Lebanese Arbitration Center Chamber of Commerce, Industry & Agriculture of Beirut & Mount Lebanon Case no: Claimant:

**Respondent:** 

## ARBITRATOR'S DECLARATION OF ACCEPTANCE, IMPARTIALITY AND STATEMENT OF INDEPENDENCE

I, the undersigned,

Name

First Name

Hereby declare that I accept to serve as arbitrator under the CCIAB Rules of Arbitration in the instant case. In so declaring, I confirm that I have familiarized myself with the requirements of the CCIAB Rules of Arbitration and am able and available to serve as an arbitrator in accordance with all of the requirements of those Rules and accept to be remunerated in accordance therewith.

(if this box is checked, please also check <u>one</u> of the two following boxes. The choice of which box to check will be determined after you have taken into account, <u>inter alia</u>,

whether there exists any past or present relationship, direct or indirect, with any of the parties, their counsel, whether financial, professional or of another kind and whether the nature of any such relationship is such that disclosure is called for pursuant to the criteria set out below. <u>Any doubt should be</u> <u>resolved in favor of disclosure.</u>)

- □ I am independent of each of the parties and intend to remain so; to the best of my knowledge, there are no facts or circumstances, past or present that need be disclosed because they might be of such nature as to call into question my independence in the eyes of any of the parties.
- □ I am independent of each of the parties and intend to remain so; however, in consideration of Article 2, paragraph 7 of the CCIAB Rules of Arbitration, I wish to call your attention to the following facts or circumstances which I hereafter disclose because they might be of such a nature as to call into question my independence in the eyes of any of the parties. (Use separate sheet if necessary).

Hereby declare that I decline to serve as arbitrator in the subject case. (If you wish to state the reasons for checking this box, please do so).

Place : \_\_\_\_\_ Date : \_\_\_\_\_ Signature: \_\_\_\_\_