



**Pennsylvania Association of REALTORS®**  
**The Voice for Real Estate® in Pennsylvania**

**Home Buyers/Home Sellers  
Dispute Resolution System Request to initiate**

**MEDIATION – TRANSMITTAL FORM**

(To be completed and mailed to: Greater Allegheny-Kiski Area Board of REALTORS Inc.,  
1000 Fifth Avenue New Kensington, PA 15068, by party requesting mediation)

DATE \_\_\_\_\_

**1. NAMES OF ALL PARTIES TO THE DISPUTE**

\_\_\_\_\_

**2. PARTY REQUESTING MEDIATION**

Name \_\_\_\_\_ Phone No. \_\_\_\_\_ FAX \_\_\_\_\_

Address \_\_\_\_\_

Buyer       Seller       Agent for Seller

Subagent for Seller       Agent for Buyer

Builder/contractor       Other \_\_\_\_\_

Professional Liability Insurance Company: \_\_\_\_\_

Name and Address of Legal Counsel or Other Representative:

Name \_\_\_\_\_ Phone No. \_\_\_\_\_

Firm \_\_\_\_\_ FAX \_\_\_\_\_

Address \_\_\_\_\_

**3. OTHER PARTIES**

Name \_\_\_\_\_ Phone No. \_\_\_\_\_ FAX \_\_\_\_\_

Address \_\_\_\_\_

Buyer       Seller       Agent for Seller

Subagent for Seller       Agent for Buyer

Builder/contractor       Other \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Name and Address of Legal Counsel or Other Representative:

Name \_\_\_\_\_ Phone No. \_\_\_\_\_

Firm \_\_\_\_\_ FAX \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_ Phone No. \_\_\_\_\_ FAX \_\_\_\_\_

Address \_\_\_\_\_

Buyer       Seller       Agent for Seller

Subagent for Seller       Agent for Buyer

Builder/contractor       Other \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Name and Address of Legal Counsel or Other Representative:

Name \_\_\_\_\_ Phone No. \_\_\_\_\_

Firm \_\_\_\_\_ FAX \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_ Phone No. \_\_\_\_\_ FAX \_\_\_\_\_

Address \_\_\_\_\_

Buyer       Seller       Agent for Seller

Subagent for Seller       Agent for Buyer

Builder/contractor       Other \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Name and Address of Legal Counsel or Other Representative:

Name \_\_\_\_\_ Phone No. \_\_\_\_\_

Firm \_\_\_\_\_ FAX \_\_\_\_\_

Address \_\_\_\_\_

**4. BRIEF DESCRIPTION OF CLAIM:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

5. AMOUNT OF MONEY INVOLVED: \_\_\_\_\_ (\$ \_\_\_\_\_)

6. Have there been any formal court pleadings filed in this case?

Yes  No

If yes, are there any trial dates or time limitations involved?

Date \_\_\_\_\_ Court \_\_\_\_\_

County \_\_\_\_\_ Judge \_\_\_\_\_

Court Docket# \_\_\_\_\_

7. Do you have authority to enter into and sign a binding written agreement to settle this on behalf of the party you represent?

Yes  No

Comment: \_\_\_\_\_

8. Has a prior agreement to mediate been signed by the parties?

Yes  No

If yes, please attach a copy of the signed agreement.

**PLEASE MAIL THIS FORM TO THE DRS MEDIATION ADMINISTRATOR WHO IS IDENTIFIED BELOW TOGETHER WITH AS MANY COPIES AS THERE ARE PARTIES, PLUS ONE. A CHECK FOR \$150 MADE PAYABLE TO, GAKA MUST BE INCLUDED WITH THE MEDIATION FORMS. THE TOTAL COST FOR MEDIATION IS \$300, THE BUYER AND SELLER SPLIT THE COST EACH PAYING \$150.**

Mediation Administrator: Sharon Resek Executive Officer  
Greater Allegheny Kiski Area Board of REALTORS  
1000 Fifth Avenue  
New Kensington, PA 15068