ADR Offer

Case Reference No:	
Date:	
Details of Applicant(s):	Plaintiff/ Defendant/ Third Party/ Others (please state)*
ne Applicant(s) are willing to attemp	pt mediation/ neutral evaluation/ others (please state)*
he Applicant(s) have the following p	proposals:
Please state proposals, e.g. possib ADR body, appointment of particul	le dates for the ADR session, reference to particular lar ADR practitioner, venue, etc.
Delete as appropriate	
Defete as appropriate	
Name of Applicant(s):	
Signature of Applicant(s):	
Name of Counsel (if applicable):	
Law Firm (if applicable):	
Signature of Counsel (if applicable):	
Insurance Company (if applicable):	

Name of Authorised Representative of Insurance Company (if applicable):	
Signature of Authorised Representative of Insurance Company (if applicable):	