

NOTICE OF INTENT TO ARBITRATE (NIA) / DEMAND FOR ARBITRATION before Judicate West

Thank you for considering JW in the resolution of your matter. If you have any questions, please do not hesitate to contact one of our Arbitration Specialists at (800) 488-8805.

Instructions for Completing and Filing the NIA:

1. Review the [JW Arbitration & Private Judging Administrative Procedures](#) and [fee schedule](#) to ensure we can meet your matters unique needs.
2. Fill out the attached NIA form and/or provide your own pleading containing all applicable information as outlined in the NIA.
3. Attach the contract containing the arbitration clause, as well as, any court orders or relevant stipulations.
4. Serve the completed NIA and documents to the opposing party(ies) with a proof of service copying Judicate West.
5. Email all documents to NIA@judicatemwest.com and mail the cover page along with the \$500 per party filing fee to Judicate West 1851 East First Street, Suite 1600, Santa Ana, CA 92705.

A Judicate West Arbitration Specialist will contact all parties to commence the proceeding.

**Notice of Intent to Arbitrate (NIA) / Demand for Arbitration
Before Judicate West**

TO RESPONDENT: Name _____

Address _____ City _____ State _____ Zip _____

Telephone _____ Email _____

CLAIMANT: Name _____

NATURE OF DISPUTE: Claimant hereby demands that you submit the following dispute to arbitration: (attach additional sheet of description):

ARBITRATION AGREEMENT: This demand is made pursuant to the arbitration agreement you made, as follows (quote arbitration agreement and attach copy of the arbitration clause):

CLAIM OR RELIEF SOUGHT: (describe):

WHAT RULES OF ARBITRATION DO YOU PREFER:(more than one may be selected*):

- Judicate West Commercial Rules CCP §1280 et sec. Federal Arbitration Act (FAA)
 AAA Commercial Rules CA Rules of Court §1600 et sec. Other (please specify)_____

*Selecting more than one will indicate that they should be used in conjunction with one another.

CONSUMER ARBITRATION: Please indicate if this is a consumer arbitration as defined by the California Rules of Court Ethics Standards for Neutral Arbitrators Standard 2(d) and (e):

- Yes, Consumer Arbitration – specify the amount of money in dispute, if any: \$_____
- Type of dispute: goods credit banking or finance insurance health care construction real estate
 telecommunications debt collections personal injury employment other _____
- No, not Consumer Arbitration

EMPLOYMENT ARBITRATION: Please indicate the employee’s annual wage range (required by CCP §1281.96):

- \$100,000 or Less \$100,000 - \$250,000 \$250,000 and over Decline to State

RESPONSE: Within 30 days of this request you may file a response or counter-claim to the claim stated above. Send the original of the response and counter-claim to the Claimant at the address stated below, with copies to Judicate West.

ADMINISTRATION FEE DUE UPON FILING: In order to initiate this matter, a filing fee of \$500 per party must be advanced by the submitting party upon filing this demand for arbitration. This fee will be applied in full to the submitting party’s fees upon scheduling. **Please refer to the submitting party’s name and filing date on your check and submit payment to Judicate West at 1851 East First Street, Suite 1600, Santa Ana, CA 92705.** Retainers and fees for hearing time and case management will be billed separately to each party upon scheduling. Any unused retainer amounts will be refunded. For more information please refer to the [ARBITRATION AND PRIVATE JUDGING FEE SCHEDULE](#).

REQUEST FOR HEARING: Judicate West is requested to set this matter for an arbitration hearing at the first available date acceptable to all parties or pursuant to court order.

SIGNED (Claimant or Attorney) _____ **DATE:** _____

Address _____ City _____ State _____ Zip _____

Telephone _____ Email _____

For further information you may contact a Case Manager at Judicate West at (800) 488-8805.