

Mediation Request Form

The following is the information that must be provided at the time of filing of the request. You may choose to use the present form or any other document, provided this information is easily identifiable in your request for Mediation.

Party requesting a Mediation:

Name, first name, Registered name:

Domicile / registered address:

.....

Contact:

E-mail: Phone Nr.:

Others:

Represented by:

.....

.....

Contact:

E-mail: Phone Nr.:

Others:

Party requested to participate to the Mediation:

Name, first name, Registered name:

Domicile / registered address:

.....

Contact:

E-mail: Phone Nr.:

Others:

Represented by (if known at the time of filing):

.....
.....

Contact:

E-mail: Phone Nr.:

Others:

I confirm that the registration fee of CHF 400.00 was paid on the banking account of the Foundation with UBS, IBAN CH74 0027 9279 3609 2201 M, as per the attached copy of the payment order.

..... is affiliated with OFS Ombud Finance Switzerland as per art. 77 of the Federal Act on Financial Services (FinSA).

Relief sought:

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Brief description of the facts (and law):

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Exhibits:

All exhibits relevant to your description have to be filed with the request, following the numbering C-1, C-2, etc.

List of exhibits:

C-1

C-2

C-3

C-4

Etc.