



## Independent Adjudication for Customers

### Assets for Life Application Form

What is this Application for?	What do I need to do?
<ul style="list-style-type: none"><li>• This application form is for a customer to bring a claim against a company which subscribes to CEDR either directly or by membership of a trade or membership body.</li><li>• Customers may apply if they have not been able to resolve the complaint directly with the company.</li><li>• The application form will ask you for the details needed to understand what you would like the company to do and to help an adjudicator decide your dispute.</li><li>• The outcome of this adjudication will be contractually binding on both parties if the customer chooses to accept the findings of the adjudicator.</li></ul>	<ul style="list-style-type: none"><li>○ Please read the Scheme Rules carefully before you fill in and return this form. They should be attached to this application form and can also be found on the CEDR website.</li><li>○ Fill in the application form giving as much information as you can.</li><li>○ It may take you some time to go through the application form and to get all your facts together, but having all the information will help us assess your case fairly.</li><li>○ This process is conducted entirely in writing.</li><li>○ You must ensure that you provide sufficient information and supporting evidence to substantiate your claim.</li></ul>

#### Before you can make an application you must:

- First use and exhaust the company's own internal complaints procedure.
- Come to CEDR within 12 month's of receiving the company response.
- Ensure you have understood the adjudication process fully.

Please let us know if you have any practical needs where we could help – for example with information in another format (e.g. larger print, another language, etc.). If you require assistance in completing this form please contact CEDR:

By telephone: 0207 520 3800

By email: [applications@cedr.com](mailto:applications@cedr.com)

Visit the website: [www.cedr.com/consumer](http://www.cedr.com/consumer)

CEDR opening hours: 9:00am to 5:00pm, Monday to Friday

**IMPORTANT: SAVE A COPY OF THIS PDF ON YOUR PC BEFORE COMPLETING AND UPLOADING THIS FORM. IF YOU COMPLETE THIS FORM IN YOUR BROWSER YOU WILL NOT BE ABLE TO SAVE IT AND IT WILL APPEAR BLANK WHEN UPLOADED.**

### 1. About you (the Customer)

Please give us your details.

Full name:	<input type="text"/>		
Street Address:	<input type="text"/>		
Town:	<input type="text"/>	County:	<input type="text"/>
Postcode:	<input type="text"/>	Tel:	<input type="text"/>
E-mail address:	<input type="text"/>		
Membership number:	<input type="text"/>		

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### 2. Representation

If you have a representative acting for you, please give details below.  
If you do not have a representative, go to part 3.

Full name:	<input type="text"/>		
Organisation:	<input type="text"/>		
Street Address:	<input type="text"/>		
Town:	<input type="text"/>	County:	<input type="text"/>
Postcode:	<input type="text"/>	Tel:	<input type="text"/>
E-mail address:	<input type="text"/>		

(If you give the address of a representative, this is the address we will write to about this application.)

### To be signed by the customer

I hereby give my authority for the above named person to represent me:

Signature: \_\_\_\_\_

Print name: \_\_\_\_\_

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

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### 3. Company details

Company:	<input type="text"/>		
Street Address:	<input type="text"/>		
Town:	<input type="text"/>	County:	<input type="text"/>
Postcode:	<input type="text"/>	Tel:	<input type="text"/>
E-mail address:	<input type="text"/>		

#### 4. Issues in dispute

In the space below, please tell us what service or event you complained to the Company about.

Date the service was provided:

Date you first complained to the Company:

### 5. What actions would you like the Company to take?

(Tick all the boxes that apply)

Give you an apology

Give you an explanation

Take some practical action

Please specify:

### 6. What Redress are you claiming and why?

If you are asking the adjudicator to order the company to carry out some work or to order compensation then you must specify the details and likely cost in this application and provide evidence to justify the redress claimed. Please ensure you record everything in this application as you cannot change these details at a later date.

Please break down your claim by providing a value for each item you are claiming for and provide the reason why you are claiming that amount.

Item	Claim Reason	Amount Claimed (£)

Please continue on a separate sheet if required but ensure the total amount you are claiming is completed in the next box below.

**Total Claimed:**

## 7. Declaration

**Data Protection Act**

The Data Protection Act allows subscribing Companies, trade and membership bodies to provide information and/or documents about you to CEDR and CEDR adjudicators with your consent. By completing this form you are giving your consent.

Please read the statements below and tick **all the boxes** before signing this form.

- I apply to CEDR to appoint an adjudicator to settle this dispute in accordance with the Scheme Rules.
- I have the authority to commit to adjudication.
- I have tried to resolve this matter through the Company's complaints procedure.
- I understand that it is my responsibility to provide evidence and documents supporting my claim.
- I understand it is my responsibility to read the Scheme Rules and, if necessary, seek guidance from CEDR.
- I have not previously referred this dispute to the Courts or other forum.
- I understand the claim cannot exceed the limit detailed in the Scheme Rules.
- I understand that the adjudicator's decision will be contractually binding on both parties if I accept it.

Signature: \_\_\_\_\_

Print name: \_\_\_\_\_

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

## Submitting your application

Now please submit your application and supporting evidence to us via post or email.

Email: [applications@cedr.com](mailto:applications@cedr.com)

Post: 100 St Paul's Churchyard, London, EC4M 8BU

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