

Dispute Resolution Center of Jefferson County
Real Estate Contract Case Data Form

Seller Name: _____
Address: _____
City & Zip Code: _____
Email Address: _____
Phone: Work _____ Home _____ Other _____

Buyer Name: _____
Address: _____
City & Zip Code: _____
Email Address: _____
Phone: Work _____ Home _____ Other _____

Please list **all** other parties, as appropriate, who may be affected/ involved with this contract:

Listing Agent: _____
Company Name: _____
Address: _____
City & Zip Code: _____ Phone: _____
Email Address: _____

Selling Agent: _____
Company Name: _____
Address: _____
City & Zip Code: _____ Phone: _____
Email Address: _____

Other (as needed): _____
Company Name: _____
Address: _____
City & Zip Code: _____ Phone: _____
Email Address: _____

Briefly describe the problem that exists with this case (attach additional pages if necessary):

Your mediation session will be scheduled for the next available Thursday evening at 6:00 p.m. at the Jefferson County Courthouse. We will mail you confirmation of the date/site/time of mediation and guidelines for the session.

Will this be a convenient time for you? Yes ___ No ___ (We will contact you to consider other dates/times)

Who referred you to the Center? _____

Your Signature: _____ Date: _____

There is a non-refundable fee of \$20 for cases submitted to our agency.

Return this form and \$20 fee, paid by check*, money order or cashiers' check, made payable to:

Dispute Resolution Center
County Courthouse- Annex 1
215 Franklin, Suite 131A
Beaumont, TX 77701

Phone (409) 835-8747 or (409) 727-2191, ext. 8747 Fax: (409) 784-5811