



**State of New Jersey**  
**LITIGANT QUESTIONNAIRE**  
**Lemon Law Mediation**

For office use only
Date Received:
Date Entered-AOC:
Docket No.:

DIRECTIONS: This form is to be completed by the litigant at the conclusion of mediation.

Did you participate in mediation as or on behalf of the plaintiff or defendant?  
 Plaintiff  Defendant

Did you have full authority to enter into a settlement in the mediation of the case?  
 Yes  No

The mediator for this case was selected by:  
 Parties / Attorneys  Court / Judge

Do you think the mediator in this case:  
Gave you full opportunity to convey your clients interests?  Yes  No  
Was knowledgeable about the law relative to the case?  Yes  No  
Understood the issues in this case?  Yes  No  
Was impartial?  Yes  No

Did you feel pressured to reach an agreement in mediation?  
 No  Yes, by the mediator  
 Yes, by the other side  Yes by time or money constraints

What impact did mediation have on this case?  
 settled the case  moved the case significantly toward settlement  clarified positions  
 settled some of the issues  added unnecessary steps  increased tension  
 other

Do you think the mediation in this case saved money?  
 Yes  No

Do you think mediation in this case saved time?  
 Yes  No

Would you recommend mediation to a friend?  
 Yes  No

Please use this space to add any other comments about your experience in mediation.

PLEASE RETURN TO:

Civil Practice Division  
Box 981  
Trenton, NJ 08625  
FAX: (609) 777-0844