

ATTORNEY'S REQUEST TO ARBITRATE A FEE DISPUTE

INSTRUCTIONS:

A. Return the original and three copies of this form with the correct filing fee to:

DESERT BAR ASSOCIATION
Fee Resolution Committee
Post Office Box 2540
Indio CA 92202

B. Keep a copy for your files.

C. Enclose the appropriate filing fee (See No. 8 below).

1. Attorney's Name:

Address: _____ **Phone:**

Client's Name:

Address: _____ **Phone:**

2. What kind of case is involved? (e.g., divorce, adoption, bankruptcy, etc.)

3. (a) Has the client filed a suit to resolve the disputed fee; or seeking affirmative relief for damages or otherwise, based upon alleged malpractice or professional misconduct?

Yes _____ No

(b) If so, have you filed an answer to the suit? Yes _____ No

4. Have you filed a civil lawsuit against the client? Yes _____ No

IF YOU HAVE ANSWERED "YES" TO QUESTIONS 3(a) 3(b) and/or 4 please call the Desert Bar Association (760) 360-1734.

- 5. What is the total amount of fee charged? \$
 - 6. Amount client paid (or will pay without protest): \$ _____
 - 7. Subtract Line 6 from Line 5 and enter the difference: \$
 - 8. Filing fee: 1% of Line 7 but not less than \$125.00, and no more than \$750.00.
- FILING FEE: \$

(Attach a check payable to DESERT BAR ASSOCIATION, to the copy of this request mailed to the *Fee Resolution Committee*.) NOTE: If the client does not respond to your request, or declines arbitration, your fee will not be refunded.

- 9. How much of the fee has the client already paid? \$
- 10. Do you have a written fee agreement? Yes _____ No

If so, please attach a copy of the written agreement. If not, please describe the oral agreement on a separate sheet.

- 11. Did you make billing arrangements with the client? Yes _____ No

If so, please describe:

- 12. What is the nature of the fee dispute?

(Attach additional sheets if necessary.)

- 13. If you and the client both agree to make the arbitration “binding”, no further proceedings will be possible after the Arbitration Award is made (with certain limited exceptions). Do you agree to enter into binding arbitration? Yes _____ No _____

14. If the fee dispute is for \$125,000.00 or less, one (1) arbitrator will hear the case. If the fee dispute is for \$25,000.00 or more, a panel of three (3) arbitrators will hear it. However, if both you and the client agree, you can have a single (1) arbitrator hear the dispute.

Do you agree to have the dispute heard by a single (1) arbitrator? Yes _____ No

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Dated: _____

Attorney's signature

NOTE: You are entitled to choose whether one attorney arbitrator in a three person panel or the sole arbitrator in a matter heard by one arbitrator practices either civil or 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.

NOTE: Awards in fee dispute matters are not intended to be determinate of the quality of the attorney's work or the appropriateness of the attorney's professional conduct or lack thereof.

If you have any questions regarding this form, please call the DESERT BAR ASSOCIATION at (760) 360-1734, or write to DESERT BAR ASSOCIATION, *Fee Resolution Committee*, c/o Kathleen Romero, Post Office Box 2540, Indio, California 92202