

Metro Centre Association of REALTORS

Board or State Association

14 Old Bridge Turnpike

South River

NJ

08882

Address

City

State

Zip

Request for Mediation

In the matter of _____ vs. _____
Complainant Respondent

I am requesting mediation with the above-named disputant. There is due, unpaid, and owing to me (or I retain) from the above-named person the sum of \$_____. My claim is predicated upon the statement attached, marked Exhibit I and incorporated by reference into this application.

Signature of REALTOR® Principal/Authorized Designee Date
Type/Print Name Phone
Address City State Zip

Form Optional: This may be accomplished by telephone.

(Amended 11/12)