

TOPSAIL ISLAND ASSOCIATION OF REALTORS®
13775 NC HWY 50, SUITE 402, NC 28445

REQUEST AND AGREEMENT TO ARBITRATE

To the Grievance Committee of the Topsail Island Association of REALTORS®

1. The undersigned, by becoming and remaining a member of the Topsail Island Association of REALTORS® (or Participant in its MLS), has previously consented to Arbitration through the Association under its rules and regulations.
2. I am informed that each person named below is a member in good standing of the Association (or Participant in its MLS), or was a member of said Association of REALTORS® at the time the dispute arose.
3. A dispute arising out of the real estate business as defined by Article 17 of the Code of Ethics exists between me (or my firm) and (*list all persons and/or firms you wish to name as Respondents to this Arbitration*):

_____, REALTOR® Principal _____
Name *Firm Name*

_____, REALTOR® Principal _____
Name *Firm Name*

Address *City State Zip* *Telephone*

4. There is due, unpaid and owing to me (or I retain) from the above-named persons the sum of \$_____. My claim is predicated upon **the statement attached, marked Exhibit I** and incorporated by reference into this application.
5. I request and consent to Arbitration through the Association in accordance with its Code of Ethics and Arbitration Manual and I agree to abide by the Arbitration award and comply with it promptly.
 In the event I do not comply with the Arbitration award and it is necessary for any party to this Arbitration to obtain judicial confirmation and enforcement of the Arbitration award against me, I agree to pay the party obtaining such confirmation the costs and reasonable attorney's fees incurred in obtaining such confirmation and enforcement.
6. I enclose my check in the sum of \$500.00 payable to TIAR for the Arbitration filing fee deposit.
7. I understand that I may be represented by legal counsel, and that I should give written notice no less than fifteen (15) days before the hearing of the name, address, and phone number of my attorney to all parties and the Association. Failure to provide this notice may result in a continuance of the hearing, if the Hearing Panel determines that the rights of the other party (ies) require representation.
8. Each party must provide a list of the names of witnesses (s)/he intends to call at the hearing to the Association and to all other parties not less than fifteen (15) days prior to the hearing. Each party shall arrange for his/her witnesses to be present at the time and place designated for the hearing.
9. The following REALTOR® non-principal affiliated with my firm has a financial interest in the outcome of the proceeding and has the right to be present throughout the hearing: _____
10. I declare that this application and the allegations contained herein are true and correct to the best of my knowledge and belief and this request for Arbitration is filed within one hundred eighty (180) days after the closing of the transaction, if any, or within one hundred eighty days (180) after the facts constituting the arbitral matter could have been known in the exercise of reasonable diligence, whichever is later.

11. I understand and agree that any provisional remedies, including but not limited to interim awards, may be ordered only by a court of competent jurisdiction.
12. If either party to an Arbitration request believes that the Grievance Committee has incorrectly classified the issue presented in the request (i.e., mandatory or voluntary), the party has twenty (20) days from the date of receipt of the Grievance Committee's decision to file a written appeal of the decision. Only those materials that the Grievance Committee had at the time of its determination may be considered with the appeal by the Board of Directors.
13. Are the circumstances giving rise to this Arbitration request the subject of civil litigation?
 Yes _____ No _____

Complainant(s):

Name: _____
Type/Print Name *Signature of REALTOR® Principal* *Date*

_____ *City, State, Zip* *Telephone*

Name: _____
Type/Print Name *Signature of REALTOR® Principal* *Date*

_____ *City, State, Zip* *Telephone*

Firm Name: _____

_____ *Address if different from above*

NOTE: Submit the Request to Arbitrate including Exhibit I and mail with check for \$500.00 to TIAR, 13775 NC HWY 40. SUITE 402, SURF CITY, NC 28445

TIAR USE ONLY:

Date Filed: _____ Case #: _____