

Client's Request for Arbitration of a Fee Dispute

State Bar fee arbitration is governed by the rules of procedure that were sent to you with this form. If you do not have a copy, contact this office **IMMEDIATELY**. You should read the rules carefully and contact this office if you have questions.

Mail this form and filing fee to:

The State Bar of California
Mandatory Fee Arbitration Program 180 Howard Street
San Francisco, CA 94105-1639
Telephone (415) 538-2020

Please print or type.

1. (a) CLIENT:

Name

Box or Street Address

City State Zip Code

(_____) _____
Area Code Daytime Telephone

(b) NAME OF INDIVIDUAL ATTORNEY

With whom there is a dispute):

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

City State Zip Code

Box or Street Address

(_____) _____
Area Code Telephone Number

3. The hearing in this matter will take place in the county where most of the legal services were provided. In what county were the services provided?

County
_____/_____/_____
Month Day Year

4. (a) When did you hire or first talk with the attorney?

(b) When did the attorney stop representing you?

_____/_____/_____
Month Day Year

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

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

Yes No

7. (a) Did the attorney give you a written notice of your right to arbitration? (Attach

Yes No

(b) If yes, what date did you receive the written notice?

_____/_____/_____
Month Day Year

8. (a) Has the attorney filed a lawsuit against you to collect the fees or costs? (If yes, ATTACH A COPY OF THE COMPLAINT.)

Yes No

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

Yes No

9. Have you filed a lawsuit against the attorney? (ATTACH COMPLAINT.)

Yes No

10. Were the fees ordered by the court or set by law? () Yes () No
(If yes, explain on a separate sheet and ATTACH COURT ORDER.)

11. What are your reasons for using the State Bar to arbitrate this dispute instead of a local bar program?

- There is not a local bar program available.
- I do not believe that I will receive a fair hearing through the local bar program.
- The local bar does not waive filing fees.
- I do not agree to binding arbitration.
- The local bar will not arbitrate with incarcerated clients.
- Other: _____

12. Amount you already paid the attorney \$ _____

13. Additional amount, if any, the attorney says you still owe \$ _____

14. Add lines 12 and 13 \$ _____

15. Total amount you think the attorney should be paid \$ _____

16. Subtract line 15 from line 14. **This is the disputed amount.** \$ _____

17. Filing Fee: \$ _____

(5% of the disputed amount shown on line 16 with a \$ minimum fee of \$50.00 and a maximum fee of \$3,500.)

Make your check or money order payable to the State Bar of California. Do not send cash.

18. Please describe why you think the attorney's fee is too high. Attach additional sheets if necessary.

19. If the fee dispute is for \$10,000 or less, it is heard by one (1) arbitrator. If it is for more than \$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.

20. Unless both you and the attorney agree in writing 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 a *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

21. If the attorney represented you in a civil matter you are entitled to chose an arbitrator who practices civil law; if your attorney represented you in a criminal matter you are entitled to chose an arbitrator who practices criminal law. Please indicate your choice below.

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

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.

Signature _____
Date

State Bar Use Only:

Filing Fee Received: _____ / _____ / _____
Date Amount Check No. Paid by

