

MIAMI Association of REALTORS®

Board or State Association

700 South Royal  
Poinciana Boulevard,  
Suite 400

Address

Miami

City

FL

State

33166

Zip

## Request for Mediation

In the matter of

Complainant

vs.

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 the 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)*