

Form A

SISV- CEA Arbitration Rules

Commencement of Arbitration and Claimant's Statement of Claim

To: Singapore Institute of Surveyors and Valuers
Respondent
Arbitrator

Details of Claimant(s)

1. Name: _____
2. NRIC: _____
3. Address: _____
4. Telephone: _____
5. Handphone: _____
6. Email: _____
7. Facsimile: _____

Details of Claimant's Authorised Representative (if applicable)

1. Name of Authorised Representative: _____
2. NRIC: _____
3. Relationship with Claimant: _____
4. Address: _____
5. Telephone: _____
6. Handphone: _____
7. Email: _____
8. Facsimile: _____

Details of Respondent(s)

1. Name: _____
2. NRIC: _____

3. Address: _____

4. Telephone: _____

5. Handphone: _____

6. Email: _____

7. Facsimile: _____

Details of Claim (details to be submitted on separate copies if the space provided is insufficient):

Amount in dispute: _____

List of supporting documents (details to be submitted on separate copies if the space provided is insufficient):

Appointment of Arbitrator

Please tick box accordingly.

[] Parties have agreed to appoint _____ of SISV Panel of Arbitrators as sole arbitrator.

[] SISV appoints the sole arbitrator.

Deposit

Claimant's deposit for the costs of the arbitration by cheque:

(Bank/Cheque No/Date/Amount)

Confirmation

Claimant's confirmation that two sets of Form A and the relevant attachments are submitted to SISV.

Signature: _____

Name: _____

Date: _____