

## NASSAU COUNTY BAR ASSOCIATION

T: 516.747.4070 F: 516.747.4147 15th & West Streets Mineola, NY 11501

info@nassaubar.org www.nassaubar.org

TO: Administrator, Nassau County Bar Association Mediation & Arbitration Panels

## **ARBITRATION SUBMISSION**

ubmission is hereby made to arbitrate under the Arbitration Rules of the Nassau County B association Mediation and Arbitration Panels ("Rules"), the receipt of which is herelecknowledged, in connection with the following (please briefly describe the nature of the matter issues to be arbitrated):	οу
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Attach additional sheets if necessary. Please check off all categories that apply on attached sheet.)	

It is understood and agreed that:

- (1) The above-described matter shall be assigned for arbitration to an Arbitrator who is a member in good standing on the roster of arbitrators of the NCBA Mediation and Arbitration Panels.
- (2) Each of the arbitration participants will abide by and comply with the Rules, including submitting a \$2,300 aggregate fee payable to the order of the Nassau County Bar Association, which fee consists of a \$500 nonrefundable administrative fee and a deposit of \$1,800 to be applied toward the Arbitrator's fees, pursuant to the Rules at ARB-23.

the Panel Administrator) shal pursuant to the Rules.	l be held liable to any of the parties for their acts or conduct
	of the party or parties who initiate the arbitration, and not the Bar ninistrator to commence the arbitration in accordance with law o arbitrate (if any).
	A copy of the Demand for Arbitration is attached.
	A copy of proof of service of the Demand for Arbitration is attached.
	The parties already have an agreement to arbitrate. Attach a copy or the agreement or, that portion of the parties' agreement containing the arbitration clause.
	or
	The parties have entered into the "Agreement to Arbitrate." [Attach a copy signed by all parties to the arbitration. This form is available from the Panel Administrator or from the Bar Association website.]
(5) This form may be signe	d in counterpart.
Dated:	
Name of Party:	
Name of Counsel:	
Firm:	
Address:	
Phone:	
Email:	
Signature:	

Neither the Arbitrator nor the Bar Association of Nassau County, N.Y., Inc. (including

(3)

Dated:
Name of Party:
Name of Counsel:
Firm:
Address:
Phone:
Email:
Signature

An executed copy of this request, together with payment as set forth herein, must be sent to the NCBA ADR Administrator, Nassau County Bar Association,  $15^{th}$  & West Streets, Mineola, NY 11501, along with the fees and requested documents.