Mediation Application (Record)		Receip	t Date:	[inse	t date/time] 1 Page		
		Receipt Number:			Case No: Year _ Tiao Zi No.		
Title	Name	Gender	Birthdate	National ID. No.	Occupat ion	Address	Contact Number
Applicant ⟨ Statutory Agent ⟩ ⟨ Appointed Agent ⟩							
Counter Party 〈 Statutory Agent 〉 〈 Appointed Agent 〉							
The above parties have ap (and the acceptable media	-	_	ct of [inse	ert subject n	natter], a	and the matter's sur	nmary
(The dispute is under investigation by the [] District Prosecutors Office with the case number: [insert case number].)							
Exhibits (Name and the number of pieces) Request for Investigating Evidences							
To [insert county(city) a	nd township (district))] Media	ation Cor	nmittee			
Dated this day of	,						
The accuracy of above r	geords having book		licant:	awad hy the	Applia	⟨ Signature or	Seal >
The accuracy of above r acknowledged by the Ap	_		o or revie order:	eweu by the	. Аррис	ant, is nereby	· Seal 〉

- Remarks: 1. Duplicates of the Mediation Application shall be provided in accordance with the number of the counter parties.
 - 2. If the applicant or the counter party is an incapacitated person or a person with limited capacity, please insert the statutory agent of such party.
 - 3. If a party has a statutory agent or an appointed agent, please insert the information in the "title" column; if a party has both, both information shall be inserted.
 - 4. The "matter's summary" shall summarize the dispute between the parties. If the matter is pending the court proceedings or the prosecutors' office investigation (no mediation shall be applied for if the deliberation proceeding is concluded at the court of first instance), please also insert the relevant case number and the latest development.
 - 5. If the applicant requests for investigating evidences, pleas insert the name of evidences or the name and address of witnesses in the "Request for Investigating Evidences" column.
 - 6. When submitting the Mediation Application, please delete the word "Records" in the title and the last column of this form.