

REQUEST FOR MEDIATION

Date/month/year:

DETAILS OF PARTIES

REQUESTING PARTY (APPLICANT)

(Name of the company, organization, or name of the individual where the requesting party is an individual):

THE PARTY RECEIVING A REQUEST FOR MEDIATION (RESPONDENT)

(Name of the company, organization, or name of the individual where the requesting party is an individual):

Name of Legal Representative (For company, organization):

Name of Legal Representative (For company, organization):

Name of Authorized Representative (If applicable):

Name of Authorized Representative (If applicable):

Address (According to Enterprise Registration Certificate (ERC)/ Investment Registration Certificate (IRC) for company, organization; ID Card for individual):

Address (According to Enterprise Registration Certificate (ERC)/ Investment Registration Certificate (IRC) for company, organization; ID Card for individual):

City:

City:

Country:

Country:

Postal Code:

Postal Code:

Phone:

Phone:

Fax:

Fax:

Email:

Email:

MEDIATION AGREEMENT & MEDIATOR PREFERENCES

Mediation Agreement:

The parties have a mediation agreement pursuant to Article _____ of **Contract No.** _____ dated _____ under which mediation will be conducted at Vietnam Mediation Centre, a division of Vietnam International Arbitration Centre, in accordance with:

Vietnam Mediation Centre's Mediation Rules

Other Mediation Rules (Please specify)

No mediation rule agreement

Information of the Mediator:

Name of the Mediator:

*If parties mutually agreed on the Mediator

Name of the Mediator nominated by the requesting party:

Listed in VMC's List of Mediators

Not listed in VMC's List of Mediators

Address:	
Phone:	
Email:	
<input type="checkbox"/>	Requesting Vietnam Mediation Centre to appoint 01 Mediator for dispute resolution.
*The requesting party's preference for the Mediator's Background and Skills:	
DETAILS OF THE DISPUTE	
Summary of dispute:	
*Additional information may be provided in the enclosures if necessary	

Requests of the Requesting party (Applicant):

Monetary value:

Type of dispute:
*Subcontract, Charter-party, Insurance contract, etc

We, by means of this Request for Mediation, together with the copy of the mediation agreement between parties, hereby request Vietnam Mediation Centre to commence mediation at the Centre.

Digital signature / Electronic signature:

(If this form is signed by Authorized Representative, please attach the Power of Attorney)

Full name: _____ Position: _____

Date of filing: _____ For VMC's Secretariat

REQUESTING PARTY #2 (APPLICANT)

(Name of the company, organization, or name of the individual where the requesting party is an individual):

Name of Legal Representative (For company, organization):

Name of Authorized Representative (If applicable):

Address (According to Enterprise Registration Certificate (ERC)/ Investment Registration Certificate (IRC) for company, organization; ID Card for individual):

City:		Country:	
Postal Code:		Phone:	
Fax:		Email:	

REQUESTING PARTY #3 (APPLICANT)

(Name of the company, organization, or name of the individual where the requesting party is an individual):

Name of Legal Representative (For company, organization):

Name of Authorized Representative (If applicable):

Address (According to Enterprise Registration Certificate (ERC)/ Investment Registration Certificate (IRC) for company, organization; ID Card for individual):

City:		Country:	
Postal Code:		Phone:	
Fax:		Email:	

THE PARTY RECEIVING A REQUEST FOR MEDIATION #2 (RESPONDENT)

(Name of the company, organization, or name of the individual where the requesting party is an individual):

Name of Legal Representative (For company, organization):

Name of Authorized Representative (If applicable):

Address (According to Enterprise Registration Certificate (ERC)/ Investment Registration Certificate (IRC) for company, organization; ID Card for individual):

City:		Country:	
Postal Code:		Phone:	
Fax:		Email:	

THE PARTY RECEIVING A REQUEST FOR MEDIATION #3 (RESPONDENT)

(Name of the company, organization, or name of the individual where the requesting party is an individual):

Name of Legal Representative (For company, organization):

Name of Authorized Representative (If applicable):

Address (According to Enterprise Registration Certificate (ERC)/ Investment Registration Certificate (IRC) for company, organization; ID Card for individual):

City:		Country:	
Postal Code:		Phone:	
Fax:		Email:	