

DISPUTE SUBMISSION (COMMUNITY MEDIATION SERVICE)

Form No: 102

DETAILS OF PARTIES:

Name of Submitting Party/ies:

Address:

Tel / Mobile / Email:

Name of Opposite Party/ies:

Address:

Tel / Mobile / Email:

DETAILS OF DISPUTE:

Nature of Dispute:

- | | | |
|-------------------------------------|--|-----------------------------------|
| <input type="checkbox"/> Family | <input type="checkbox"/> Neighbourhood | <input type="checkbox"/> Elder |
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Contractual | <input type="checkbox"/> Work |
| <input type="checkbox"/> Peer | <input type="checkbox"/> Community | <input type="checkbox"/> Criminal |
| <input type="checkbox"/> Others | Specify: | |

Brief Synopsis of Dispute:

Whether any communication issued to opposite party: Yes No
(If issued, copy of communication)

Is the matter pending in any Court / Forum: Yes No

If yes, name of such Court / Forum:

Present status of the case:

Additional points of relevance:

Are you a PMS Member: Yes No

If yes; PMS Code:

Date:

Name & Signature:

- Submit Form with the appropriate registration / filing fee as provided in the IIAM Rules
- Use additional sheets wherever required