

## Request To Initiate Arbitration

The following dispute is hereby submitted for legally binding arbitration before Conflict Resolution & Conciliation Services, Fairfax, Virginia.

1. This dispute involves:

2. The issues to be resolved or the questions to be answered through conciliation are:

3. The claims and remedies sought are:

Submitted by: \_\_\_\_\_

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

Address: \_\_\_\_\_

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

The names, addresses and contact numbers for all other parties to this dispute are:

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

Address: \_\_\_\_\_

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

Address: \_\_\_\_\_