ARBITRATOR'S DECLARATION OF ACCEPTANCE AND STATEMENT OF INDEPENDENCE

Name:	
Contact Details:	
Mobile: & Email	
P.S./Secretary:	
Prior Experience (inclu	uding experience with arbitrations):
Number of ongoing Ar	bitrations:
relation to the subject-m	ng any past or present relationship with or interest in any of the parties or in natter in dispute, whether financial, business, professional or other kind, which is ifiable doubts as to your independence or impartiality (List Out);
	re likely to affect your ability to devote sufficient time to the arbitration and in finish the entire arbitration within twelve month (List Out):
	o your kind notice that in case the arbitral proceedings are not conducted as
DIAC.	
Date:	Signature