LRA Form 7.13 Section 136 Labour Relations Act, 1995	REQUEST FOR ARBITRATION
Read This First	DETAILS OF PARTY REQUESTING ARBITRATION
WHAT IS THE PURPOSE OF THIS FORM? If conciliation fails, a party may request that the CCMA resolve the dispute by arbitration.	Tel: Fax: Cell:Email:
WHO FILLS IN THIS FORM? The party requesting the arbitration WHERE DOES THIS	Case Reference Number:andand
FORM GO? To the Registrar at the Provincial Office of the CCMA. (Please refer to the last page for details).	The certificate confirming the failure of conciliation is attached In terms of Section
This should be the same office, which conducted the conciliation. If an accredited council or agency is to arbitrate the dispute, this form must be sent to their office. If in doubt, contact the CCMA for help.	the matter be resolved through arbitration. The issues in dispute are
Referrals in terms of Section 37(2) of the UIF Act must be made in the province where the appeals committee made the decision re: benefits.	Give a brief description. The commissioner may require a more detailed statement of case later)
	CCMA Ref. Number Please turn over

### **OTHER INSTRUCTIONS**

A copy of this form must be served on the other party.

Proof that a copy of this form has been served on the other party must be supplied by attaching:

- A copy of a registered slip from the Post Office;
- A copy of a signed receipt if hand delivered;
- A signed statement confirming service by the person delivering the form;
- A copy of a fax confirmation slip; or
- Any other satisfactory proof of service.

The certificate confirming that the dispute was unresolved through conciliation must also be attached to this form.

If a party does not want the commissioner who conducted the conciliation proceedings to arbitrate this dispute, that party must fill in LRA form 7.14.

If both parties agree on a particular commissioner to arbitrate then they must inform the CCMA within 48 hours of the dispute being certified as unresolved.

If a party wants a senior commissioner to arbitrate they must fill in LRA Form 7.15.

#### Check!

Have you sent a copy of this completed form to the other party? Have you included proof (that you have sent a copy to the other party) with this form? Have you attached the certificate confirming that the dispute was unresolved through conciliation?

# 3. WHAT DECISION WOULD YOU LIKE THE COMMISSIONER TO

The commissioner may require a more detailed statement of case later.

## 4. CONFIRMATION OF ABOVE DETAILS:

Form submitted by(name):
Signature:
Designation:
Date:
Place:

This form must be signed by the referring party or a person entitled to represent the party in the arbitration proceedings

## 5. DETAILS OF OTHER PARTY

Name :	
Designation:	
Postal Address:	
Tel:	Fax:
Cell:	Email:

Please turn over

#### ARBITRATION REQUESTS

## SECTION LIST/NATURE OF DISPUTE

LRA Section	Dispute
16(9)	Disclosure of information
21(7)	Acquisition of organisational rights
21(11)	Withdrawal of organisational rights
22(4)	Interpretation or application of any provision of Part A of Chapter 3 other than a dispute in terms of Section 21
24(5)	Interpretation or application of collective agreement in respect of statutory council
24(6)	Interpretation or application of agency or closed shop agreement
45(4)	Interpretation or application of ministerial determination in respector of a statutory council
61(13)	Interpretation or application of lapsed Bargaining Council collective agreement
74(4)	Essential services
86(7)	Joint decision-making (workplace forum)
89(6)	Disclosure of information (workplace forum)
94(4)	Dispute about application or interpretation – Chapter 5 (workplace forum)
133(2)(b) / 141(1)	Consent to arbitration where Labour Court has jurisdiction
191(5)(a)	Unfair dismissal
191(5)(a)	Unfair labour practices
191(12)	Unfair dismissal for operational requirements
BASIC CONDITIONS OF EMPLOYMENT ACT SECTION 41	Severance pay
SKILLS DEVELOPMENT ACT SECTION 19(5)	Interpretation and application of learner agreement / learner contract of employment / S 18(3) determination.

