

SCHEDULE OF FEES AND COSTS
October 2020

Copies of this form will be provided to the parties in the OIA system. You may attach additional information as necessary.

ARBITRATOR'S NAME _____

1. FEES FOR YOUR SERVICES

a. Hourly fees: _____ per hour

b. Daily fees: _____ per day

2. TRAVEL COSTS

a. I am willing to travel to the following counties **FOR FREE - - that is, without charging for travel time or travel expenses.** Check all that apply:

Northern California: Alameda County___ Contra Costa County___ Marin County___
San Francisco County___ San Mateo County___ Sonoma County___ Napa County___
Solano County___ Sacramento County___ Yolo County___ San Joaquin County___
Santa Clara County___ Stanislaus County___ Placer County___ Fresno County___

Southern California: Kern County___ Ventura County___ Los Angeles County___
Orange County___ San Bernardino County___ Riverside County___

San Diego: San Diego County ___ Imperial County ___

b. **For the counties I have NOT checked above, I charge the following for travel time and expenses (hotel, mileage, meals, etc.):**

3. POSTPONEMENT AND CANCELLATION COSTS

a. Do you charge for any postponed or canceled proceedings (conference, telephone call, meeting, hearing, etc.) during the course of an arbitration? Yes ___ No ___
If yes, what are the terms and charges?

b. Do you charge a cancellation fee if a case settles, or is withdrawn before the hearing date? Yes ___ No ___ If yes, describe the terms and charges.

c. Describe any requirements you have regarding the timing of payments (such as advance deposits, forfeiture provisions, etc.)

4. Can you provide space for any or all of the arbitration proceedings? Yes ___ No ___
If yes, set forth the location of the space and any applicable charges.

5. Set forth any other fees, terms or conditions you require in the event that you are selected to serve as a neutral arbitrator for an arbitration administered by the OIA. Attach a copy of any forms, stipulations or other agreements that you require the parties to sign in order for you to serve as a neutral arbitrator in any such matter.

6. I understand that the fee schedule sent to the parties by the OIA will remain in effect for the entire time that their case is before me. I also understand that I am required to travel within the geographical region(s) in which I serve. I affirm that this fee schedule and all attachments are true and correct.

Signature

Date