

**Request for Arbitration or Mediation**

Date: \_\_\_\_\_

**CLAIMANT**

Name and Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**REPRESENTATIVE**

Name and Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**Please check the appropriate box:**

- The named claimant ***IS*** a party to a written agreement providing for arbitration, ***a copy of which is attached*** , and hereby ***demand***s arbitration.
- The named claimant ***IS NOT*** a party to a written agreement providing for arbitration. However, arbitration is hereby requested.
- Claimant is requesting Mediation.

**RESPONDENT (Other party to the dispute)**

Name and Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_



**USA Mediate** will contact the other party (Respondent) in an attempt to arrange Arbitration or Mediation. We will advise you as soon as a response is received from the Respondent.

**Respondent**, has **fifteen (15) days** after notice from **USA Mediate**, to file an Answering Statement Form.

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**CLAIMANT:** To institute proceedings, please send **TWO** copies of this request and, if appropriate, a copy of any written Arbitration Agreement, along with the filing fee as provided for in the accompanying introductory letter to:

**USA Mediate**  
8701 E. Vista Bonita Drive, Suite 210  
P.O. Box 27500  
Scottsdale, Arizona 85255

Claimant requests that USA Mediate commence the administration of the Arbitration or Mediation.

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Claimant or Representative

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Title if Representative

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Date