

DEMAND FOR ARBITRATION

1. Respon	dent
Name:	
Address:	
Phone:	Email:
2. Respon	dent representative
Name:	
Address:	
Phone:	Email:
3. Claiman	
Name:	
Address:	
Phone:	Email:
4. Claiman	t representative
Name:	
Address:	
Phone:	Email:
5. Please i	nclude a statement regarding each of the following:
i. T	he nature of the claims,
ii. T	he relief sought,
	Claimant's position as to the place of arbitration and the applicable law and the reasons nerefore,

- iv. Whether it is a single or a three-panel arbitration, and
- v. Such other relevant information as the party or parties giving notice deem necessary



6. The dispute will be resolved by arbitration under the FedArb Rules and administration

Yes No

7. Please include the following:

- i. A copy of the agreement pursuant to which arbitration is demandedii. The \$2,000 fee for initiating an arbitration

Signature	Printed Name	as Counsel for
Date	Email	Phone