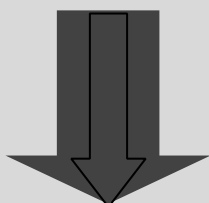


READ THIS FIRST



WHAT IS THE PURPOSE OF THIS FORM?

If conciliation fails, a party may request NBCWPS to resolve the dispute at arbitration.

WHO FILLS IN THIS FORM?

The party requesting the arbitration

WHERE DOES THIS FORM GO?

All documents must be filed with the Council Head Office of the NBCWPS. Details are as follows:

Email: info@nbcwps.org.za

Office 605 Bram Fischer Building
20 Albert Street
Johannesburg
Marshalltown
2192

PO Box 62670
Marshalltown
2107

Tel: 011 832 2080
Fax: 011 832 2288

FAILURE TO ATTEND ARBITRATION
An arbitrator may dismiss a case in terms of S138 (5) of the LRA if the referring party /applicant/employee fails to attend arbitration.

1. DETAILS OF PARTY REQUESTING ARBITRATION

Name :

I D Number:

Postal Address:.....

.....

.....

Tel:..... Fax:.....

Cell:..... Email:.....

2. DISPUTE DETAILS

Case Reference Number:

The case between:

.....(referring party)

and

..... (other party)

was referred for conciliation, but remains unresolved

The certificate confirming the failure of conciliation is attached ☐ /30 days have expired since referral ☐ **(Tick whichever is applicable)**

I / we now request that the matter be resolved through arbitration.

The issues in dispute are:

.....

.....

.....

.....

.....

.....

(Give a brief description. The panellist may require a more detailed statement of case later)

**NBCWPS
Reference.
Number.....**

Please turn over →

OTHER INSTRUCTIONS

A copy of this form must be served on the other party.

Proof that a copy of this form has been served on the other party must be supplied by attaching:

- A copy of a registered slip from the Post Office.
- A copy of a signed receipt if hand delivered.
- A signed statement confirming service by the person delivering the form.
- A copy of a fax confirmation slip; or
- Any other satisfactory proof of service.
-

Check!

Have you sent a copy of this completed form to the other party?

Have you included proof (that you have sent a copy to the other party) with this form?

Have you attached the certificate confirming that the dispute was unresolved through conciliation?

POPIA CONFIRMATION

By completing this application form. I/we hereby grant my/our voluntary consent that my/our information may be processed, collected, used and disclosed in compliance with the Protection of Personal Information Act, 4 of 2013. I/We furthermore agree that by completing this application form, my/our personal information may be used for lawful and reasonable purposes in as far as the NBCWPS (responsible party) must use my/our information in the performance of its public legal duty. I we furthermore understand that there are instances in terms of the abovementioned Act where my/our express consent is not necessary to permit the processing of personal information, which may be related to litigation or when the information is publicly available.

3.WHAT DECISION WOULD YOU LIKE THE ARBITRATOR TO MAKE:

.....

.....

.....

.....

.....

.....

The arbitrator may require a more detailed statement of case later.

4.CONFIRMATION OF ABOVE DETAILS:

Form submitted by(name):.....

Signature:.....

Designation:Date.....

Place:

This form must be signed by the referring party or a person entitled to represent the party in the arbitration proceedings

5.DETAILS OF OTHER PARTY

Name:.....

Designation:.....

Postal address:.....

.....

.....

Tel:.....Fax:.....

Cell:..... E-mail.....

Please turn over

ARBITRATION REQUESTS
SECTION LIST/NATURE OF DISPUTE

LRA Section	Dispute
133(2)(b) / 141(1)	Consent to arbitration where Labour Court has jurisdiction
191(5)(a)	Unfair dismissal
191(5)(a)	Unfair labour practices
191(12)	Unfair dismissal for operational requirements, affecting one employee.
BASIC CONDITIONS OF EMPLOYMENT ACT SECTION 41	Severance pay