

CLIENT'S REPLY TO ATTORNEY'S REQUEST FOR RESOLUTION OF A FEE DISPUTE

Mail this form and filing fee to:

Beverly Hills Bar Association
Mandatory Fee Arbitration Program
300 South Beverly Drive, Suite 201
Beverly Hills, CA 90212-4805
310-601-2442

Your attorney has filed for arbitration and/or mediation of the fee dispute that exists between you. A copy of the Attorney's Request For Resolution of Fee Dispute is enclosed.

Please print or type:

1. Client Replying:

Name

Box or Street Address

City State Zip Code

Area Code Daytime Telephone

2. If you are, or will be, represented by an attorney in the arbitration, provide the name, address and telephone number:

Name

Box or Street Address

City State Zip Code

Area Code Daytime Telephone

3. What type of case was the attorney handling for you? (divorce, criminal, etc.)

4. Do you have a written fee agreement? (If yes, ATTACH A COPY.) Yes___ No___

a. If yes, do you have an arbitration clause in the agreement Yes___ No___

5. Has the attorney filed suit in court to collect fees? (If Yes, ATTACH A COPY OF THE COMPLAINT.) Yes___ No___

a. If the attorney has filed a suit, when were you served with the suit?

b. If you have been sued, have you answered the suit? (ATTACH ANSWER) Yes___ No___

6. Have you received a "NOTICE OF CLIENT'S RIGHT TO ARBITRATION" informing you about the arbitration and the 30-day limit? Yes___ No___

b. If yes, you must attach a copy. Please indicate when you received it:

7. Unless both you and the attorney agree to BINDING ARBITRATION, this arbitration is non-binding. This means that if you or the attorney are not happy with the award, either of you has the right to ask for a new trial in civil court within 30 days from the date the award is mailed to you. If neither of you ask for a new trial in 30 days, the award automatically becomes final and binding.

If you and the attorney BOTH agree in writing to make the arbitration BINDING, a new trial may not be requested and the award will immediately become final and binding on both of you. Do you agree to binding arbitration? Yes___ No___

8. Amount you already paid the attorney \$ _____
9. Additional amount, if any, the attorney says you still owe \$ _____
10. Add lines 8 and 9 \$ _____
11. Total amount you think the attorney should be paid \$ _____
12. Subtract line 10 from line 11. **This is the disputed amount.** \$ _____

13. Please attach a written explanation of why you think the attorney's fee is too high.

14. VOLUNTARY MEDIATION

Are you interested in submitting your dispute to fee **mediation**? If you both agree, the filing fee also entitles you to up to four hours of mediation time. If the matter *does not resolve* through mediation, it will then *proceed to arbitration*. Please refer to the Mediation Rules of Procedure.

I **WOULD** like to Mediate this dispute I **DO NOT** want to Mediate this dispute

15. If the amount in dispute is \$10,000 or less, it is heard by one (1) arbitrator. If the amount is over \$10,000, it is heard by three (3) arbitrators. If both you and the attorney agree, you can have the dispute heard by one (1) arbitrator even if the dispute is for more than \$10,000.

- My dispute is for \$10,000 or less
- My dispute is for more than \$10,000 and I **agree** to one arbitrator
- My dispute is for more than \$10,000 and I **do not agree** to one arbitrator

16. If the attorney represented you in a civil matter you are entitled to choose an arbitrator who practices civil law; if your attorney represented you in a criminal matter you are entitled to choose an arbitrator who practices criminal law. Please check one.

- I do not have a preference
- I want an arbitrator who practices civil law
- I want an arbitrator who practices criminal law

****Important**** Please submit one original and three copies of this form including supporting documents if the dispute is **over \$10,000.00**. Or one original and two copies of this form and supporting documents if the dispute is **under \$10,000.00**. Each reply form should have any and all additional information attached. *DO NOT send originals of attachments.*

I declare under penalty of perjury under the laws of the State of California that my statements on this request and any attachments are true and correct.

Date

Petitioner's Signature