

## **STATE OF NEW JERSEY** PUBLIC EMPLOYMENT RELATIONS COMMISSION PO Box 429

TRENTON, NEW JERSEY 08625-0429

## REQUEST FOR APPOINTMENT FROM THE SPECIAL DISCIPLINARY ARBITRATION PANEL

For Courier Delivery: 495 West State St. Trenton, NJ 08618

Phone: 609.292.9898 Fax: 609.777.0089

Email: Mail@perc.state.nj.us

www.state.nj.us/perc

INSTRUCTIONS: This form is to 40A:14-22, -150, -209, and -210 space is required for any item, accordingly. Additional instructions	DO NOT WRITE IN THIS SPACE  DOCKET NO.						
File an original and 4 copies of filing by e-mail or fax, multiple	Arbitration. If	DATE FILED	):				
1. PUBLIC EMPLOYEE	Check one:	] Law E	nforcement Office	r		Firefighter	
Full Name:							
Name, Title and Address of Public Employee:			Name and Address of Attorney or Authorized Representative of the Public Employee (if any):				
Phone: Fax:			Phone:		Fax:	Fax:	
E-Mail:			E-Mail:				
2. PUBLIC EMPLOYER							
Full Name:					County:		
Name, Title and Address of Employer Representativ	e to Contact:		Name and Address of Attorne	y/Consultant Represe	nting Public Er	mployer (if any):	
Phone:	Fax:		Phone:		Fax:		
E-Mail:			E-Mail:				
3. DATES: Provide dates employee was suspended without pay and served with a notice of termination:							
4. CERTIFICATION: I declare that I have read the above request and that the information is true to the best of my knowledge and belief.  By:							
Signature of Employee							
Date:							
By:							
(Signature of Authorized Representative) (Title)							
Date:							

## INSTRUCTIONS FOR FILING A REQUEST FOR APPOINTMENT FROM THE SPECIAL DISCIPLINARY ARBITRATION PANEL

- 1. This form is used to request the appointment of an arbitrator from the Commission's Special Disciplinary Arbitration Panel in cases involving the termination of non-Civil Service law enforcement officers and firefighters where the basis for termination does not involve an alleged violation of criminal law.
- 2. This appeal to binding arbitration is an alternative to review through the Superior Court pursuant to N.J.S.A. 40A:14-22 or N.J.S.A. 40A:14-150, and N.J.S.A. 40A:14-150, -209, and -210.
- 3. This form must be filed within 20 days after the employee has been personally served with a notice of termination. N.J.A.C. 19:12-6.3(b)
- 4. Please type or print all requested information.
- 5. The employee or the authorized representative should sign the form and submit an original and four copies to:

For Regular Mail: Director of Arbitration and Conciliation

**Public Employment Relations Commission** 

PO Box 429

Trenton, New Jersey 08625-0429

For Courier Delivery: Director of Arbitration and Conciliation

**Public Employment Relations Commission** 

**495 West State Street** 

Trenton, New Jersey 08618

This form may also be filed by e-mail attachment to <a href="mail@perc.state.nj.us">mail@perc.state.nj.us</a> so long as the signature page is scanned and submitted as part of the filing, or by fax to 609.777.0089. When filing by e-mail or fax, multiple copies need not be filed. N.J.A.C.19:10-2.1, -2.3.

- 6. Upon receipt of this request, the Director shall forthwith submit a copy to the employing agency or department or its authorized representative and simultaneously submit to each party the names of the members of the Special Disciplinary Panel. N.J.A.C. 19:12-6.5.
- 7. The parties shall have ten days from their receipt of the list to notify the Director in writing of the name of an arbitrator that they have mutually selected to hear the appeal. If the parties do not notify the Director within ten days of a mutual request, the Director shall select the arbitrator for assignment by lot. N.J.A.C. 19:12-6.5