to have been sustained as a result of the incident described in the Complaint.

5. That you received or are entitled to receive benefits under the Personal Injury Protection portion of an automobile policy for medical bills alleged to have been incurred as a result of the incident described in the Complaint.

6. That you received or are entitled to receive benefits under the Personal Injury Protection portion of an automobile insurance policy for loss of wages or income alleged to have been sustained as a result of the incident described in the Complaint.

7. That you received or are entitled to receive benefits under the medical payments provisions of an automobile insurance policy for medical bills alleged to have been incurred as a result of the incident described in the Complaint.

8. That you are subject to a deductible under the Personal Injury Protection portion of an automobile insurance policy.

9. That you received or are entitled to receive benefits pursuant to personal or group health insurance policy, for medical bills alleged to have been incurred as a result of the incident described in the Complaint.

10. That you received or are entitled to receive benefits pursuant to a personal or group wage continuation plan or policy for loss of wages or income alleged to have been sustained as a result of the incident described in the Complaint.

11. That you are an insured person under the Personal Injury Protection portion of an automobile insurance policy which was in force on the date of the incident described in the Complaint which provides payment of benefits of eighty percent (80%) of all reasonable and necessary medical expenses incurred and sixty percent (60%) of loss of income or earning capacity from inability to work as a result of injury sustained from the incident described in the Complaint.

12. That you are not making any claim for past wage loss.

13. That you are not making any claim for damages for the inability to earn wages in the future.

14. That you have been involved in one or more motor vehicle accidents prior to the subject accident.

15. That you have a prior felony conviction.

16. That you have a prior conviction involving dishonesty or false statements.

17. That your normal faculties or judgment was impaired at the time of the subject accident.

18. That you had been drinking alcohol within eight (8) hours prior to the subject accident.

19. That you had taken drugs/medications within eight (8) hours prior to the subject accident.

20. That you have been involved in one or more motor vehicle accidents subsequent to the subject accident.

21. That you have been involved in one or more slip and fall accidents prior to the subject accident.

22. That you have been involved in one or more slip and fall accidents subsequent to the subject accident.

I HEREBY CERTIFY that a true and correct copy of the foregoing document was E-filed with the Clerk of the Circuit Court this 2nd day of June, 2022, to:

Chase Nugent, Esq.
1700 Palm Beach Lakes Blvd. – Suite 140
West Palm Beach, FL 33401
cnugent@forthepeople.com
amorey@forthepeople.com
jsheehan@forthepeople.com

FLANAGAN & MANIOTIS, P.A.
Attorneys for Defendant
2586 Forest Hill Blvd.
West Palm Beach, FL 33406
(561) 964-7501
NManiotisEsq@gmail.com

By: /s/ Nicholas Maniotis
Nicholas Maniotis
Fla. Bar No.: 525006