

Superior Court of California, County of Los Angeles

JOHN A. CLARKE, EXECUTIVE OFFICER/CLERK

ALTERNATIVE DISPUTE RESOLUTION (ADR)

ADR CASE REFERRAL INTAKE

(Please type or print clearly)

CASE INFORMATION			
Case Number: _____	Courthouse: _____	Dept.: _____	
Case Name: _____			
Litigation Type: <input type="checkbox"/> Civil <input type="checkbox"/> Family Law <input type="checkbox"/> Probate <input type="checkbox"/> Other (specify): _____			
ADR Process: <input type="checkbox"/> MEDIATION <input type="checkbox"/> ARBITRATION <input type="checkbox"/> NEUTRAL EVALUATION <input type="checkbox"/> SETTLEMENT CONFERENCE			
Case Type: See Page 2		ADR Completion Date: _____	
Amount in Dispute:			
Plaintiff/Petitioner or attorney:			
<input type="checkbox"/> \$0-\$25,000		<input type="checkbox"/> \$50,000-\$100,000	
<input type="checkbox"/> \$25,000-\$50,000		<input type="checkbox"/> \$100,000-\$250,000	
<input type="checkbox"/> \$250,000-\$500,000		<input type="checkbox"/> \$750,000-\$1,000,000	
<input type="checkbox"/> \$500,000-\$750,000		<input type="checkbox"/> Over \$1,000,000	

Defendant/Respondent or attorney:			
<input type="checkbox"/> \$0-\$25,000		<input type="checkbox"/> \$50,000-\$100,000	
<input type="checkbox"/> \$25,000-\$50,000		<input type="checkbox"/> \$100,000-\$250,000	
<input type="checkbox"/> \$250,000-\$500,000		<input type="checkbox"/> \$750,000-\$1,000,000	
<input type="checkbox"/> \$500,000-\$750,000		<input type="checkbox"/> Over \$1,000,000	
NEUTRAL SELECTION			
Party Select Panel:			
<input type="checkbox"/> The parties select the following Neutrals in order of preference from the Court ADR Party Pay Panel and acknowledge they are undertaking a financial commitment in selecting a Party Pay Panel Neutral.			
1) NAME: _____		NEUTRAL NO.: _____	
2) NAME: _____		NEUTRAL NO.: _____	
_____ (signature of plaintiff/petitioner or attorney)		_____ (signature of defendant/respondent or attorney)	
<input type="checkbox"/> ADDITIONAL SIGNATURES LISTED ON ATTACHED PAGE			
Random Select Panel:			
<input type="checkbox"/> The parties understand that a Neutral from the Court ADR Pro Bono Panel will be assigned on a random basis (civil mediation and arbitration only).			
NAME OF ASSIGNED NEUTRAL: _____		NEUTRAL NO.: _____	
PARTIES			
ATTORNEY NAME: _____		ATTORNEY NAME: _____	
FIRM: _____		FIRM: _____	
ADDRESS: _____		ADDRESS: _____	
CITY: _____	STATE: _____	CITY: _____	STATE: _____
ZIP: _____		ZIP: _____	
PHONE: () _____		PHONE: () _____	
FAX: () _____		FAX: () _____	
E-MAIL: _____		E-MAIL: _____	
ATTORNEY FOR: _____		ATTORNEY FOR: _____	
(party name) (party type)		(party name) (party type)	
ATTORNEY NAME: _____		ATTORNEY NAME: _____	
FIRM: _____		FIRM: _____	
ADDRESS: _____		ADDRESS: _____	
CITY: _____	STATE: _____	CITY: _____	STATE: _____
ZIP: _____		ZIP: _____	
PHONE: () _____		PHONE: () _____	
FAX: () _____		FAX: () _____	
E-MAIL: _____		E-MAIL: _____	
ATTORNEY FOR: _____		ATTORNEY FOR: _____	
(party name) (party type)		(party name) (party type)	
<input type="checkbox"/> ADDITIONAL PARTIES LISTED ON PAGE THREE			
FOR OFFICE USE ONLY			
Received by: _____		Case Mgr Assigned: _____	
Name Date		Name Date	

ADR CASE REFERRAL INTAKE
(continued)

