IC Form MSC5 (rev. 03/2022) **NORTH CAROLINA INDUSTRIAL COMMISSION**

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I.C. File No. _____
Carrier No. _____
_____County

NCIC-Mediation Section
mediation@ic.nc.gov
1236 Mail Service Center
Raleigh, NC 27699-1236

_____, Plaintiff

v.

REPORT OF MEDIATOR

_____, Defendant
_____, Carrier

Mediator_____telephone _____fax _____

Email Address_____

The undersigned mediator reports the following results of a mediated settlement conference in this case:

Conference ☐ **was held** and **completed** on:_____.
☐ **was held** but **not completed** because_____.
☐ **was not held because**: _____.
Anticipated Date of Completion:_____ Number of sessions held: _____

Names of parties, attorneys, insurance representatives or others who were absent: _____

_____

The parties reached: ☐ agreement on all issues. ☐ an impasse. ☐ agreement on the following issues:

_____

If this case was not settled in mediation, and there is a pending request for hearing, the parties estimate that the length of the hearing in this case will be _____.

Issues settled to be disposed of by: ☐ clincher ☐ other agmt. ☐ voluntary dismissal ☐ removal from hearing docket

The person who will submit the agreement/clincher /dismissal to the Commission is _____

_____, who will submit it by _____ (date).

Mediator's Fee

ADMINISTRATIVE FEE: $_____
($150.00 for appointed mediator)

MEDIATION FEE: $_____
Total time spent in Mediated Settlement Conference: _____.___ hours
($150.00 per hour for appointed mediator, billed in quarter hour segments.)

OTHER FEE (Postponement fee, etc...., if any) $_____

TOTAL FEE $_____
All fees to the mediator have been paid except as follows:
Party owing fee Amount owed Email address of party

_____

I have returned this report to the Commission within seven days of the conclusion of the mediated settlement conference.

This the ___ day of _____, _____. _____
Mediator

This report is to be returned to the Commission in all cases, whatever the mediation results.