

REQUEST FOR ARBITRATION

Read This First



WHAT IS THE PURPOSE OF THIS FORM?

If conciliation fails, a party may request that the FBCWC resolve the dispute by arbitration.

WHO FILLS IN THIS FORM?

The party requesting the arbitration.

WHERE DOES THIS FORM GO?

To the Secretary of the FBCWC. (Please see below for details).

This should be the same office, which conducted the conciliation.

FBCWC
19 Kent Street
Salt River
7925
P.O.Box 1123
Woodstock
7915

1. DETAILS OF PARTY REQUESTING ARBITRATION

Name:

Postal Address:

Tel: Fax:

Cell: Email:

2. DISPUTE DETAILS

Case Reference Number:

The case between and ..
(party) (other party)
was referred for conciliation, but remains unresolved

The certificate confirming the failure of conciliation is attached

In terms of Section I/we now request that
(see chart on page 3)
the matter be resolved through arbitration.

The issues in dispute are

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

Ref. 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.

The certificate confirming that the dispute was unresolved through conciliation must also be attached to this form.

If a party does not want the commissioner who conducted the conciliation proceedings to arbitrate this dispute, that party must fill in LRA form 7.14.

If both parties agree on a particular commissioner to arbitrate then they must inform the FBCWC within 48 hours of the dispute being certified as unresolved.

If a party wants a senior commissioner to arbitrate they must fill in LRA Form 7.15.

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?

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

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.....
.....
.....
.....

The commissioner 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: Email:

Please turn over 

ARBITRATION REQUESTS
SECTION LIST/NATURE OF DISPUTE

LRA Section	Dispute
16(9)	Disclosure of information
21(7)	Collective agreement on organisational rights
21(11)	Withdrawal of organisation rights
22(4)	Interpretation or application of organisational rights
24(5)	Interpretation or application of collective agreement
24(6)	Interpretation or application of agency or closed shop agreement
45(4)	Interpretation or application of ministerial determination
61(13)	Interpretation or application of lapsed collective agreement
74(4)	Disputes in essential services
86(7)	Joint decision-making (workplace forum)
89(6)	Disclosure of information (workplace forum)
94(4)	Interpretation or application of workplace forum provisions
133(2)(b)	Consent to arbitration
141(4)	Arbitration of Labour Court matter by consent
191(5)(a)	Unfair dismissal
196(9)	Severance pay
Sch 7, item 3(4)(b)	Unfair labour practices
MAIN COLLECTIVE AGREEMENT	Compliance
<p><u>NB:</u> Demarcation disputes (Section 62) must be processed on LRA Form 3.23</p>	