

IN THE COUNTY COURT IN AND FOR BROWARD COUNTY, FLORIDA

Case Number:

Division:

Plaintiff,

v.

Defendant.

_____ /

ORDER REFERRING COUNTY CIVIL CASE TO ARBITRATION
(Single Arbitrator)

THE COURT sua sponte [] OR [] upon the motion of a party, hereby refers the above-caption matter to non-binding arbitration as authorized by statute and rules of procedure. It is ORDERED as follows:

1. The parties shall within fifteen (15) days of the date of this Order select an arbitrator from those individuals authorized to conduct arbitrations for this County/Circuit. The parties shall file the original joint notice of the name, address, and telephone number of the selected arbitrator with the Court Mediation and Arbitration Program, Room 19150, Broward County Courthouse, 201 S.E. Sixth Street, Fort Lauderdale, Florida 33301.
2. If the parties cannot agree, the Court appointed the following arbitrator:

Name _____

Address _____

Telephone Number _____

3. The parties shall provide the arbitrator with a copy of this Order.
4. The arbitrator shall be entitled to a fee of \$750.00 and the time limit for the arbitration hearing is three (3) hours, subject to any written agreement entered into between the parties and arbitrator. Unless otherwise agreed to by the parties or ordered by the Court, Plaintiff shall pay 100% of the fee. If, at that completion of the case, Plaintiff is entitled to recover costs, the Court may tax all amounts paid to the arbitrator.

5. The first arbitration hearing shall be held within sixty (60) days of the date of this Order in Broward County, Florida.
6. The arbitrator within thirty (30) days of the date of this Order shall notify the parties of the date, time and place of the arbitration hearing. The form Notice of Arbitration Hearing is attached and all terms are incorporated by reference into this Order.
7. If there is a lack of cooperation and/or a failure to meet the time limits imposed by this Order, the arbitrator shall file a Notice of Non-Compliance and shall serve same upon counsel for each party and all self-represented litigants with a courtesy copy to the undersigned Judge and the Court Mediation and Arbitration Program.
8. The arbitrator shall complete the Arbitrator Statistical Summary Form and return it to the Court Mediation and Arbitration Program within twenty (20) days after the time for filing any motions directed to the written decision has expired.

DONE AND ORDERED in Chambers, Fort Lauderdale, Broward County, Florida, this day of _____, 20__.

County Judge

Copies furnished:

Counsel of Record

Parties of Record

Court Mediation and Arbitration Program, Room 19150, Broward County Courthouse, 201 S.E. Sixth Street, Fort Lauderdale, Florida 33301

If you are a person with a disability who needs any accommodation in order to participate in this proceeding, you are entitled, at no cost to you, to the provision of certain assistance. Please contact the ADA Coordinator, Room 20140, 201 S.E. Sixth Street, Fort Lauderdale, Florida 33301, 954-831-7721 at least 7 days before your scheduled court appearance, or immediately upon receiving this notification if the time before the scheduled appearance is less than 7 days; if you are hearing or voice impaired, call 711.