

ARBITRATION CLAIM FORM

ALL CLAIMS MUST BE SUBMITTED BY THE BROKER OF RECORD

In addition to this form and the filing fee, you are required to submit a statement of facts, setting out the reasons why you feel your Brokerage is entitled to the commission in dispute.

Please also submit any supporting documentation that you feel may be helpful (ie. statements from sales representatives/witnesses, copy of listings, agreement of purchase & sale, buyer agency agreement, diary entries, trade record sheets, etc.). *For more information, please consult Schedule 'C' of the effective board by-law, the Arbitration Guidelines or the FAQ section of the Board website.*

CLAIM AGAINST:

Brokerage Name

Brokerage Address

MLS # (if applicable) _____

PLEASE INDICATE THE FOLLOWING:

Exclusive Listing: **Y or N**

Agreement To Cooperate: **Y or N**

Commercial: **Y or N**

Property Address _____

Sale of the Property

\$ _____
(Not including applicable tax)

Dollar Amount of Claim

\$ _____
(Not including applicable tax)

CLOSING DATE OF TRANSACTION _____

(A completed claim **must** be received within the time period outlined in Schedule C of the effective by-law)

FILING FEE (**Company Cheque**):

5% of Amount Claimed (minimum \$500.00 – maximum \$1,500.00)

\$ _____

Plus applicable tax

+\$ _____

Total fee

=\$ _____

THE UNDERSIGNED HEREBY AGREE TO ABIDE BY THE AWARD OF THE ARBITRATORS:

DATE

Claimant Brokerage Name

Broker of Record Name (Please Print)

Broker of Record Signature