



THE ATLANTIC CITY and COUNTY BOARD OF REALTORS®

Executive Offices: 6429 BLACK HORSE PIKE • EGG HARBOR TWP, NJ 08234
PHONE 609-652-8486 FAX 609-652-6437

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)