

Tenant-Landlord Mediation Pilot Project

REQUEST FOR MEDIATION

For Office Use Only

Case No.: _____

Date Received: _____

Received by: _____

Mediation: Accepted Denied

Landlord:

First Name:		Last Name:	
Address:		City:	Zip:
Phone:	Cell:	Email:	

Tenant:

First Name:		Last Name:	
Address:		City:	Zip:
Phone:	Cell:	Email:	

Eligibility:

- Tenant is "low" or "very low" income
- Tenant (or member of tenants household) is disabled

Primary Reason for Dispute:

- Security Deposit
- Noise
- Lease Agreement
- Late Rent
- Maintenance
- Cleanliness
- Other (please list) _____

Briefly describe the situation:

What attempts have you made at resolution?

(Continued on the back . . .)

What do you suggest as a resolution?

Do you or the other party require any of the following concessions for a disability or language barrier?

- Handicap accessible location for meeting
- Advocate
- Translator (please list language/dialect) _____

Before submitting this request for mediation, be sure you:

- Attach a copy of any contracts and other documents important to this matter. If there is a lease agreement in place, please submit also.
- Read our Mediation brochure and understand the mediation process and agree to the rules that apply to mediation.

Submit completed request to:

Request submitted by:

Printed Name

Signature

Date