

Form No- I:
Arbitration Application

To,
The Arbitration Division.
Multi Commodity Exchange of India Ltd.,
102A, Landmark, Suren Road,
Chakala, Andheri (East),
Mumbai – 400 093

Sir(s),

I/We, am/are a Member of the Exchange/Constituent of _____*(Please mention name of Member). I/We hereby apply for adjudication by arbitration of the claim, difference and dispute within the meaning of the Bye laws, Rules and Regulations of the Exchange which has arisen and is now pending between me and following person

- a) Name :
- b) Status :
- c) Address :
- d) Registered Office :
- e) Contact Number :
 - Office :
 - Residence :
 - Mobile No :
 - Fax No :
 - Email :

The amount of claim in the matter is:

- (a) Rs. _____ (in word) (Rupees _____ only)
- (b) Commodity details:
 - 1. Commodity Name/s _____
 - 2. Date of transaction on the Exchange: _____

Please find enclosed a cheque/Demand Draft/Pay order No. _____ dated _____ issued by _____ bank in favour of Multi Commodity Exchange of India Ltd., for an amount of Rs. _____ (Rupees _____ only) payable at Mumbai towards Arbitration deposit for defraying costs and expenses of arbitration.

I/We state that I do not want a hearing from the arbitrator/ I do want a hearing from the arbitrator*

Signature of Applicant

Date:
Place:

Note:

The Applicant shall put his/her signature on all the pages of the documents submitted along with this form and if the Applicant is s firm/company, the rubber stamp of the firm/company shall be affixed on all the pages. If the Applicant is a firm/company then the authorized representative of the Applicant has to submit the authority letter/board resolution as the case may be along with this form.

Five names are to be suggested from the list of persons eligible to act as arbitrators

* Strike whichever is not relevant.

Form No- II

**In the matter of an Arbitration under the Bye laws, Rules and Regulations of the Multi
Commodity Exchange of India Ltd.,
Arbitration Matter No. MCX/Legal/ /0 .**

BETWEEN

M/s _____

Mr./Mrs./Ms. _____ Applicant

Office _____ /Residence
Address _____

Tel: Office _____ Res. _____ Fax: Office _____
Mobile No. _____

AND

M/s _____ Respondent

Registered Office _____

Tel: Office _____ Res. _____ Fax: Office _____ Res. _____
Mobile No. _____

To,

Arbitration Division,
Multi Commodity Exchange of India Limited
102A, Landmark, Suren Road,
Chakala, Andheri (East),
Mumbai – 400 093

Sir/s,

In the said matter, we, the above named the Applicant/ Respondent, do hereby propose the following names of four Arbitrators from the approved panel of Arbitrators for appointment as Arbitrator or bench of Arbitrators in order of preference.

1.

2.

3.

4.

Yours faithfully,

Signature

Date:

Place:

Form No- III
Reply by the Respondent to Arbitration Application

In the matter of an Arbitration under the Bye laws, Rules and Regulations of the Multi Commodity Exchange of India Ltd., Arbitration Matter No. _____/200_.

BETWEEN

Mr./Mrs./Ms. _____ Applicant (TM/C)*
Office /Residence Address _____

Tel: Office _____ Res. _____ Fax: Office _____ Res. _____
Mobile No. _____

AND

M/s _____ Respondent (TM/C)*

Registered Office _____

Tel: Office _____ Res. _____ Fax: Office _____ Res. _____
Mobile No. _____

To,
Arbitration Division,
Multi Commodity Exchange of India Limited
102A, Landmark, Suren Road,
Chakala, Andheri (East),
Mumbai – 400 093

Sir/s,

In connection with the application for arbitration submitted by Mr./Mrs./Ms./M/s. _____ the Applicant above named, I/We enclose herewith three/Six copies of my reply along with the enclosures.

Please also find enclosed a Cheque/Pay order/Demand Draft No. _____ dated _____ issued by _____ bank in favour of Multi Commodity Exchange of India Limited for an amount of Rs. _____ (Rupees _____ only) payable at Mumbai towards Arbitration deposit for defraying costs and expense of arbitration.

I/We state that I do not want a hearing from the arbitrator/I do not want a hearing from the arbitrator.

Yours faithfully,

Signature of Respondent

Date:

Place:

Note: The Respondent shall put his/her signature on all the pages of the documents submitted along with this form and if the Respondent is a firm/company, the rubber stamp of the firm/company shall be affixed on all the pages. If the Respondent is a firm/company/ten the authorized representatives of the Respondent has to submit the authority letter/board resolution as the case may be along with this form.

'TM' stands for "Member" and 'C' stands for "Constituents"

* Strike whichever is not relevant.