

Tri City Association of REALTORS®
Board or State Association

7151 W. Clearwater Ave
Address

Kennewick
City

WA
State

99336
Zip

Request for Mediation

In the matter of _____ vs. _____
Complainant 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)