

**NON-ATTORNEY CLIENT RELATIONSHIP  
& DOCUMENT REVIEW CONSULT DISCLOSURES**

**Consultation and Creation of an Attorney-Client Relationship:**

A consultation, inquiry or limited task of investigating, researching and reviewing factual information, documents with legal research and analysis thereof **does not** create an attorney-client relationship with this law office. However, a letter of engagement or retainer agreement retaining this law office in writing, negotiated and executed, by all parties creates an attorney-client relationship.

**Statute of Limitations Notice and Proceedings:**

If you are nearing the **statute of limitations** of a claim, judicial review, appeal, or a proceeding within 120 days, it is unlikely to reasonably perform a full reasonable inquiry concerning allegations and controversy to draft a complaint; and *this firm is not likely to represent you on such short notice*. For other relief from the court, e.g. applying for appeal, injunction, order of protection, petitions, in short order, a heighten commensurate retainer fee applies.

**The Duty of Confidentiality:**

Attorneys have at all times, the professional duty to keep all matters disclosed to them confidential, though this is qualified, e.g., in the face of certain dangers where, by law, exceptions apply.

**Waiver of Confidentiality Between Parties:**

Despite that \_\_\_\_\_, Esq., shall keep confidential matters outside the presence of another individual; I, \_\_\_\_\_, waive confidentiality as to matters discussed during the course of this consult, by having \_\_\_\_\_, my spouse, present upon my own request herein and volition; as so does \_\_\_\_\_, having \_\_\_\_\_, my spouse, present upon my own request herein and volition. *This waiver can be revoked at any time – however, at that point, a conflict may ensue and the attorney may not continue with either party.*

**Fee:**

Please be advised, the consultation fee is a Stand Alone fee and Non-Refundable, and no promise to accept your case is made in connection to this consult. A flat fee for a brief document review, as to all communications, pursuant to Client Authorization Form, is for the amount of \$\_\_\_\_\_.

This consult shall constitute solely the review of communications with potential defendants, their respective representatives, and an assessment as to current viability of claims. As to e-mails, matters of confidential nature is strongly discourages, unless encryption applies.

We, \_\_\_\_\_, and \_\_\_\_\_, residing at \_\_\_\_\_ have read this disclosure and agree to its terms before document

review begins and declare that we have been provided a personal copy of my rights and responsibilities, and Client<sup>1</sup> Authorization, contemporaneously with this consult disclosure form.

Date:

\_\_\_\_\_  
Print Name:  
Sign above

\_\_\_\_\_  
Print Name:  
Sign above

Law Office of \_\_\_\_\_  
Address  
Phone Number

\_\_\_\_\_  
<sup>1</sup> Client herein does not bestow a client-attorney relationship, but a client within a narrow meaning for a particular consult/document review purpose only.

**CLIENT SIGNATURE AUTHORIZATION**

State of New York        )  
  ) ss.:  
County of \_\_\_\_\_        )

We, \_\_\_\_\_, as husband and wife hereby, the undersigned, hereinafter (“        “) authorize \_\_\_\_\_, Esq. to act as our representative regarding a reassessment of defendants’ potential liabilities concerning the.....

This will include, but is not limited to, requesting any and all information, records, and oral communications pertaining to any communications made to and from the \_\_\_\_\_, and /or by representatives, with potential defendants.

Including, but not limited to, all lab reports, agencies, letters, faxes, e-mails, telephone communications indicating time, date and detail of communications with defendants and their representatives, and insurance carriers.

It is understood that a copy of this form will also serve as authorization to release any and all confidential information from either former/ongoing legal representative(s).

The information that \_\_\_\_\_, Esq., obtains is only to be used in a document review, as are all communications with any and all probable defendants and their insurance carriers.

By signing below, We have read, understood, and agree to the terms listed above.

Client Signature: \_\_\_\_\_

Client Signature: \_\_\_\_\_

Sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 201\_

\_\_\_\_\_  
Notary Public: State of New York