

APPLICATION FOR MEDIATION OR ARBITRATION- CIVIL MATTERS

PARTY NAME: _____
ATTORNEY NAME: _____
Address: _____

Phone: _____
Facsimile: _____
Email Address: _____

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Nature of Dispute (e.g. commercial, book account, contract, workplace, employment discrimination, landlord/tenant, personal injury, wills-trusts, property damage, business tort such as breach of duty, malpractice, affairs of business entities, statutory violations, misrepresentation/fraud, insolvencies, bank or commercial transactions, etc.) Briefly describe. _____

Is this matter pending in court? ____yes ____no

Is this matter on the trial calendar? ____yes ____no

Case File Number? _____

Is discovery completed? ____yes ____no
If no, percent completed. _____

Does this involve equitable relief? ____yes ____no

Does this involve punitive damages? ____yes ____no

Your general claim for relief: _____

Is there a lien holder(s)? ____yes ____no If yes, give name, address and phone number: _____

Availability for prehearing conference _____ in person ____ telephonic only _____ Skype only.

Have all parties agreed to ADR? _____ yes _____ no

Who referred you? _____

Availability for appointments/hearings, dates, hours _____

Other relevant information _____

Submitted by: _____