

**Labor Department of Taipei City Government**  
**Application Form of Mediation of Labor-Management Disputes**

Application Date :    /    /    /    (YYYY/MM/DD)						
Clients	Name / Company name	sex	age	Occupation	Address (Registered mail for mediation information)	Phone number
Labor party(1)						
Labor party(2)	(Provide name list if more than three)					
Agent of Labor						
Management party (Company name)						
Employer						
Description of Mediation	<p>According to Article 2 of the Regulations for the Mediation of Labor-Management Disputes, and Article 11 of Act for Settlement of Labor-Management Disputes, the notice is as follows :</p> <ol style="list-style-type: none"> <li>1. The way of mediation : choose either the way of using a Mediator assigned by the local competent authority or organizing a mediation committee to mediate.</li> <li>2. In case of choosing the way by using a mediator assigned by the local competent authority, the authority may commission a civil organization to designate a mediator to mediate.</li> <li>3. Choosing the way of using a Mediator assigned by the local competent authority, the applicant can choose the location of mediate as follows, but the competent authority reserves the right of adjustment by situations.</li> <li>4. We provide the name lists of mediators or commissioned civil organizations for applicant to review at the Information Desk at Labor Department of Taipei City Government, or on the official website.</li> <li>5. The applicant may request the mediator to state his/her identity and qualification during the mediation.</li> </ol>					
Method (Choose one from the two choices.)	<p><input type="checkbox"/> <b>Mediator</b>, assigned by the civil organizations.(choose one)</p> <p style="padding-left: 20px;">※The requests for wage, overtime pay, severance pay, preliminary announced pay and holidays are recommend to choose the civil organization because it will be <b>faster</b>.</p> <p><input type="checkbox"/> <b><u>Association of Industrial Relations</u></b>          (11F-1, No. 7, Sec. 1, Dunhua S Rd. About 5 mins walk from the exit 8 of MRT Zhongxiao Dunhua Station or exit 2 of Taipei Arena Station. Tel:02-2578-2881)</p> <p><input type="checkbox"/> <b><u>New Taipei City Labor &amp; Capital Rights Promotion Society</u></b>          (No.14 , Lane 158, Sec1, Jhongshan Rd. , Banqiao Dist.,New Taipei City. About 5~8 mins walk from New Taipei City Hall (South Gate Exit); About 8~10 mins from MRT /Bus Banqiao Station. Tel:02-2955-4896)</p> <p><input type="checkbox"/> <b>Mediator</b>, assigned by Labor Department of Taipei City Government(6F, No. 101, Bangka Blvd, Wanhua District, Taipei City, 108. 10 minutes walking distance from MRT Longshan Temple Station exit 2,3 or Wanhua Train Station)</p>					<p><input type="checkbox"/> <b>Mediation Committee</b>          (Choice is suggested if the dispute is between labor union and employer or under the circumstances that the dispute demands the Compensation for Occupational injury.)</p> <p>※6F, No. 101, Bangka Blvd, Wanhua District, Taipei City, 108. 10 minutes walking distance from MRT Longshan Temple Station exit 2,3 or Wanhua Train Station.</p>
<p>※Applicant should confirm that the competent authority have stated items above and choose the method according to Article 11 of the Act for Settlement of Labor-Management Disputes.</p> <p>★<b>Applicant Signature :</b></p>						

Date of Dispute :     /     /     /     (YYYY/MM/DD)

**In order to help the other party understand the opinions and requests of the parties before the meeting, and carry relevant information on the day of the meeting to ensure the efficiency of the mediation meeting, the following information will be known to the other party.**

Working Location : (Mandatory)     City (County)     District     Rd. (St.)

Summary of Dispute (Facts and details of Events) : (avoid emotional words)

1、Date of Employment :     /     /     (In the case of a terminated contract, last day of work:     /     /     ) Currently employed

2、Agreed Payment     NTD/month (Hourly basis:     NTD/hour; Piecework basis:     NTD/piece)

3、Position at work:

4、Brief description of the dispute : (If there is no more space, please attach another A4.)

Attached Evidence : No Yes:

Requests : (Multiple selections can be chosen, and then estimate the amount if possible.)

Reinstatement In-Service verification Employment certificate of involuntary separation

Wage     Amount :

Overtime pay     Amount :

Preliminary Announced Pay     Amount :

Severance Pay     Amount :

Holidays (national holiday、Annual leave)     Amount :

Compensation for Occupational Injury     Amount :

If the dispute is related to hazard pay, do you agree to let Taipei City Foreign and Disabled Labor Office provide occupational hazard service? agree disagree \_\_\_\_\_ Signature

Retirement Payment     Amount :

Labor Insurance(under-reporting or unprotected)     Amount :

Contribution pension(6%)     Amount :

Other Requests :

Notes :

1. According to Article 10 of the Act for Settlement of Labor-Management Disputes, requests should be filled in clearly by the applicant.
2. The applicant should sign after confirming the method for mediation.
3. All attachments should be stapled together.
4. In the need of litigation, you can apply for legal help at local legal aid foundations.  
(Tel for domestic: 02-412-8518; Taipei Branch: 02-2322-5151)
5. Taipei City Government Labor Standard Division     Contact : 02-2720-8889 ext.:7015-7016  
Fax : 02-2759-6661, Address : 5F, No.1, City Hall Rd., Taipei