



Request for Arbitration

Instructions for Submittal of Arbitration to JAMS International

If you wish to proceed with an arbitration by executing and serving a Request for Arbitration on the appropriate party, submit the following items to JAMS International:

- A. Claimant must submit one copy of the **Request for Arbitration** for each named Respondent and two additional copies for the JAMS International Administrator.
- B. Together with the Request, Claimant must submit one copy of the arbitration agreement or clause under which the dispute is to be arbitrated for each named Respondent and two additional copies for the JAMS International Administrator.
- C. For two-party matters, JAMS charges a \$1,500 Filing fee, to be paid by the party initiating the Arbitration. JAMS also charges a \$1,500 Filing Fee for counterclaims. For matters involving three or more parties, the Filing Fee is \$2,000. A Case Management Fee of 12% will be assessed against all Professional Fees, including time spent for hearings, pre- and post-hearing reading and research and award preparation.
- D. **Electronic Filing.** The Request for Arbitration may be filed with the JAMS International Administrator in electronic form with the requisite number of paper copies sent on the same date by courier service, facsimile or post. Contact the JAMS International Administrator for more information regarding electronic filing.

Please submit to JAMS International or your local JAMS Resolution Center.

Once the above items are received, the JAMS International Administrator will send a copy of the Request for Arbitration and the documents annexed thereto to the Respondent for its Statement of Defence.

London – JAMS International Headquarters

70 Fleet Street
London EC4Y 1EU, UK
Phone: +44 207 583 9808
Fax: +44 207 936 3325
Email: info@jamsinternational.com
www.jamsinternational.com

United States JAMS addresses - visit www.jamsadr.com



Request for Arbitration

To Respondent:

(Name of the Party on whom the Request for Arbitration is made)

Address:

City:

State/Province/Region:

Country:

Postal Code:

Phone:

Fax:

Email:

Representative/
Attorney (if known):

(Name of the Representative/Attorney of the Party on whom the Request for Arbitration is made)

Address:

City:

State/Province/Region:

Country:

Postal Code:

Phone:

Fax:

Email:

From Claimant (name):

(Name of the Party requesting arbitration)

Address:

City:

State/Province/Region:

Country:

Postal Code

Phone:

Fax:

Email:

**Representative/Attorney
of Claimant (if known):**

(Name of the Representative/Attorney for the Party Requesting Arbitration)

Address:

City:

State/Province/Region:

Country:

Postal Code:

Phone:

Fax:

Email:

Nature of Dispute: Claimant hereby requests that you submit the following dispute to final and binding arbitration (a more detailed statement of the claim(s) may be attached).

Arbitration Agreement: This Request is made pursuant to the arbitration agreement which the parties made as follows (cite location of arbitration provision and attach two (2) copies of entire agreement).

Claim & Relief Sought By Claimant: Claimant asserts the following claim and seeks the following relief (include amount in controversy, if applicable).

Statement of Defence: Upon receipt of the Request for Arbitration provided by JAMS International Administrator, Respondent may file a response and counter-claim to the above-stated claim according to the applicable arbitration rules. Send the original response and counter-claim to the claimant at the address stated above with two (2) copies to JAMS International.