



Business Arbitration Scheme Appointment Form

Please fill in the form and send it with all the supporting documentation by email to das@ciarb.org

In the matter of a dispute between the following:

Claimant/First Party*:

Address:

Postcode/Zip:

Telephone:

Email address:

Represented by*:

Address:

Postcode/Zip:

Telephone:

Email address:

Respondent/Second Party*:

Address:

Postcode/Zip:

Telephone:

Email address:

Represented by*:

Address:

Postcode/Zip:

Telephone:

Email address:

*Delete as applicable or add, if necessary, names of other parties or representatives.

Please provide a summary of the dispute, the issues to be determined, and the relief sought:

Amount in dispute:

Preference for the Arbitrator's background and skills

Party one:

Knowledge/Profession

Party two:

Knowledge/Profession

Professional specialist expertise (if any)

Professional specialist expertise (if any)

Experience required as Arbitrator (if any)

Experience required as Arbitrator (if any)

Your application is accepted on the basis that the information you provide is both accurate and complete. The liability of Ciarb and the appointed arbitrator in relation to the appointment may be restricted if the information provided is inaccurate or incomplete.

Please complete either part A or B below:

Part A – Unilateral application for the appointment of an Arbitrator

- An agreement between the parties dated (dd/mm/yyyy) _____ allows for or includes the provision that in the event of a dispute, the dispute shall be determined under the rules of ‘The Business Arbitration Scheme’ of the Chartered Institute of Arbitrators.
- A copy of the agreement is attached and clearly marked.
- Any condition precedent to the right of either party to make a unilateral application for the appointment of an arbitrator has been satisfied and particulars of this, if any, are attached.
- A copy of this application and all accompanying documents is being or has been sent by the Applicant to the Respondent by courier.

It is agreed as a condition of such an appointment:

- To pay the fixed fees due under the Scheme, whether or not the arbitration reaches a hearing or any award is made;
- To make such payment(s) within the timeframe prescribed under the Scheme, or any longer timeframe permitted by the arbitrator or the Chartered Institute of Arbitrators;
- To inform the arbitrator and the Chartered Institute of Arbitrators promptly in the event of settlement of the dispute; and
- That it is acknowledged that the Chartered Institute of Arbitrators is not liable, by reason of having appointed or nominated the arbitrator, for anything done or omitted to be done by the arbitrator in the discharge or purported discharge of his/her functions.

Name:

Date (dd/mm/yyyy):

Signature: _____

Capacity:

Insert image of your signature here
(as, or for and on behalf of, Claimant)

Part B – Joint Application for the appointment of an Arbitrator

The parties hereby apply to the Chartered Institute of Arbitrators for their dispute (particulars of which are attached in the Statement of Case), to be referred to arbitration under the Business Arbitration Scheme, for determination by a sole arbitrator.

N.B. Items 5 – 8 of Part A also apply as a condition to an appointment under Part B.

Name:

Date (dd/mm/yyyy):

Signature: _____

Capacity:

Insert image of your signature here
(as, or for and on behalf of, Claimant)

Name:

Date (dd/mm/yyyy):

Signature: _____

Capacity:

Insert image of your signature here
(as, or for and on behalf of, Respondent)

Fee payment (£1,250 + VAT per party) and methods of payment

All payments should be made in pounds sterling, please ensure that a party name is provided as a reference. Please tick your preferred payment option:

Credit/debit card

After receiving your unique reference number, please call our Finance Department at +44 (0)20 7421 7433 or +44 (0)20 7421 7433 and have your card ready. We accept MasterCard, Visa, or American Express.

Bank transfer

If you wish to pay by bank transfer, please ensure that a party name is provided as a reference.

Ciarb bank details:

Bank: HSBC Bank, 31 Holborn, London EC1N 2HR, United Kingdom

Bank Account Name: The Chartered Institute of Arbitrators DAS Holding Account

Sort Code: 40-05-03

Account number: 73664678

International Bank Account number (IBAN): GB81HBUK40050373664678

Branch identifier code: HBUKGB4B

Note: Please do not send cash to Ciarb by post.

Checklist

All sections of the form have been completed.

You have provided the relevant supporting documentation.

The correct fee has been paid (£1,250 + VAT per party).

*Please note the application fee is non-refundable.

You have signed and dated the form.