Ref.	No.		 	 	
		n and			



APPLICATION FOR MEDIATION

('I', IN THIS FORM REFERS TO ONE AS WELL AS MORE THAN ONE APPLICANT).

To,

SAMADHAN

Delhi High Court Mediation and Conciliation Centre Room No. 4, Extension Block, Delhi High Court, Sher Shah Road, New Delhi Phones: 011-23383289 EPABX: 011-43010101 Extn 4552

Date :

I refer my case to SAMADHAN, the Delhi High Court Mediation and Conciliation Centre for Mediation. I have read the Mediation and Conciliation Rules. The particulars regarding the case are as under:

A. MATTERS PENDING IN COURT

CASE NO. AND COURT IN WHICH PENDING:

PLAINTIFF/PETITIONER/APPELLANT	DEFENDANT/RESPONDENT/OPPONENT				
Name of Applicant:	Name of Applicant:				
1	1				
2	2				
3	3				
Address:	Address:				
Phone No.: Fax No.:	Phone No.: Fax No.:				
E-mail:	E-mail:				
Name of Advocate:	Name of Advocate:				
Address:	Address:				
Phone No.: Fax No.:	Phone No.: Fax No.:				
F-mail:	F-mail:				