

# Arbitration Response

Commission/Fee Dispute

## Instructions

The following form is to be completed and submitted to [incidents@itsorealestate.ca](mailto:incidents@itsorealestate.ca)

- ✓ A Response must be filed within 10 days of receiving a Claim
- ✓ Please include all supporting documentation and information being relied on to support the Response

## Respondent Information

Full Name

Login ID

Brokerage Name

REALTORS® Association(s)

Email Address

## Part B

Please indicate which allegations in the Claim are admitted to, which are denied, and which you have no knowledge of, using additional pages if necessary

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## Part C

Please provide an explanation of the facts relied on to support the Response

## Supporting Documents

Document Name:

Document Name:

Document Name:

Document Name:

# Arbitration Response

## Commission/Fee Dispute



I confirm that the information in this Response is true to the best of my knowledge and I understand that a copy of this Response will be provided to the Claimant and may be provided to an ITSO Director for mediation, the Arbitration Committee, and the REALTORS® Association(s) that I and the Claimant belong to.

I acknowledge and agree to have this claim resolved following the ITSO Arbitration Policy, which forms a binding arbitration agreement between my brokerage and the Claimant. I agree to abide by the decisions of the arbitrators.

I understand that information in this Response and the supporting documents, as well as any additional information that ITSO collects during this process, may include personal information as defined in the Personal Information and Protection of Electronic Documents Act. I consent to the collection, use and disclosure of my personal information for ITSO to process this claim and take any other action that is deemed necessary for enforcement of the ITSO Arbitration Policy.

Signature

Signature	Date