

PLEASE EMAIL THIS FORM WITHIN ONE BUSINESS DAY AFTER THE
PRELIMINARY CONFERENCE TO ADR-1JD@NYCOURTS.GOV

SUPREME COURT, CIVIL BRANCH, NEW YORK COUNTY
NON-DIVISION COMMERCIAL ADR PROGRAM

-----X

Part: PMP

Plaintiff,
- against -

Index No. _____

Defendant.

ADR INITIATION FORM

-----X

Assigned Justice: _____

Prel. Conf. Date: _____

1. This case was referred to the Commercial Division Alternative Dispute Resolution Program ([Administrative Order](#) of Justice Deborah A. Kaplan dated January 22, 2019).

2. The attorneys for all parties herein are as follows:

For Plaintiff:

For Defendant:

_____, Esq.

_____, Esq.

_____ [Firm]

_____ [Firm]

Phone: _____

Phone: _____

Email: _____

Email: _____

For Others (Attach an additional sheet if necessary):

_____, Esq.

_____, Esq.

_____ [Firm]

_____ [Firm]

Phone: _____

Phone: _____

Email: _____

Email: _____

Attorney for:

Attorney for:

3. Please briefly describe this case, including, if possible, the damages claimed:

4. In order that a proposed mediator may run a conflict check as required, counsel for any corporate party must list here or on an attached sheet the names of all corporate parents, subsidiaries, or affiliates:

5. This case shall be mediated unless otherwise agreed.

6. Please indicate whether there are in this case:

Motions *sub judice*: Yes ____ No _____ Appeals: Yes ____ No _____

If you indicated “Yes” to either of the foregoing, please contact the ADR Office immediately.

7. By signing below, counsel, on behalf of their clients, certify that they have read and will comply with the [Rules and Procedures of the Commercial Division Alternative Dispute Resolution Program.](#)

Signature:

Signature:

Name:

Name:

For further information, consult the [New York County Supreme Court ADR website](#) or contact the ADR Office at 212-256-7956 or ADR-1JD@nycourts.gov

Do not use the E-Filing Program to communicate with the Coordinator.