

MSME SCHEME SUBMISSION FORM

I hereby submit the following dispute for resolution, under the rules of the
LCA/CI Arb (Nigeria Branch) MSME DISPUTE RESOLUTION SCHEME

(Name of the Submitting Party)

(Address of the Submitting Party)

(Email Address)

(Telephone/ Mobile Number)

Procedure Selected:

- ☐ Arbitration
- ☐ Mediation
- ☐ Med/ Arb

Attached Copies of Agreement in Dispute and Arbitration or Mediation Clause/Agreement?

☐ YES ☐ NO

Attached Copy of Notice of Arbitration or Notice of Dispute?

☐ YES ☐ NO

Nature of Dispute, Claims and Remedies Sought (Please attach additional sheets as necessary):

Amount of Monetary Claim or Nature of Non Monetary Claim:

(Name of the Respondent)

(Address of the Respondent)

(Email Address)

(Telephone/ Mobile Number)

I hereby agree that I will abide by the rules of the LCA/CIArb (Nigeria Branch) MSME DISPUTE RESOLUTION SCHEME

(Signature of the Submitting Party)

(Date)

FOR OFFICIAL USE ONLY:

- Non-refundable administrative fee received:

YES ☐ NO ☐

- Creation of File completed?

YES ☐ NO ☐

REMARKS:
