Request for Appointment of an Independent Expert



In the matter of a dispute between the following:

Claimant/First Party*	
Address:	
Postcode/Zip:	Country:
Telephone:	
Email address:	
Represented by*	
Address:	
Postcode/Zip:	Country:
Telephone:	
Email address:	
Respondent/Second Party*	
Address:	
	_
Postcode/Zip:	Country:
Telephone:	
Email address:	
Represented by*	
Address:	
Postcode/Zip:	Country:
Telephone:	
Email address:	

*Delete as applicable or add, if necessary, names of other parties or representatives.

Please provide details regarding the issues	concerned:
Amount in dispute	
Preferred location for	
the meeting (if any)	
Preference for the Independent Expert's ba	ckground and skills
Party One:	Party Two:
Party One: Knowledge/Profession	Party Two: Knowledge/Profession
Knowledge/Profession	Knowledge/Profession
Knowledge/Profession	Knowledge/Profession
Knowledge/Profession Professional specialist expertise (if any)	Knowledge/Profession Professional specialist expertise (if any)
Knowledge/Profession Professional specialist expertise (if any)	Knowledge/Profession Professional specialist expertise (if any)

Your application is accepted on the basis that the information you provide is both accurate and complete. The liability of CIArb and the appointed expert in relation to the appointment may be restricted if the information provided is inaccurate or incomplete.

Please complete either part A or B of this page:

Part A - Unilateral application for the appointment of an Independent Expert

- An agreement between the parties dated allows for or includes the provision that in the event of a dispute, either party may apply to the President or Deputy President of the Chartered Institute of Arbitrators to appoint an independent expert in the matter.
- A copy of said provision of the agreement, and particulars of the dispute, are attached and clearly marked.
- Any condition precedent to the right of either party to make a unilateral application for the nomination of an independent expert has been satisfied and particulars of this, if any, are attached.

It is further agreed as a condition of such an appointment:

- To pay the reasonable fees and expenses of the independent expert, whether or not any determination is made;
- To provide adequate security for such payment if the independent expert so requests;
- To inform the independent expert in the event of the settlement of the dispute before any determination is made; and
- That it is acknowledged that the Chartered Institute of Arbitrators is not liable, by reason of having appointed or nominated the independent expert, for anything done or omitted to be done by the independent expert in the discharge or purported discharge of his/her functions.

Name:		
		Date:
Signature:		
		Capacity:
	(as, or for and on behalf of, Claimant)	

Part B – Joint Application for the appointment of an Independent Expert

The parties hereby apply to the President or Deputy President of the Chartered Institute of Arbitrators for their dispute (particulars of which are attached), to be referred to an independent expert for determination, appointed for that purpose by the President or Deputy President of the Chartered Institute of Arbitrators.

Items 4 – 7 of Part A also apply as a condition to an appointment under Part B.

Name:		
Signature:		Date:
J	(as, or for and on behalf of, Claimant)	Capacity:
Name:		
Signature:		Date:
-	(as, or for and on behalf of, Respondent)	Capacity:

Fee payment (£600 – VAT inclusive) | methods of payment

All payments should be made in pounds sterling, please ensure that a party name is provided as a reference.

Please tick your preferred payment option*:

Credit/Debit Card

Please telephone our Finance Department on 020 7421 7429 and have your card to hand. We accept MasterCard, Visa or American Express..

Bank Transfer

If you wish to pay by bank transfer, please ensure that a party name is provided as a reference.

CIArb bank details:

Bank: HSBC Bank, 31 Holborn, London, ECIN 2HR England

Sort code: 40 05 03

Account number: 31288784

International Bank Account number (IBAN): GB75HBUK40050331288784

Branch Identifier Code: HBUKGB4B

Cheque/Bank Draft

Please make your cheque payable to 'The Chartered Institute of Arbitrators'.

Send it by post to our Dispute Appointment Service (DAS) Department at:

CIArb
12 Bloomsbury Square
London
WCIA 2LP

*Please do not send cash to CIArb by post.

Checklist

Please check to ensure the following have been carried out before the form is sent to CIArb:

All sections of the form have been completed. The correct fee is enclosed (£600 - VAT inclusive).

You have provided the relevant supporting documentation. You have signed and dated the form.

Please return the completed form with all the supporting documentation by email or post to:

DAS, CIArb, 12 Bloomsbury Square, London, WCI 2LP, UK

E: das@ciarb.org

T: +44 (0)20 7421 7455

