

**SINGAPORE INTERNATIONAL ARBITRATION CENTRE
SIAC SGX-DC ARBITRATION RULES**

NOTICE OF ARBITRATION FORM B

PART A

DETAILS OF CLAIMANT(S)

Name: Address: Telephone: Facsimile: Handphone: Email:	
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DETAILS OF CLAIMANT'S REPRESENTATIVE (if any)

Representative: Address: Telephone: Facsimile: Handphone: Email:	
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DETAILS OF RESPONDENT(S)

Name:	
Address:	
Telephone:	
Facsimile:	
Handphone:	
Email:	

1. Claimant declares that a dispute has arisen with the Respondent mentioned above and request that the dispute be referred to arbitration pursuant to the Submission to Arbitration entered into with the Respondents dated _____.
2. State the market, the counter, the time, the date reference number of the contract or transaction out of which the dispute arises:

Market:	Time:
Counter:	Date reference no:

3. State the general nature and circumstances of the claim and indicate the amount involved, if any:

Nature of claim:

Amount in dispute:

4. Relief or remedy claimed is:

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5. Claimant's nomination of arbitrator¹:

Nomination:

¹ The sole arbitrator shall be from the SIAC SGX-DC Panel

6. Claimant makes a deposit of the Fees² by way of cheque / credit card:

Bank / Cheque No:
Visa / Mastercard ³ No:
Cardholder's Name:
Expiry Date:

7. I/We hereby file this Notice of Arbitration with the Registrar of the Singapore International Arbitration Centre, with a request that it commences administration of the arbitration. A copy of this notice is simultaneously being served on the Respondent with notice to respond within seven (7) days of receipt of this notice.

Signature(s): _____

Name(s): _____

Designation: _____

Date: _____

PART B *(For office use only)*

Date of filing of the Notice of Arbitration:

Date:
Arb No:

By whom this form has been filed:

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Date of service of Notice of Arbitration to Respondents:

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Amount of fee paid:

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² See Rule 18 of the SIAC SGX-DC Arbitration Rules

³ Please delete as appropriate