



South Dakota Farm Loan Mediation REQUEST FOR MEDIATION

For Office Use Only	
Case Number:	_____
Check Number:	_____
Date Received:	_____

SEND THIS FORM AND A \$100.00 FILING FEE TO:

SD DEPARTMENT OF AGRICULTURE
DIRECTOR - AG MEDIATION SERVICES
523 E CAPITOL AVE, FOSS BLDG
PIERRE, SD 57501-3182

Mandatory Mediation Voluntary Mediation
*creditor filing with debt over \$50,000

Date: _____

*** Requesting Party:** _____ Spouse (if applicable): _____

Contact: _____ Email: _____ Primary Phone: _____

Address: _____ City/State/Zip: _____ Secondary Phone: _____

The requesting party is the: Creditor Debtor

***Non-Requesting Party:** _____ Spouse (if applicable): _____

Contact: _____ Email: _____ Primary Phone: _____

Address: _____ City/State/Zip: _____ Secondary Phone: _____

If additional room is needed for listing debtors or creditors , please provide names and complete addresses on the next page.

County: _____ Describe the assets of the disputed credit (legal description of land or chattel property): _____

Is the debtor(s) in this matter currently in bankruptcy? Yes No I don't know

Explain the nature of the conflict: _____

*** If the property is under control of a third party whom you are not requesting mediation, please supply the following:**

Name: _____ Primary Phone: _____

Address: _____ City/State/Zip: _____ Secondary Phone: _____

How is 3rd Party Affected: _____

By checking this box, if a mediation case is opened, I request financial counseling services.

By checking this box I, the creditor, hereby affirm the debt meets the requirements as defined in SDCL 54-13-10.

Signature of Requesting Party: _____ Print Name and Title: _____