New Jersey Agricultural Mediation Program

Request for Voluntary Mediation

For disputes involving general agriculture-related issues

I (we) _____ request voluntary mediation under the New Jersey Agricultural Mediation Program (NJAMP).

Name_____

Address_____

City, State, Zip_____

Telephone Number _____

Email _____

I am: _____ a commercial farm operator

               _____ a municipal official (title:_____)

               _____ a neighbor of the farm

               _____ another party (describe: _____)

Please list the person(s) with whom you have a dispute and are requesting mediation:

Name: _____ Phone: _____

   Address: _____

Name: _____ Phone: _____

   Address: _____

Briefly describe the situation:_____

_____

_____

_____

_____

_____

_____

_____

_____

Please list any other individuals you would like to have participate in the mediation:

Name: _____ Phone: _____

  Address: _____

Name: _____ Phone: _____

  Address: _____

Name: _____ Phone: _____

  Address: _____

Please list the following farm details, if known:

  The block(s)/lot(s) of the farm _____

  Which block/lot is the mediation request is associated with? _____

  Is the mediation request associated with a preserved farm? _____

I hereby give permission to NJAMP to release this information to the mediator assigned to the case. I understand this information is being released for the purpose of mediation only and shall not be released for any other purpose without my permission. By returning this completed request form, I am consenting to participate in mediation. I accept the policies and procedures outlined for the program. I understand that for NJAMP to proceed with scheduling a mediation session, the agriculture-related issues involved in a dispute must fit within the scope of NJAMP's regulations, N.J.A.C. 2:76-18.

_____   _____
              Signature   Date

Please forward this completed request to the New Jersey Agricultural Mediation Program by mail or email:

        New Jersey Agricultural Mediation Program
        State Agriculture Development Committee
        P.O. Box 330
        Trenton, New Jersey 08625
        Email: sadc@ag.nj.gov
        Phone: (609) 984-2504

The other parties involved in this mediation will be notified within five (5) working days after NJAMP receives an initial written request. NJAMP will forward a copy of this document to the other parties as part of the request for mediation. Please keep a copy of this document for your records.