



Rural Services of Indiana, Inc.

60918 US 31 South, South Bend, Indiana 46614 phone: 1-800-288-6581 fax: 574-299-9666

MEDIATION PROJECT OF RURAL SERVICES OF INDIANA, INC.

APPLICATION FOR VOLUNTARY MEDIATION

PARTY REQUESTING MEDIATION:

I, _____, hereby request mediation services from the Mediation Project of Rural Services of Indiana, Inc. My complete mailing address is:

NAME: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

Daytime phone number: _____

Evening phone number: _____

I am requesting mediation as a result of a notice letter from the United States Department of Agriculture. **A COPY OF THE DENIAL LETTER MUST BE ATTACHED TO THIS APPLICATION.**

PLEASE COMPLETE THIS FORM AND RETURN TO:

RURAL SERVICES OF INDIANA, INC.
60918 US 31
SOUTH BEND, IN 46614

DATE APPLICATION MAILED: _____

FOR INTERNAL USE:

Date Received: _____ Mediator Assigned: _____ Case No. _____

- _____ Farm Service Agency
- _____ Natural Resource Conservation Service
- _____ Risk Management Agency
- _____ Rural Business Cooperative
- _____ Rural Development
- _____ Rural Utilities Service
- _____ Forest Service
- _____ Other USDA Agency