



# REQUEST FOR MEDIATION SERVICES

I hereby request mediation in accordance with the Monterey County Association of REALTORS® guidelines and procedures as outlined in the attached Mediation Agreement. I agree to mediation in accordance with the Association's mediation guideline and procedures with the following parties.

**Participant #1**

**Participant #2**

Print First/Last Name: \_\_\_\_\_

Print First/Last Name: \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

The Association will select from Paul Gullion or Philip Daunt as the Mediator. Should you have an objection or preference to either, please specify.

**Indicate objection/preference:**

A date for the conference will be selected upon receipt of available dates from both parties. Every effort will be made to schedule the conference within 30 days. Please list dates and times you will **not** be available for a mediation conference within the next 30 day period.

**List unavailable dates below:**

**Mediation  
Service Fee  
\$300**

Please sign and return this form along with a check made payable to MCAR in the amount of \$300.00. Should the party not wish to mediate, your payment will be returned to you.

**Remit request with payment to:**

Monterey County Association of REALTORS®  
Attention: Kevin Stone  
201-A Calle Del Oaks Place  
Del Rey Oaks, CA 93906

**Attach a summary describing the issues and amount being mediated.**

Print First/Last Name: \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip Code \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_