Request for Appointment of an Arbitrator (Bermuda Branch)



In the matter of a dispute between the following:

Claimant/First Party*: Address: Postcode/Zip: Country: Telephone: Email address: **Represented by*:** Address: Postcode/Zip: Country: Telephone: Email address: **Respondent/Second Party*:** Address: Postcode/Zip: Country: Telephone: Email address: Represented by*: Address: Postcode/Zip: Country: Telephone: Email address:

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

Amount in dispute

Preferred location for the meeting (if any)

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 allows for or includes the provision that in the event of a dispute, either party may apply to the President or Deputy President of the Chartered Institute of Arbitrators to appoint an arbitrator in the matter.
- A copy of said provision of the agreement, and particulars of the dispute, are 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.

It is agreed as a condition of such an appointment:

- To pay the reasonable fees and expenses of the arbitrator, whether or not the arbitration reaches a hearing or any award is made;
- To provide adequate security for such payment if the arbitrator so requests;
- To make such payment within ten days of receipt of notice that the award is ready to be taken up or that such payment is otherwise due;
- To inform the arbitrator in the event of the settlement of the dispute before any award is made; 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:

Signature:

(as, or for and on behalf of, Claimant)

Part B - Joint Application for the appointment of an Arbitrator

The parties hereby apply to the President or Deputy President of the Chartered Institute of Arbitrators for their dispute (particulars of which are attached), to be referred to arbitration for determination by an arbitrator appointed for that purpose by the President or Deputy President of the Chartered Institute of Arbitrators.

Items 4 - 8 of Part A also apply as a condition to an appointment under Part B.

Name:

Signature:

(as, or for and on behalf of, Claimant)

Name:

Signature:



Capacity:

Date:

Capacity:

Capacity:

Date:

Application fee will be charged separately.

Checklist

Please check to ensure the following have been carried out before the form is sent to CIArb:

All sections of the form have been completed.

You have signed and dated the form.

You have provided the relevant supporting documentation.

Please indicate whether the dispute is governed by any particular rules, for example, the Expedited Arbitration Rules.

Please return the completed form with all the supporting documentation by email, fax or post to:

Bermuda Branch:

E: ciarb.bermuda@gmail.com

Alternatively:

DAS, CIArb, 12 Bloomsbury Square, London,WC1 2LP, UK T: +44 (0) 020 7421 7444 | F: +44 (0) (0)20 7900 2899 | E: das@ciarb.org