

**SINGAPORE MEDIATION CENTRE
NEUTRAL EVALUATION SERVICE RULES
REQUEST FOR NEUTRAL EVALUATION**

To: The Singapore Mediation Centre

Request and the Parties involved

1.1 We/I wish to request for a Neutral Evaluation of a dispute between the following parties:

| Particulars of Applicant(s) | |
|-------------------------------------|--|
| Name: | |
| Address: | |
| Telephone number: | |
| Fax number: | |
| Email address: | |
| Authorised Representative (if any): | |

| Particulars of Respondent(s) | |
|-------------------------------------|--|
| Name: | |
| Address: | |
| Telephone number: | |
| Fax number: | |
| Email address: | |
| Authorised Representative (if any): | |

(If there is more than one applicant or respondent, please provide the relevant details in a separate document)

1.2 We/I confirm that the parties above are agreeable to Neutral Evaluation.

1.3 The Parties request for the Neutral Evaluation to be a:

| | |
|--------------------------|--|
| <input type="checkbox"/> | Documents-Only Neutral Evaluation |
| <input type="checkbox"/> | Neutral Evaluation with hearing session(s) |

1.4 The Parties request for the Opinion of the Neutral to be:

| | |
|--------------------------|-------------|
| <input type="checkbox"/> | Binding |
| <input type="checkbox"/> | Non-binding |

2 Brief Details of Dispute

2.1 The brief details of the dispute are as follows:

| | |
|--|--|
| Type of Dispute (eg. shipping, construction etc.) | |
| | |
| Particulars of Issue(s) for Neutral Evaluation | |
| | |
| <input type="checkbox"/> | Legal proceedings <u>have not been</u> commenced in respect of this dispute. |
| <input type="checkbox"/> | Legal proceedings <u>have been</u> commenced in respect of this dispute and the particulars of the legal proceedings are as follows: |
| | Suit number(s): |
| | Particulars: |
| | |

3 Administration Fee

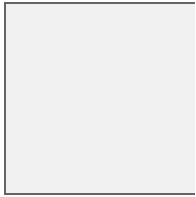
3.1 The Parties understand that the Administration Fee of _____ applicable to this

Request is non-refundable.

4 Payment Method

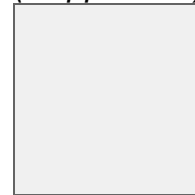
| | |
|--------------------------|---|
| <input type="checkbox"/> | Cheque No. _____ of amount S\$ _____ being the administration fee (inclusive of GST) |
| <input type="checkbox"/> | Bank transfer/PayNow payment of S\$ _____ being the administration fee (inclusive of GST) |

Signed by:



Name:
Designation:
Date:
For and on behalf of Applicant(s):
(if applicable)

Organisation stamp
(if applicable)



FOR OFFICIAL USE ONLY

Filing Date:

Remarks (if any):
