

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

for Submission of Arbitration Matter(s) to Judicate West

INSTRUCTIONS

Please carefully review the JW Arbitration & Private Judging [Administrative Procedures](#) and [Fee Schedule](#) to ensure we can meet your unique case needs.

Complete this NIA form and/or provide your own Demand for Arbitration or pleading containing all applicable information outlined in the form. If you seek to separately arbitrate different disputes, they must be submitted as separate NIA forms.

Attach relevant documents, including the entire contract(s) containing the arbitration clause and/or any court orders or stipulation relevant to the submission of this matter to arbitration at JW.

Serve the completed NIA and documents on the opposing party(ies) with a proof of service and a copy to Judicate West. Service and a proof of service is required before the NIA will be deemed properly filed and submitted.

Email all documents to NIA@judicategwest.com and mail the first page of the form, along with the \$500 per party filing fee, to Judicate West at 1851 East First Street, Suite 1600, Santa Ana, CA 92705.

A Judicate West Arbitration Specialist will contact all parties after these materials are received.

Thank you for considering Judicate West in the resolution of your matter.

NOTICE OF INTENT TO ARBITRATE BEFORE JUDICATE WEST

FROM CLAIMANT (additional Claimant(s) can be added on page 5 of this form)

Claimant Name: _____

Claimant's Attorney(s)

Attorney Name(s): _____

Law Firm: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

CLAIMANT HEREBY DEMANDS THIS DISPUTE BE RESOLVED BY ARBITRATION BY SERVING THIS NOTICE TO:

RESPONDENT (additional Respondent(s) can be added on page 6 of this form)

Respondent Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Respondent's Attorney(s) (If Known)

Attorney Name(s): _____

Law Firm: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

ARBITRATION PROVISION IN AGREEMENT (please provide citation to relevant portion(s) of agreement, and attach a copy of the entire arbitration agreement to this form)

APPLICABLE ARBITRATION RULES, PER AGREEMENT OR OTHERWISE (for example, JW Commercial Rules (for non-consumer matters), California Arbitration Act, Federal Arbitration Act, or citation to relevant portion(s) of agreement)

APPROXIMATE REQUESTED ARBITRATION HEARING DATE:

ESTIMATED NUMBER OF ARBITRATION HEARING DAYS:

PROPOSED VENUE:

NOTICE OF INTENT TO ARBITRATE BEFORE JUDICATE WEST (cont'd)

NATURE OF DISPUTE, CLAIMS & RELIEF SOUGHT (a more detailed statement may be attached and/or any Complaint filed must be attached)

AMOUNT IN CONTROVERSY:

RESPONSE

Within 30 days of this request, Respondent(s) may file a response or counterclaim by serving Claimant at the Claimant's attorney's address provided, with a copy to Judicate West. For more information please refer to the JW Arbitration & Private Judging [Administrative Procedures](#).

ADMINISTRATION FEE DUE UPON FILING

In order to initiate this matter, Claimant must advance a filing fee of \$500 per party with the NIA. This fee will be applied in full to the Claimant's fees upon scheduling or refunded if it is determined that Claimant is not responsible for paying arbitration fees. 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 for hearing time and case management will be filled separately to each party upon scheduling. Any unused retainer amounts will be refunded. For more information please refer to the JW Arbitration & Private Judging [Fee Schedule](#).

SIGNED AND SUBMITTED BY CLAIMANT'S ATTORNEY

Attorney
Signature: _____

Date: _____

Name (printed): _____

NOTICE OF INTENT TO ARBITRATE BEFORE JUDICATE WEST (cont'd)

CLAIMANT #

Claimant Name: _____

Claimant's Attorney #

Attorney Name(s): _____

Law Firm: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

CLAIMANT #

Claimant Name: _____

Claimant's Attorney #

Attorney Name(s): _____

Law Firm: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

NOTICE OF INTENT TO ARBITRATE BEFORE JUDICATE WEST (cont'd)

RESPONDENT #

Respondent Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____

Respondent's Attorney # (If Known)

Attorney Name(s): _____
Law Firm: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____

RESPONDENT #

Respondent Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____

Respondent's Attorney # (If Known)

Attorney Name(s): _____
Law Firm: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____