

In the Matter of the Fee Dispute Between	RESPONSE TO PETITION FOR RESOLUTION OF DISPUTED FEE	
PETITIONER		
	FEE DISPUTE CASE NO.:FD	
RESPONDENT	Facilitator:FOR OFFICE USE ONLY	

NOTICE: Rule 1.5(f) of the Rules of Professional Conduct requires all North Carolina lawyers to participate in good faith in resolution of a fee dispute – good faith participation includes providing a written signed response to the fee dispute petition and responding promptly to all requests for information from the fee dispute facilitator, including an explanation of your position on the merits of the dispute, within 15 days of your receipt of the Letter of Notice.

To respond to the petition, please accurately and clearly complete this form. Provide **all** requested information. Omission of any required information may cause delay in processing your reply. **Responses which are unsigned or undated will not be processed.** This form is to be completed by Attorney.

Attorneys should provide an itemized statement of services rendered when submitting this Response.

PLEASE PROVIDE RESPONSES TO THE FOLLOWING

1. Written fee agreement

□ YES, Client signed a written fee agreement. If Attorney is currently in possession of any such agreement, attach a copy to this form.

 \Box NO, Client did not sign a written fee agreement.

- 2. Notice of intent to file civil action to collect fee (30-Day Notice) (See Rule of Professional Conduct 1.5(f)(1))

 - □ NO, I did not send Client a 30-Day Notice.

3. Have you filed a Civil Action to Collect the Fee?

- YES, Date of Filing: _____
- \Box NO, I have not filed a civil action to collect the fee.

4. Were legal fees or costs established by a court, federal or state administrative agency, federal or state official, or private arbitrator or arbitrator panel?

 \Box YES. Please attach a copy of the order establishing the fees or costs to this form.

 \Box NO.

5. Amount in Dispute

a.	Enter the total amount of legal fees you have billed Client to date	\$
b.	Enter the total costs & expenses you have billed client to date	\$
C.	Enter the total amount you have been paid to date	\$
d.	Enter the total amount in dispute	\$

6. Have you made, or do you have, an offer to settle the dispute? If yes, provide your offer below:

7. Fee Arrangement

Was the fee to be charged (see 08 FEO 10 for more information):				
By the hour?	If yes, how much? \$ per hour.			
🗆 Yes 🛛 No				
A flat fee?	If yes, how much? \$			
🗆 Yes 🛛 No				
A contingent fee?	If yes, indicate the percentage to be charged and the award or settlement from			
🗆 Yes 🛛 No	which the fee was to be collected%			
A minimum fee?	If yes, what was the minimum fee? \$			
🗆 Yes 🛛 No				
In some other manner?	If yes, please describe.			
🗆 Yes 🛛 No				
Additional information:				

8. Respondent Attorney's Fee Dispute Counsel If you will be represented by counsel in this fee

dispute proceeding, please provide the following information concerning your counsel:

Name of Attorney:				
Name of Law Firm:	Day Telephone: Evening Telephone:			
	Bar ID:			
Street:	Email:			
City:	State:	Zip:		

9. I understand that I may not bill the petitioner for time spent participating in this fee dispute. (See Rule of Professional Conduct 1.5(g))

_____ (Initial)

10. Do not send copies of pleadings, discovery, or the client file unless specifically requested by the Facilitator.

_____ (Initial)

11. Response to Fee Dispute

Please provide a concise statement of facts and a description of the fee dispute and of any negotiations.

12. I am including the following documents or information:

- \Box A copy of any fee agreement with the client.
- \Box A detailed itemization of time spent on the client's case.
- \Box A copy of 30-day letter.
- □ A copy of the client's trust account ledger.
- \square A copy of any order or award establishing the fees or costs.
- \Box Copies of all invoices.
- $\hfill\square$ Copies of all receipts for payment.

13. Replying to the Fee Dispute Petition

To respond to the petition, Attorney must:

- (1) Complete and personally sign the *Response to the Petition for Resolution of a Disputed Fee.*
- (2) Send a copy of the *Response to the Petition for Resolution of a Disputed Fee* by EMAIL to <u>FeeDispute@NCBar.gov</u> or by mailing to the following address:

Fee Dispute Resolution Program ACAP Department North Carolina State Bar PO Box 25908 Raleigh, North Carolina 27611

By signing this *Response to the Petition for Resolution of a Disputed Fee*, I certify that I have read and understand this Response and the Rules of Professional Conduct regarding the fee dispute resolution process.

I hereby declare that the facts, circumstances, and information recited herein are true and correct.

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

ATTORNEY'S SIGNATURE

DATE OF RESPONSE

DO NOT SEND COPIES OF PLEADINGS, DEPOSITIONS, MEDICAL RECORDS, OR OTHER DOCUMENTS NOT SPECIFICALLY LISTED ABOVE, UNLESS REQUESTED BY THE FEE DISPUTE FACILITATOR