

American Arbitration Association

REQUEST FOR MEDIATION

DATE: _____

To: Name _____
(Of the Party on Whom the demand Is Made)

Address _____

City, State _____ ZIP Code _____

Telephone () _____ Fax () _____

The undersigned party to an agreement contained in a written contract dated _____, providing for mediation under the _____ Mediation Rules of the American Arbitration Association, hereby requests mediation thereunder. (Attach the mediation clause or quote it hereunder)

NATURE OF DISPUTE (Attach additional sheets if necessary.)

THE CLAIM OR RELIEF SOUGHT (the amount, if any):

TYPES OF BUSINESS: Filing Party _____ Respondent Party _____

MEDIATION LOCALE REQUESTED: _____
(City and State)

You are hereby notified that copies of our mediation agreement and of this are being filed with the American Arbitration Association _____ office, with the request that it commence the administration of the mediation.

Signed _____ Title _____
(May be Signed by a Representative)

Name of Filing Party _____
Address _____
City and State _____ ZIP Code _____
Telephone () _____ Fax () _____
Name of Representative _____
Representative's Address _____
City and State _____ ZIP Code _____
Telephone() _____ Fax () _____

To institute proceedings, please send three copies of this request with the administrative fee, as outlined in the appropriate rules, to the AAA. Send the original request to the responding party.

If you have questions regarding which rules apply, please contact the AAA.