|  |  |
| --- | --- |
| In the Matter of the Arbitration of :  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,  Petitioner,   -against-  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,   Respondent. | **NEUTRAL ARBITRATOR QUESTIONNAIRE** |
|  |  |

You have been identified as a potential Neutral Panel Arbitrator in the above captioned arbitration. To assist the parties in evaluating the qualifications of persons nominated to serve in this arbitration, to identify any potential conflict of interest, and to ensure that you qualify as a Neutral Panel Arbitrator with respect to the parties and counsel, please supply the following information and return the completed Questionnaire to the Executive Director of ARIAS•U.S within 14 days of receipt.

|  |  |
| --- | --- |
| Counsel Names/Address for Petitioner | Counsel Names/Address for Respondent |
|  |  |
|  |  |

# Name: Click here to enter text.

# Company: Click here to enter text.

# Address: Click here to enter text.

# Telephone: Click here to enter text.

# Cell Phone: Click here to enter text.

# Email address: Click here to enter text.

# Home address: Click here to enter text.

# Home Telephone: Click here to enter text.

# EMPLOYMENT HISTORY

Please attach a current resume or CV containing your current and past employment, including the length of employment at each job and your primary responsibilities. In the event that you believe the ARIAS web page provides this same detail, please check here ☐ and use your discretion as to whether you want to also include your resume.

# FEE SCHEDULE

Please advise:

# Hourly rate: $ Click here to enter text.

# Travel or other requirements: Click here to enter text.

Do you require a non-refundable retainer? \_\_\_\_\_ If yes, what is the retainer fee?

# Click here to enter text.

Do you charge a cancellation fee? \_\_\_\_ If yes, please advise of the terms:

# Click here to enter text.

If you have any additional fee requirements and/or prefer to attach your fee

schedule, please attach your fee schedule.

# INSURANCE ARBITRATION EXPERIENCE

## Have you previously participated as a party-appointed arbitrator in connection with an insurance dispute between an insurance company and an entity other than a reinsurer?

Yes No

If yes, please state the number of times that you have served as a party-appointed arbitrator.

# Click here to enter text.

## Have you previously participated as an umpire in connection with an insurance dispute between an insurance company and an entity other than a reinsurer?

Yes No

If yes, please state the number of times that you have served as an umpire.

# Click here to enter text.

## If yes to A or B, how many such matters concluded with a Final Award from the Panel?

Click here to enter text.

# REINSURANCE ARBITRATION EXPERIENCE

## Have you previously participated as a party-appointed arbitrator in connection with an insurance dispute between an insurance company and a reinsurer?

Yes No

If yes, please state the number of times that you have served as a party-appointed arbitrator.

# Click here to enter text.

## Have you previously participated as an umpire in connection with a reinsurance dispute between an insurance company and a reinsurer?

Yes No

If yes, please state the number of times that you have served as an umpire.

# Click here to enter text.

## If yes to A or B, how many such matters concluded with a Final Award from the Panel?

# Click here to enter text.

# SUBJECT MATTER OF THE ARBITRATION

This arbitration involves: **[insert a neutral description of the dispute between the parties that includes the (re)insurance contract name, the years of the (re)insurance contract(s) at issue, the parties to the contract and the claims and/or issues involved]**.

## Were you ever involved in an insurance or reinsurance transaction or dispute involving any of the specific claims, polices, and/or reinsurance contracts at issue in this matter as described in the paragraph above?

Yes No

# If yes, please explain: Click here to enter text.

## Please disclose any articles that you have authored or co-authored that may be related to and/or address the issue(s) in this dispute.

# Click here to enter text.

## Have you previously provided expert testimony related to any of the issues described above?

Yes No

If yes, please explain.

# Click here to enter text.

## Might these facts or circumstances prevent you from rendering an unbiased decision in this arbitration?

Yes No

If yes, please explain.

# Click here to enter text.

# COMMUNICATIONS WITH THE PARTIES AND PARTIES’ COUNSEL

## Have you had any communications with the parties or their counsel regarding this matter (as described in paragraph 8 below), including but not limited to your qualifications for and/or the possibility of your service as a neutral arbitrator herein?

Yes No

If yes, please explain.

# Click here to enter text.

# COMPLIANCE WITH NEUTRAL ARBITRATION PANEL CRITERIA

For purposes of paragraphs 8-10 below, the following definitions are applicable:

“**Served**” as an arbitrator, umpire, expert, consultant or attorney is defined as commencing at the time of retention; and

“**Party**” is defined as (a) the named party and its parents, subsidiaries and affiliates whose insurance and reinsurance disputes, as applicable, are managed by the same group of individuals that manage the party’s insurance or reinsurance disputes, and (b) a non-affiliated entity (including that entity’s agent) that manages the named party’s claims at issue in the arbitration. [Insert an appendix listing (i) all the entities that qualify as parents, subsidiaries and affiliates of the named parties that are managed by the same group of individuals that manage the named parties’ disputes, and (ii) non-affiliated entities (including that entity’s agent) that manage the named party’s claims at issue in the arbitration]

1. Are you a current member in good standing of ARIAS U.S.?

Yes No

1. Are you currently certified as an ARIAS Arbitrator?

Yes No

1. Are you a current or former officer or executive of an insurance or reinsurance company?

Yes No

1. Have you Served as a party-appointed arbitrator during the past five (5) years for either Party in more than 10% of your total appointments as a party-appointed arbitrator during that period?