Case Name:	Case Number:
-------------------	---------------------

CASE SELECTION CRITERIA

	CASE TYPE
<input type="checkbox"/>	Antitrust/Trade Regulation
<input type="checkbox"/>	Auto Tort - Personal Injury/Property Damage/Wrongful Death (PI/PD/WD)
<input type="checkbox"/>	Auto Tort - Uninsured Motorist - PI/PD/WD
<input type="checkbox"/>	Civil Harassment
<input type="checkbox"/>	Construction Defect
<input type="checkbox"/>	Contract - Breach of Rental/Lease Contract (not insurance, UD, or wrongful eviction)
<input type="checkbox"/>	Contract - Collections
<input type="checkbox"/>	Contract - Contract/Warranty Breach - Seller Plaintiff (not insurance, fraud, or negligence)
<input type="checkbox"/>	Contract - Contractual Fraud
<input type="checkbox"/>	Contract - Insurance Coverage/Subrogation
<input type="checkbox"/>	Contract - Negligent Breach of Contract/Warranty (not insurance or fraud)
<input type="checkbox"/>	Contract - Other Breach of Contract/Warranty (not insurance, fraud, or negligence)
<input type="checkbox"/>	Contract - Tortious Interference
<input type="checkbox"/>	Declaratory Relief Only
<input type="checkbox"/>	Elder/Dependent Adult Abuse
<input type="checkbox"/>	Employment - Labor Commissioner Appeals
<input type="checkbox"/>	Employment - Other (not wrongful termination or labor commissioner appeal)
<input type="checkbox"/>	Employment - Wrongful Termination
	Family
<input type="checkbox"/>	Injunctive Relief Only (not domestic/harassment)
<input type="checkbox"/>	Non-PI/PD/WD Tort - Business/Commercial Tort (not fraud or breach of contract)
<input type="checkbox"/>	Non-PI/PD/WD Tort - Civil Rights (e.g., discrimination, false arrest)
<input type="checkbox"/>	Non-PI/PD/WD Tort - Defamation (e.g., slander, libel)
<input type="checkbox"/>	Non-PI/PD/WD Tort - Fraud (no contract)
<input type="checkbox"/>	Non-PI/PD/WD Tort - Intellectual Property
<input type="checkbox"/>	Non-PI/PD/WD Tort - Legal Malpractice
<input type="checkbox"/>	Other PI/PD/WD Tort - Asbestos
<input type="checkbox"/>	Other PI/PD/WD Tort - Intentional (e.g., assault, vandalism, etc.)
<input type="checkbox"/>	Other PI/PD/WD Tort - Intentional Infliction of Emotional Distress
<input type="checkbox"/>	Other PI/PD/WD Tort - Medical Malpractice
<input type="checkbox"/>	Other PI/PD/WD Tort - Premises Liability
<input type="checkbox"/>	Other PI/PD/WD Tort - Product Liability (not asbestos, toxic/environmental)
<input type="checkbox"/>	Partnership & Corporate Governance
	Probate
<input type="checkbox"/>	Real Property - Eminent Domain/Condemnation
<input type="checkbox"/>	Real Property - Mortgage Foreclosure
<input type="checkbox"/>	Real Property - Quiet Title
<input type="checkbox"/>	Real Property - Wrongful Eviction
<input type="checkbox"/>	Real Property - Other
<input type="checkbox"/>	Securities
<input type="checkbox"/>	Toxic Tort/Environmental
<input type="checkbox"/>	Workplace Harassment
<input type="checkbox"/>	Writ of Mandate

Do you need a neutral who accepts cases on short notice? Yes No

Jurisdiction Type: Unlimited Limited

Language ability needed other than English: _____

ADA Accommodations

- | | |
|---|---|
| <input type="checkbox"/> Accessible parking | <input type="checkbox"/> Accessible entrance |
| <input type="checkbox"/> Accessible elevators | <input type="checkbox"/> Accessible restrooms |
| <input type="checkbox"/> Accessible public phones | <input type="checkbox"/> Accessible listening devices |
| <input type="checkbox"/> Accessible tables/counters | <input type="checkbox"/> Other (specify): _____ |

Location: Zip Code: _____ City: _____

ADR CASE REFERRAL INTAKE
(continued)

(This Form Must Be Completed In Detail)

Case Name:	Case Number:
-------------------	---------------------

ADDITIONAL PARTIES	
ATTORNEY NAME:	ATTORNEY NAME:
FIRM:	FIRM:
ADDRESS:	ADDRESS:
CITY: STATE: ZIP:	CITY: STATE: ZIP:
PHONE: () FAX: ()	PHONE: () FAX: ()
E-MAIL:	E-MAIL:
ATTORNEY FOR: _____ (party name) (party type)	ATTORNEY FOR: _____ (party name) (party type)
ATTORNEY NAME:	ATTORNEY NAME:
FIRM:	FIRM:
ADDRESS:	ADDRESS:
CITY: STATE: ZIP:	CITY: STATE: ZIP:
PHONE: () FAX: ()	PHONE: () FAX: ()
E-MAIL:	E-MAIL:
ATTORNEY FOR: _____ (party name) (party type)	ATTORNEY FOR: _____ (party name) (party type)
ATTORNEY NAME:	ATTORNEY NAME:
FIRM:	FIRM:
ADDRESS:	ADDRESS:
CITY: STATE: ZIP:	CITY: STATE: ZIP:
PHONE: () FAX: ()	PHONE: () FAX: ()
E-MAIL:	E-MAIL:
ATTORNEY FOR: _____ (party name) (party type)	ATTORNEY FOR: _____ (party name) (party type)
ATTORNEY NAME:	ATTORNEY NAME:
FIRM:	FIRM:
ADDRESS:	ADDRESS:
CITY: STATE: ZIP:	CITY: STATE: ZIP:
PHONE: () FAX: ()	PHONE: () FAX: ()
E-MAIL:	E-MAIL:
ATTORNEY FOR: _____ (party name) (party type)	ATTORNEY FOR: _____ (party name) (party type)

To obtain additional case information, visit Case Summaries at www.lasuperiorcourt.org