

File n°:.....

**DECLARATION OF ACCEPTANCE , AVAILABILITY AND
INDEPENDENCE BY THE MEDIATOR**

I the undersigned,

Surname:First name:

1. ACCEPTANCE

- Accept the arbitral mission in accordance with the CEPANI Mediation rules 2013.

2. AVAILABILITY

- Confirm, on the basis of the information presently available to me, that I can devote the time necessary to conduct this mediation diligently, efficiently and in accordance with the time limits in the Rules.

3. INDEPENDENCE

- declare that I am fully independent of:
- the parties
 - their legal counsel
- draw CEPANI's attention to the following facts and circumstances that could lead any of the parties to doubt my independence (use a separate sheet if necessary).

* * *

- declare that I shall abide by the "Rules of good conduct for procedures requiring the intervention of CEPANI" enclosed as Annex II to the CEPANI Mediation Rules.

Done at, on

Signature:

Tick the corresponding boxes.