

Program use only

Case # _____

Date: _____

Farmer Request For Mediation

I (We), _____, was served (received) by my lender the "Creditor Notice to Farmer of Right to Request Mediation" form on _____(date). I (We) request mediation with this lender (offering mediation) as specified in Arkansas law, Act 829 of 1989 and with the attached list of "other" creditors associated with my farm.

Signed: _____ Signed _____

Print Name: _____ Print Name: _____

Date: _____

Telephone: Day _____ Night _____

Address: _____

Farmer's Instructions:

1. Attach a **copy** of the form "Creditor Notice To Farmer of Right To Request Mediation" with this Request for Mediation.
2. Attach a list of complete farm creditor information (fill in all blanks per creditor on following pages of this form) which is part of this form. The first creditor listed should be the lender who offered you mediation.
3. Farmer is expected to inform the mediation program and the initiating lender of a choice to secure an advocate to attend and help the farmer in the mediation session. If no advocate decision is made at this time, leave the below blank. If at a later date, farmer elects to have an advocate present in the mediation session, please notify the Program and the initiating lender.

Advocate's Name: _____

Address: _____

Phone #: _____

4. Serve this Farmer Request for Mediation with attachments and completion of Farmer's Instructions 1, 2 & 3 by certified mail, fax or other method acknowledging receipt on the *Initiating Creditor* and on the *Arkansas Farmer/Creditor Mediation Program* (Program). If you fax this information, you must call to validate that the Program has received the faxed Request. The Program must be in possession of this *Farmer Request for Mediation* document within 14 days of the day you were served (received) the "Creditor Notice to Farmer of Right to Request Mediation" by your lender. Failure to serve this request for mediation on the Program within the 14 days waives your right to mandatory mediation for the debt indicated, and your creditor may begin proceedings against your agricultural property. Please phone the coordinator with any questions.

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Farmer Listing Complete Information of "Other" Farm Creditors:

NOTE: The information you are being asked to supply with this form and in connection with the mediation process is classified as private data under Arkansas law. The purpose and intended use of this data is to carry out legislated assignment under Arkansas Law, Act 829 of 1989. You may refuse to provide the information requested, but such refusal will jeopardize your rights to mandatory mediation. The persons authorized to receive this information are the Program Coordinator, the Program's assignees, the Mediator and all parties attending the mediation session.

The purpose of mediation is for the attending parties to listen, to communicate, to improve understanding, to offer settlement options and to voluntarily agree on a debt settlement plan between the debtor and creditors whether secured or unsecured.

You must list *all* of the creditors important to your farm, whether the loan is current or past due. Please fill in all of the requested information on each creditor. Failure to list complete information on all creditors can be considered a "lack of good faith" effort by the farmer. **IF ADDITIONAL SPACE IS NEEDED, PLEASE FEEL FREE TO USE SEPARATE SHEET OR MAKE COPIES.**

Types of Creditors:

- 1 Holders of a mortgage on your agricultural property;
- 2 Holders of a lien or security interest in your agricultural property;
- 3 Creditors who have a judgment against you;
- 4 Creditors who are vendors of contracts for deeds on your agricultural property and
- 5 Unsecured creditors who are necessary for your farm's operation.

Creditor Who Is Enforcing Debt Against Your Agricultural Property and All Other Farm Creditors

Organization: _____

Contact Person: _____ Phone: _____

Complete Mailing Address: _____

Amount of Outstanding Debt \$ _____ Type of Creditor (see above list) _____

Organization: _____

Contact Person: _____ Phone: _____

Complete Mailing Address: _____

Amount of Outstanding Debt \$ _____ Type of Creditor (see above list) _____

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Organization: _____

Contact Person: _____ Phone: _____

Complete Mailing Address: _____

Amount of Outstanding Debt \$ _____ Type of Creditor (see above list) _____

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Organization: _____

Contact Person: _____ Phone: _____

Complete Mailing Address: _____

Amount of Outstanding Debt \$ _____ Type of Creditor (see above list) _____