## **PROVINCIAL OFFICES OF THE CCMA**

#### CCMA EASTERN CAPE – East London

6 Oxford Street **EAST LONDON** Private Bag X9068, EAST LONDON, 5200 **Tel**: (043) 743-0826 **Fax**: (043) 743-0810 **Email**: PE@ccma.org.za

#### CCMA EASTERN CAPE – Port Elizabeth

CCMA House, 107 Govan Mbeki Avenue PORT ELIZABETH Private Bag X22500, PORT ELIZABETH, 6000 Tel: (041) 505-4300 Fax: (041) 586-4585 Email: PE@ccma.org.za

#### CCMA FREE STATE CCMA House, Cnr Elizabeth & Westburger Streets BLOEMFONTEIN Private Bag X20705, BLOEMFONTEIN, 9300 Tel: (051) 505-4400 Fax: (051) 448-4468/9 Email: BLM@ccma.org.za

CCMA GAUTENG – Johannesburg Regional Office 127 Fox Street JOHANNESBURG Private Bag X94, MARSHALLTOWN, 2107 Tel: (011) 220 5000 Fax: (011) 220-5101/02/03/04/05/ 0861 392 262 Email: Johannesburg@ccma.org.za

#### CCMA GAUTENG – Tshwane (Pretoria)

Metro Park Building, 351 Schoeman Street **PRETORIA** Private Bag X176, PRETORIA, 0001 **Tel**: (012) 392-9700 **Fax**: (012) 392-9701/2 **Email**: Pretoria@ccma.org.za

#### CCMA KWAZULU-NATAL – Durban

Embassy Building, 199 Smith Street DURBAN Private Bag X54363, DURBAN, 4000 Tel: (031) 362-2300 Fax: (031) 368-7387 / 7407 Email: KZN@ccma.org.za

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Fax: (033) 345-9790 Email: KZN@ccma.org.za

#### CCMA KWAZULU-NATAL – Richards Bay

First Floor, Promenade Building, Cnr Tassel Berry & Lira Link Streets **RICHARDS BAY** Private Bag X1026, RICHARDS BAY, 3900 **Tel**: (035) 789-0357 **Fax**: (035) 789-7148 **Email**: KZN@ccma.org.za

#### **CCMA LIMPOPO**

CCMA House, 104 Hans van Rensburg Street **POLOKWANE** Private Bag X9512, POLOKWANE, 0700 **Tel**: (015) 297-5010 **Fax**: (015) 297-1649 **Email**: PTB@ccma.org.za

#### **CCMA MPUMALANGA**

CCMA House, Diedericks Street WITBANK Private Bag X7290, WITBANK, 1035 Tel: (013) 656-2800 Fax: (013) 656-2885/6 Email: WTB@ccma.org.za

#### CCMA NORTHERN CAPE

CCMA House, 5-13 Compound Street **KIMBERLEY** Private Bag X6100, KIMBERLEY, 8300 **Tel**: (053) 831-6780 **Fax**: (053) 831-5948 **Email**: KMB@ccma.org.za

#### CCMA NORTH WEST

CCMA House, 47 Siddle Street **KLERKSDORP** Private Bag X5004, KLERKSDORP, 2570 **Tel**: (018) 464-0700 **Fax**: (018) 462-4126 **Email**: <u>KDP@ccma.org.za</u>

## CCMA NORTH WEST - Rustenburg

Shop SG7 11B, 43-45 Boom Street **RUSTENBURG** Private Bag X82104, RUSTENBURG, 0300 **Tel**: To be confirmed **Fax**: (014) 538-1267 **Email**: To be confirmed

#### CCMA WESTERN CAPE

CCMA House, 78 Darling Street CAPE TOWN Private Bag X9167, CAPE TOWN, 8000 Tel: (021) 469-0111 Fax: (021) 465-7193/7 Email: CTN@ccma.org.za