Yes No

1. Have you Served as a party-appointed arbitrator during the past five (5) years where, in more than 10% of your total appointments as a party-appointed arbitrator during that period, either Party’s law firm or the lawyers identified above acted as counsel?

Yes No

1. Have you Served as an umpire or neutral arbitrator during the past five (5) years for either Party in more than 20% of your total appointments as umpire or neutral arbitrator during that period?

Yes No

1. Have you Served as an umpire or neutral arbitrator during the past five (5) years where, in more than 20% of your total appointments as umpire and neutral arbitrator during that period, either Party’s law firm or the lawyers identified above acted as counsel?

Yes No

1. Have you Served as an expert or consultant during the past five (5) years for either Party in more than 50% of your total appointments as an expert or consultant during that period?

Yes No

1. Have you Served as an expert or consultant during the past five (5) years where, in more than 50% of your total appointments as an expert and consultant during that period, either Party’s law firm or the lawyers identified above acted as counsel?

Yes No

1. Have you Served as counsel during the past (5) years for either Party in more than 10% of your total appointments as counsel during that period?

Yes No

1. Have you been employed by either party within the last five (5) years?

Yes No

# POTENTIAL CONFLICTS

## Please identify the number of pending and past appointments from the past five years as a party-appointed arbitrator, umpire, expert witness, consultant, mock/shadow panelist, and/or external counsel that also involved one or more of the Parties, or the Parties’ counsel:

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Participants in the Current Arbitration | **# and Ways in which You Participated in Other Pending and Past Proceeding(s) Involving any Party/Counsel in the Current Arbitration** | | | | | | | | |
| **As a Party Arbitrator** | | **As the umpire or a neutral** | | **As an expert witness, consultant or mock/shadow panelist for any party** | | **As External Counsel** | | |
| **#**  **Pending** | **#**  **Past** | **#**  **Pending** | **#**  **Past** | **#**  **Pending** | **#**  **Past** | | **#**  **Pending** | **# Past** |
| *(Petitioner)* Click here to enter text. |  |  |  |  |  |  | |  |  |
| *(Respondent)*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |  | |  |  |
| *(Pet.’s Attorney of Record)*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |  | |  |  |
| *(Pet.’s Law Firm)*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |  | |  |  |
| *(Resp.’s Attorney of Record)*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |  | |  |  |
| *(Resp.’s Law Firm)*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |  | |  |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |  | |  |  |
|  |  |  |  |  |  |  | |  |  |

# Click here to enter text.

## Do you know if any companies with which you are presently affiliated have an ongoing business relationship with any of the Parties?

Yes No

If yes, please explain:

# Click here to enter text.

## Do you or any immediate family members have any financial interest in the result of this arbitration?

Yes No

If yes, please explain:

# Click here to enter text.

## Have you, or has an entity with which you are or were affiliated (or were affiliated during the past five years and only with respect to the period of your affiliation) ever retained either Party’s counsel or their respective law firms as an attorney, arbitrator, umpire, expert witness, or consultant?

Yes No

# If yes, describe the retention and disclose type of service and approximate date so engaged. Click here to enter text.

Apart from participating in industry conferences and other industry functions, please briefly disclose to the best of your knowledge any **business, professional, or social relationships** that you have had with any individuals you understand to now be or have been employed by or professionally affiliated with the Parties, their counsel and/or their law firms in this matter. These relationships are defined as follows:

**Professional Relationship:** a relationship in which one person, individually or acting on behalf of a corporate entity, requests and is granted professional assistance from a qualified source including relationships that exist with attorneys, vendors, actuaries, consultants and claim adjustors.

**Business Relationship:** a relationship procured for the purpose of economically or professionally benefiting one or both parties, whether individually or acting on behalf of a corporate entity or any entity within which you are affiliated, and which extends beyond three months.

**Social Relationship:** a recurring interaction, apart from a professional or business relationship, procured by the parties for the purposes of camaraderie and/or a shared interest in sports, arts, culture, religion, government, or philanthropy.

# Click here to enter text.

# OTHER CONSIDERATIONS

At this time, do you believe that you will have time for a (one week/two week/three week – choose one) hearing between (complete date by counsel – “9-15 months from now”) hearing: Yes No

# If no, please explain: Click here to enter text.

## Are you aware of any other facts or circumstances that might create an appearance of partiality on your part or impair your ability to serve in the above-captioned arbitration (please see the ARIAS Code of Conduct).

Yes No

# If yes, please explain: Click here to enter text.

## D. If you are selected:

1. Do you agree to act consistently with the ARIAS Code of Conduct?

Yes No

### Do you agree to refuse to accept appointments as an expert, consultant, counsel or non-neutral arbitrator on behalf of or against either of the Parties and the Parties’ counsel prior to the final disposition of the above-captioned arbitration and comply with the ARIAS –U.S. Neutral Panel Rules for the Resolution of U.S. Insurance and Reinsurance Disputes?

Yes No

ATTESTATION

The foregoing statements are true, accurate, and complete to the best of my knowledge and belief.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Date: Click here to enter text.

Exhibit – List subsidiaries, affiliates, parent companies and entities managing the named Parties’ claims at issue in the arbitration, if needed.