



(For Office Use Only)

Our ref.:

Date Received:

FREE COMMUNITY MEDIATION SERVICE SCHEME **APPLICATION FORM**

Each Party is required to complete this form and return to:

Hong Kong Mediation Centre

Room 504, 5/F, West Wing, Justice Place,

11 Ice House Street, Central, Hong Kong

(or by fax: +852 28661299 or by e-mail to admin@mediationcentre.org.hk)

Date of Application: _____

Referred By (if any): _____

Court Case No. (if any): _____

Date of Reporting Mediation Result (if any): _____

1. **Parties' Information** (Please tick ✓ the box provided)

Party A (Applicant)

Party B (Respondent)

Name: _____

Mr. Ms. Mrs. Miss

Representatives (if any): _____

Mr. Ms. Mrs. Miss

Tel: _____

E-mail: _____

Fax: _____

Address: _____

Other Party's Name: _____

Mr. Ms. Mrs. Miss

Other Party's Tel: _____

Other Party's E-mail: _____

Other Party's Address: _____



2. **Total Amount in Dispute** (if applicable): HK\$ _____

* The total amount in dispute should be less than HK\$1,000,000.

3. **Please specify if any special arrangement is needed during mediation (if applicable):**

4. **Language** (Please tick ✓ the box provided)

a) Written correspondence: Chinese English

b) Mediation: Cantonese Mandarin English

Others (Please specify): _____

5. **If there are any attendees during mediation, please provide their names :**

6. **Case nature** (Please tick ✓ the box provided):

Building Management Disputes / Building Maintenance Disputes

Neighborhood Disputes

School Disputes

Property Disputes

Leasing Disputes

Family Disputes

Construction Disputes

Labour Disputes

Contract Disputes

Others (Please specify): _____



8. Purpose of Personal Information Collection Statement :

Personal information submitted by parties regarding the “Free Community Mediation Service Scheme Application Form” will solely be used for the handling the dispute. Information provided may be disclosed to or handled by the following parties:

- (a) Staff of Hong Kong Mediation Centre;
- (b) Parties and/or their representatives as stated in this form;
- (c) Appointed Mediator; and
- (d) Appointed Assistant Mediator(s).

9. Declaration :

- (a) The Party/Parties will cooperate with the personnel of HKMC and the mediator by providing all relevant documents and information (including personal data) when requested. All information will solely be used for case handling purposes;
- (b) To ensure the interest of every party, the Party/Parties undertake to keep all matters and information concerning the mediation confidential and will not disclose such information to any person, apart from those required by the law;
- (c) For disputes based on HKMC Mediation Rules, the Party/Parties will not hold the personnel of HKMC and the mediator liable for any claims, loss or damages in relation to the outcome or proceedings of the mediation.
- (d) The Party/Parties has/have read the ‘Personal Information Collection Statement’ and agree/agrees to provide personal information on a voluntary basis, upon understanding the terms and purposes of collection.
- (e) The Party/Parties understand and agree that mediators of HKMC provide one-off mediation service to a specific case of not more than 4 hours for free
- (f) The Party/Parties must confirm that the information provided in this Professional Mediation Service form is true and accurate.

10. Signature :

Applicant’s Signature with Company Stamp (if applicable)

Applicant’s Name

Date