



Instructions for Submittal of Arbitration to ADR Systems

Demand for Arbitration Based on Pre-Dispute Provision

If you wish to proceed with an arbitration by executing and serving a Demand for Arbitration on the appropriate party, please submit the following items to ADR Systems:

- Two copies of the Demand for Arbitration and of the Detailed Statement of Claim
- Proof of Service of the Demand on the appropriate party (for example, a certified mail receipt signed by recipient, or a sworn statement of service by a non-party)
- Two copies of the entire contract containing the arbitration clause
- Initial non-refundable \$400.00 administrative fee per party (Each party may submit its own administrative fee. To expedite the commencement of the proceedings, one party may elect to submit all administrative fees. In lengthier, more complex cases additional fees may be assessed.)

Arbitration Based on Post-Dispute Fully Executed Arbitration Agreement, Oral Stipulation or Court Order Compelling Arbitration

Whether or not a certain arbitrator has been designated, if the parties have agreed to arbitrate at ADR Systems, or the court has ordered the parties to arbitrate through ADR Systems, please submit the following items:

- Two copies of the Demand for Arbitration and of the Detailed Statement of Claim
- Two copies of the executed Arbitration Agreement or Court Order appointing arbitrator/ADR Systems (If necessary, please contact ADR Systems to obtain a Stipulation for Arbitration form, or [download it from our website](#)).
- Initial non-refundable \$400.00 administrative fee per party (Each party may submit its own administrative fee. To expedite the commencement of the proceedings, one party may elect to submit all administrative fees. In lengthier, more complex cases additional administrative fees may be assessed.)

Please submit all items to ADR Systems at 20 N Clark St. 29th Floor, Chicago, IL 60602.

Once the above items are received, ADR Systems will contact all parties to commence the arbitration.

Demand for Arbitration

Claimant_____

Business Name/Address_____

City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

Representative/Attorney_____

Firm Name/ Address_____

City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

Respondent_____

Business Name/ Address_____

City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

Representative/Attorney_____

Firm Name/ Address_____

City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

Statement of Claim (Claimant must attach a detailed statement of the Claimants' claim including all facts to be proved, the remedy sought, and any claimed damages.)

Amount in Controversy (if applicable) _____

List Appropriate Qualifications for Arbitrator _____

Hearing Location_____

Applicable Rules_____

Estimated Time Required for Hearing_____

Response to Demand for Arbitration: Respondent may file a response and counterclaim (if applicable) to this claim according to the applicable arbitration rules. Send the response and counterclaim to the Claimant's counsel at their address above, and a copy to ADR Systems with proof of service.

Signature_____ **Date**_____
(Claimant or Representative)

Print Name_____