

REQUEST FOR Dispute Resolution

The named parties hereby submit the following dispute for resolution by the following procedure:

Procedure Selected:

- | | |
|---|---|
| <input type="checkbox"/> Early Neutral Evaluation | <input type="checkbox"/> Expert Determination |
| <input type="checkbox"/> Adjudication | <input type="checkbox"/> Dispute Review Board |
| <input type="checkbox"/> Dispute Adjudication Board | <input type="checkbox"/> Other (please specify) _____ |

Nature of Dispute (attach additional sheets if necessary): _____

Amount of Monetary Claim or Nature of Non-Monetary Claim: _____

Type of Business: Claimant _____

Respondent _____

Place of Hearing: _____

To be completed and signed by all parties

Name of Party

Address

City, State/Province, Country, Post Code

Telephone

Facsimile

Name of Party's Attorney or Representative

Name of Firm (if applicable)

Address

City, State/Province, Country, Post Code

Telephone

Facsimile

Signed† (may be signed by a representative)

Title

Date

Name of Party

Address

City, State/Province, Country, Post Code

Telephone

Facsimile

Name of Party's Attorney or Representative

Name of Firm (if applicable)

Address

City, State/Province, Country, Post Code

Telephone

Facsimile

Signed† (may be signed by a representative)

Title

Date

† Signatures of all parties are required.

Please file two signed copies and the non-refundable filing fee with the CIICA Secretariat, 3rd Floor, RA Tower, 7A Turner Rd. Lahore, Pakistan; Email: adr@ciica.org

For additional information, please contact us at +92 42 37112468 or visit our website at www.ciica.org.