

KENTUCKY INSURANCE ARBITRATION ASSOCIATION

PO Box 436509

LOUISVILLE, KENTUCKY 40243

www.kyinsplans.org

502-327-0372

Print Form

Reset Form

KIAA Use Only: Docket #: \_\_\_\_\_ Date Received: \_\_\_\_\_

**Applicant**

**Please note:** Complete left side. Send application, contentions and documentation to KIAA. Send one copy of application, contentions and documentation to Respondent. (Filing fee: \$45 or \$100 if a Panel of Three is requested)

**Respondent**

**Please note:** Complete right side. Send one copy of application, contentions and documentation to KIAA. Send one copy of application, contentions and documentation direct to Applicant.

	<b>Reparation Obligor</b>	
	<b>NAIC Number</b>	
	<b>Representative</b>	
	<b>Address City, State, ZIP</b>	
	<b>Telephone Number</b>	
	<b>Insured</b>	
	<b>File or Claim Number</b>	

Place of Accident: \_\_\_\_\_ Date of Accident: \_\_\_\_\_

**APPLICANT’S ALLEGATIONS:**

Is this a Counterclaim? Yes: \_\_\_\_\_ No: \_\_\_\_\_  
*(If this is a counterclaim the original must be identified)*

**Damages Claimed by Reparation Obligor:** \_\_\_\_\_  
*(Do not deduct inter-company setoff. Award cannot exceed amount claimed on application.)*  
**Explain:** \_\_\_\_\_

Has settlement been attempted at least 60 days prior to this application? \_\_\_\_\_

Are you aware of pending claims or suits arising out of the same accident? \_\_\_\_\_

**Explain:** \_\_\_\_\_

Do you request deferment in accordance with Arbitration Rule 8? \_\_\_\_\_ *(Supporting documentation must be submitted with application.)*  
Do you waive deferment? \_\_\_\_\_

Will Reparation Obligor have personal representation at hearing? \_\_\_\_\_  
If not, do you waive notice of hearing? \_\_\_\_\_

**RESPONDENT’S ALLEGATIONS:**

Do you admit coverage? Yes: \_\_\_\_\_ No: \_\_\_\_\_  
*(Failure to answer the question or an affirmative answer prior to an award shall be deemed a waiver of any coverage defense.)*

Do you admit Liability? \_\_\_\_\_ If so, amount of Damages conceded, if any: \_\_\_\_\_

Do you accept Arbitration? \_\_\_\_\_

Has settlement been attempted in last 60 days? \_\_\_\_\_

Are you aware of pending claims or suits arising out of the same accident? \_\_\_\_\_

**Explain:** \_\_\_\_\_

Do you request deferment in accordance with Arbitration Rule 8? \_\_\_\_\_

Do you waive deferment? \_\_\_\_\_

Will Reparation Obligor have personal representation at hearing? \_\_\_\_\_  
If not, do you waive notice of hearing? \_\_\_\_\_

**CONTENTIONS: Applicant and Respondent—attach separate sheet and submit supporting documents**

I hereby certify that a copy of this application, Contentions and all documentation was mailed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

to (Respondent) \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
\*Signature Applicant Representative

I hereby certify that a copy of this application and all documentation was mailed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

to (Applicant) \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
\* Signature Respondent Representative

Note \* Typed signature will serve as electronic signature.