



Application for the Appointment of a Court-Annexed¹ Mediator

APPLICATION FORM (2026)

NOTES:

- This completed application form together with proof of payment of the prescribed application fee must be submitted by the Participant submitting this application (the Initiating Participant) to the Association of Arbitrators (Southern Africa) NPC (the Association) at nominations@arbitrators.co.za and, at the same time, transmitted to the Receiving Participant/s and/or the Receiving Participant/s' Representative/s. An invoice for the prescribed application fee will be issued to the Initiating Participant once the Association has processed this application.
- To enable the Association to process this application, the Initiating Participant is required to provide the information requested in all fields of this document. If necessary, kindly make use of clearly referenced attachments.
- Kindly refrain from attaching any pleadings, notices or documents pertaining to the underlying court action to this document. If required, such documents and other information will be requested from the Participants by the Appointed Mediator.
- The Participant's personal information will be shared only with each other and/or their Representatives, the Association's Nominations Committee, the Appointed Mediator and those with a legitimate interest in this appointment. The Association will not intentionally share personal information with anyone else without a Participant's consent. However, in processing Participants' personal information, it may be shared with third party service providers including but not limited to payment processors, email management and distribution service providers, and/or data storage providers.
- At least 10 business days should be allowed for the processing of this application.

BANKING DETAILS OF THE ASSOCIATION OF ARBITRATORS (SOUTHERN AFRICA) NPC:

Account Holder:	Association of Arbitrators (Southern Africa) NPC
Bank:	First National Bank
Current Account Number:	628 138 641 06
Branch Code:	254 605

APPLICATION FEE:

Once-off non-refundable application fee:	COST (INCLUDING VAT):
	R 500.00

APPLICATION:

I / we hereby make application to the Association to appoint a court-annexed mediator for purposes of the dispute referred to below, on the terms and conditions contained elsewhere in this document.

DISPUTE DETAILS:

1. Identify the nature of the dispute (for example: family law, road accident fund, medical negligence, commercial, construction, etc.):

2. State the amount/s claimed and, if applicable, counter-claimed:

¹ This application form is applicable ONLY to the appointment of court-annexed mediators in civil actions in the Pretoria- and Johannesburg High Courts subject to the Gauteng Judge President's Mandatory Mediation Directive and Protocol. For all private and other mediations, please use this standard [Application for the Appointment of Arbitrator/s, Adjudicator/s and Mediator/s](#) application form.

3. State the nature of the relief claimed and, if applicable, counter-claimed (for example: payment, interdict, declaratory order, etc.):

4. Identify the Division (for example: Pretoria or Johannesburg) of the High Court of South Africa where the underlying court action is pending:

5. Identify the case number/s of the underlying court action/s:

6. Identify the capacities (for example: plaintiff, defendant, etc.) and the names of the participants as they are cited in the pleadings relevant to the underlying court action:

7. State the preferred centre for the mediation proceedings (for example: Pretoria or Johannesburg):

8. State the language used in the pleadings relevant to the underlying action:

9. State any particular skills, experience, qualifications or status required of the Appointed Mediator (for example: Senior or Junior Advocate, Senior or Junior Attorney, Quantity Surveyor, Engineer, etc.):

10. State any preferred field of practice/specialisation required of the Appointed Mediator (for example: family, road accident fund, medical negligence, construction, insurance, banking, etc.):

11. Identify any member of the Association who might have a conflict of interest as Appointed Mediator (for example: by having previously advised or represented any of the Participants):

INITIATING PARTICIPANT'S PARTICULARS:

Name:		
Name of Responsible Person (if applicable):		
Email Address:		
Telephone No.:	Mobile No.:	

LEGAL REPRESENTATIVE/S ACTING FOR INITIATING PARTICIPANT:

Name of Firm:		
Name of Responsible Practitioner:		
Email Address:		
Telephone No.:	Mobile No.:	

RECEIVING PARTICIPANT/S PARTICULARS:

Name:		
Name of Responsible Person (if applicable):		
Email Address:		
Telephone No.:	Mobile No.:	

LEGAL REPRESENTATIVE/S ACTING FOR RECEIVING PARTICIPANT/S:

Name of Firm:		
Name of Responsible Practitioner:		
Email Address:		
Telephone No.:	Mobile No.:	

INVOICE DETAILS OF INITIATING PARTICIPANT:**NOTE:**

- In order to receive a tax invoice, the following details must be completed in full. Mark "Company" and "VAT No." as "N/A" if the invoice is to be made out in your personal capacity and/or if the initiating party is not registered as a VAT vendor;
- A non-refundable fee of R500.00 (incl.) in respect of the Association's administrative costs must be made before the Association will appoint an ADR practitioner for this dispute. It is therefore essential that you submit to us proof of payment using our invoice number as a reference.

Company:	VAT Registration No.:
Name of Responsible Person (if applicable):	Email Address:
Telephone No.:	Mobile No.:
Physical Address:	
Postal Code:	

DISCLAIMER AND DECLARATION:

I, in my personal capacity as Initiating Participant / duly authorised representative of the Initiating Participant, as the case may be, hereby confirm that all conditions necessary for the requested appointment of a court-annexed mediator as set out above have been complied with. I indemnify the Association, its directors, employees, agents and Appointed Mediator against all any liability howsoever arising from or related to any claims, actions, proceedings and the like which may be instituted by the Receiving Participant or anyone against any one or more of the aforesaid, howsoever arising from or related to this application or any mediation process arising from or related thereto.

Name:	
Place:	
Date:	Signature:²

NOTE:

Before submitting this application to the Association, please ensure that you have:

- Completed all fields of this form;
- Attached proof of payment of the prescribed application fee;
- Transmitted a copy of this completed application form together with proof of payment of the prescribed application fee to the Receiving Participant/s and, if applicable, the Receiving Participant/s' Representatives;
- Attached proof of transmission of the aforesaid to the Receiving Participant/s and, if applicable, the Receiving Participant/s' Representative to your application.

Upon receipt of your application, provided that it complies with all of the aforesaid, the Association will allocate a unique reference number to this matter. Please ensure that you state this reference number in all further communications with the Association.

Once it has appointed a Mediator, the Association becomes *functus officio* and will not be involved in the mediation process in any manner until such time as the Appointed Mediator reports to the Association on the outcome of the mediation process in accordance with the Gauteng Judge President's Mandatory Mediation Directive and Protocol.

² If you have not already set up your digital signature, click [here](#) to do so now. Once you have set up your digital signature, you can thereafter sign all future electronic documents securely.