



Botswana
Institute of
Arbitrators

The Chairman
Botswana Institute of Arbitrators
P O Box AD85 ADD
Gaborone, BW

Date:

Dear Sir,

APPLICATION FOR APPOINTMENT OR NOMINATION

In terms of an arbitration agreement incorporated in the contract/tender documents, we herewith apply to you to:

Appoint: an arbitrator a mediator an adjudicator a member(s) of DB

Nominate: a panel of 3 arbitrators a panel of 3 mediators

We enclose herewith the following:

1. A non-refundable deposit of P 1,500.00 in respect of the Institute's administration costs, payable by electronic funds transfer to:

Institute: Standard Chartered Bank Limited
Account Name: Botswana Institute of Arbitrators
Branch Number: 662167
Account Number: 0100155202900

Please email proof of payment to treasurer@biarb.org.

2. A copy of the arbitration agreement or the dispute settlement clause and supporting documentation taken from the contract document.

To assist you in this matter we set out the information to follow.

Contractor's Particulars:

Name of contractor:

Address of contractor:

Telephone: Fax: Cellphone:

E-mail:

Name of representative (if any):

Telephone: Fax: Cellphone:

E-mail:

Client's Particulars:

Name of client:

Address of client:

Telephone: Fax: Cellphone:

E-mail:

Name of representative (if any):

Telephone: Fax: Cellphone:

E-mail:

Short description of the dispute (e.g. breach of contract, legal matters, payment):

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Type of contract used, e.g. FIDIC, BIFSA, JBCC, BIDP, Abcon, Other (if applicable):

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Type of subject/project, e.g. office block, house, fast food outlet:

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Location of subject/project:

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Total project amount: P

Amount disputed: P

Amount of counterclaim (if known): P

Desired place for the hearing:

Language used in contract and general documentation:

Desired language for the hearing: English Other:

Kindly indicate below the names of any Fellow Members of the Institute whom, to the best of your knowledge are currently, or have previously been involved in this project and should therefore be excluded from nomination:

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Acknowledgment:

I/we confirm that in making this request for an appointment that the Institute shall effect such appointment in accordance with their internal procedures and in so nominating an arbitrator, mediator or expert witness the Institute is making no representations in respect of the fitness of the arbitrator, mediator or expert witness for the appointed dispute, save that the nominated person(s) has/have complied with all of the Institute's membership requirements and that the Institute shall not be liable to me/us in respect of loss, damage or injury or any consequential or indirect loss arising from the performance of or failure by the arbitrator, mediator or expert witness so appointed in terms hereof.

Yours faithfully,

.....
Signature

.....
Name (in block letters)