



REAL ESTATE DISPUTE RESOLUTION SYSTEM REQUEST TO INITIATE MEDIATION

(To be completed and mailed by the party requesting Mediation to the DRS Administrator, along with the filing fee)

DATE: _____

1. NAMES OF PARTIES IN THE DISPUTE (typically buyer and seller)

_____ vs. _____

2. PARTY REQUESTING MEDIATION (buyer or seller)

Name(s) _____

Phone Number _____ E-mail Address _____

Address _____

City, State, Zip Code _____

Check one: Buyer Seller

Other (*explain*) _____

Name and Address of Legal Counsel (legal counsel is not a requirement):

Name _____ Firm _____

Phone Number _____ E-mail Address _____

Address _____

City, State, Zip Code _____

IS COUNSEL ATTENDING THE MEDIATION? YES NO

3. OTHER PARTY TO THE DISPUTE (Typically Buyer or Seller)

Party contact information must be provided at the time of submission. Every effort should be made by the filing party to obtain current contact information for the party they are filing a dispute against. Incomplete information will delay the time the Mediation information is disseminated to the other party.)

Name(s) _____

Phone Number _____ E-mail _____

Address _____

City, State, Zip Code _____

Check one: Buyer Seller

Other (*explain*) _____

4. PARTIES INVOLVED IN THE TRANSACTION BUT NOT PARTY TO THE DISPUTE (Typically REALTORS[®], home inspectors, appraisers, etc.)

A. Name _____ Firm _____

Phone Number _____ E-mail _____

Address _____

City, State, Zip Code _____

Agent for Seller Agent for Buyer Builder/contractor

Other (*explain*) _____

IS THIS PARTY ATTENDING THE MEDIATION? YES NO

B. Name _____ Firm _____

Phone Number _____ E-mail _____

Address _____

City, State, Zip Code _____

Agent for Seller Agent for Buyer Builder/contractor

Other (*explain*) _____

IS THIS PARTY ATTENDING THE MEDIATION? YES NO

C. Name _____ Firm _____

Phone Number _____ E-mail _____

Address _____

City, State, Zip Code _____

Agent for Seller Agent for Buyer Builder/contractor

Other (*explain*) _____

IS THIS PARTY ATTENDING THE MEDIATION? () YES () NO

5. AMOUNT OF MONEY INVOLVED: \$ _____

NOTE: If you have any estimates or expert opinions that you would like to bring to the mediation, you must make copies for all parties attending the mediation.

6. Address and County where Property is Located:
(GHAR has jurisdiction over properties located in Cumberland, Dauphin and Perry Counties.)

Address: _____ County: _____

7. Have there been any formal court pleadings filed in this case?

() Yes () No

If yes, are there any trial dates or time limitations involved?

Date _____ Court _____

County _____ Judge _____

Court Docket # _____

8. Do you (the complainant or legal counsel) have authority to enter into and sign a binding written agreement to settle this on behalf of the party you represent?

() Yes () No

Comment: _____

9. Has a prior agreement to mediate been signed by the parties (Typically initialed by both parties on Form ASR)

() Yes () No

Please attach a copy of the signed agreement. (This is typically contained in the Agreement for the Sale and Purchase of Real Estate on page 13.)

If no, this should be obtained and attached to this agreement, or it is likely mediation will not proceed.

10. LIST OF APPROVED MEDIATORS:

Please review the attached list of approved Mediators and indicate if there is any objection, conflict of interest, or reason why this person should not serve as Mediator for this dispute. **The list must be signed and returned with this form.**

**11. BRIEF DESCRIPTION OF CLAIM:
(use additional paper if needed)**

12. Please mail the following with your Request:

- 1.) **THREE (3)** complete copies of the Request to Initiate Mediation form
- 2.) **ONE (1)** copy of the initialed page 13 of your Agreement of Sale
- 3.) **ONE (1)** copy of the List of Approved Mediators (noting any challenges)
- 4.) **The \$100 administrative filing fee.**

*Checks should be made payable to GHAR and mailed to the address below.
Payments may also be made via credit card by calling (717) 364-3200.*

Mediation Administrator: **Greater Harrisburg Association of REALTORS®
Professional Standards Administrator
424 N. Enola Drive, Suite 1
Enola, PA 17025
Phone: (717) 364-3200**