



DALLAS BAR ASSOCIATION
2101 Ross Avenue • DALLAS, TEXAS 75201

PETITION FOR FEE ARBITRATION

TO: Tod B. Edel
Chairman, Dallas Bar Association Fee Disputes Committee
Carrington, Coleman, Sloman & Blumenthal, L.L.P.
901 Main Street, Suite 5500
Dallas, Texas 75202

Please answer ALL questions in the blanks provided.

Client Information

Client's Name: _____
Address: _____
(City) (State) (Zip Code)
Telephone Numbers: Home: _____ Business: _____
Client's E-Mail Address: _____

Attorney Information

Attorney's Name: _____
Office Address: _____
(City) (State) (Zip Code)
Office Telephone Number: _____
Attorney's E-Mail Address: _____

1. What is the total amount of attorney's fees billed? _____
2. How much of this amount is in dispute? _____
(NOTE: The Committee has no jurisdiction to hear fee disputes under \$500.00.)
3. How much has been paid to the attorney? _____
4. Do you have a written fee agreement? Yes No (If so, please attach a copy.)
5. In what city and state were the legal services performed or supposed to have been performed?

6. When were the legal services performed? _____
7. On what date did the fee dispute first arise? _____
8. For what type of case or matter was the attorney employed? _____

9. Is this fee dispute, in whole or in part, the subject of pending litigation or grievance proceedings?
(NOTE: The Committee has no jurisdiction to hear a fee dispute while litigation or a grievance is pending between the parties.)

Yes No

10. Briefly, list the main reasons why you feel the fee in dispute is or is not correct or reasonable.
 - a. _____

 - b. _____

 - c. _____

 - d. _____

 - e. _____

I consent and agree to be bound by the decision of a Panel of the DBA Fee Disputes Committee.
(NOTE: The Committee has no jurisdiction to hear fee disputes unless both parties agree to be bound by the decision of the Panel.)

Yes No

I have made a good faith effort to resolve this fee dispute with the other party prior to filing this petition.

Yes No

I consent and agree to e-mail notification in this fee dispute proceeding.

Yes No

I hereby acknowledge that I have reviewed the Rules for Fee Arbitration of the Dallas Bar Association Fee Disputes Committee and consent to be governed and bound by these rules in this arbitration proceeding. A copy of the Rules is available on the DBA website at www.dallasbar.org.

Date: _____

Your Signature

For general information about handling disputes involving the client-attorney relationship, please contact the State Bar of Texas Client-Attorney Assistance Program ("CAAP") toll free at 1-800-932-1900 or visit the State Bar of Texas website at www.texasbar.com.