



**ATTORNEY'S REQUEST FOR ARBITRATION OF A FEE DISPUTE**

Mail this **completed** form along with filing fee check or money order to:

**Sonoma County Bar Association Fee Arbitration Program  
111 Santa Rosa Avenue, Suite 222 Santa Rosa, CA 95404-4945  
(707) 542-1190 ext 19. / FAX: (707) 542-1195**

*Please type or print*

Attorney \_\_\_\_\_ Telephone (\_\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ Email: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

County of law practice at time of services rendered \_\_\_\_\_

Client \_\_\_\_\_ Telephone: \_\_\_\_\_

Address \_\_\_\_\_ Email: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

When were the legal services rendered (for which there is a dispute)? \_\_\_\_\_

What type of case is involved in the dispute (e.g. divorce, bankruptcy, probate)? \_\_\_\_\_

Do you have a written fee agreement? Yes \_\_\_\_\_ No \_\_\_\_\_  
(If yes, attach copy)

Were the fees court-ordered? Yes \_\_\_\_\_ No \_\_\_\_\_  
(If yes, explain on a separate sheet)

Have you filed a lawsuit against the client to collect the fees? Yes \_\_\_\_\_ No \_\_\_\_\_

If you have filed a lawsuit, has the client answered it? Yes \_\_\_\_\_ No \_\_\_\_\_

What is the total amount of the fee charged? A.\$ \_\_\_\_\_

How much of the fee has the client paid? B.\$ \_\_\_\_\_

How much of the fee is in dispute? C.\$ \_\_\_\_\_

Your filing fee is determined by amount C.

If the answer to amount C is: FEE IS: Plus Percentage:

\$1 to 5,000 \$250 Plus 5%

\$5,001 to \$9,999 \$500 Plus 5%

\$10,000 and above \$500 Plus 7%

The maximum filing fee to be charged on cases above \$10,000 will be \$7,500

Make your check or money order payable to: Sonoma County Bar Association or S.C.B.A. DO NOT SEND CASH.

I am enclosing my filing fee in the amount of: \$ \_\_\_\_\_

Please give a description of the fee dispute. Attach additional sheets as necessary. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

All fee disputes for less than \$10,000 are heard by one (1) arbitrator. If the fee is for \$10,000 or more, the dispute is heard by three (3) arbitrators. If both you and the client agree, you may have the dispute heard by a single (1) arbitrator even if the dispute is for \$10,000 or more.

If you agree to one arbitrator, please indicate. Yes \_\_\_\_\_ No \_\_\_\_\_

Arbitration, according to Article 13 of the Business and Professions Code, can be ADVISORY or BINDING. Advisory means that if either you or the client are not satisfied with the award given, you have the right to file in the appropriate civil court for a new trial within 30 days of the date the "Findings and Award" is mailed to you. If neither you nor the client file for a new trial within this 30-day period, an advisory award automatically becomes final and BINDING.

If you and the client both agree to make the arbitration BINDING, a new trial may NOT be requested and the award will be final and binding on both parties. We advise selecting binding arbitration.

Choose one: I want ADVISORY ARBITRATION. \_\_\_\_\_  
I agree to BINDING ARBITRATION. \_\_\_\_\_

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.

\_\_\_\_\_  
Attorney's Signature

\_\_\_\_\_  
Dated

I acknowledge receipt of the *Rules of Procedure for Fee Arbitrations* by the Sonoma County Bar Association and agree to be bound by them. The above information is true and correct to the best of my knowledge and I hereby request arbitration on same.

Signed by: \_\_\_\_\_ (Signature is mandatory) Date \_\_\_\_\_