

[Date]

[Client Name]
[Client Address]
[City, State, Zip Code]

Re: Engagement for Legal Representation - [Date of Incident] Personal Injury Claim

Dear [Client Name],

This letter confirms that [Law Firm Name] has been retained to represent you in connection with your claims for personal injuries and damages arising out of the incident that occurred on [Date of Incident].

1. Scope of Representation

Our representation is limited to pre-litigation settlement negotiations. This includes investigating the claim, gathering medical records, communicating with insurance carriers, and attempting to negotiate a settlement. If a settlement cannot be reached and a lawsuit must be filed, a separate agreement will be required.

2. Legal Fees (Contingency Fee)

Our legal fee is based on a percentage of the total recovery obtained. You will pay [Percentage, e.g., 33.3%] of the gross settlement amount. If no recovery is made, you will owe no attorney fees.

3. Costs and Expenses

The firm may advance costs such as medical record fees, police report fees, and postage. These expenses will be deducted from your portion of the settlement in addition to the legal fees. If there is no recovery, you [will/will not] be responsible for these costs.

4. Client Responsibilities

You agree to cooperate fully, provide all requested documentation, and keep us informed of your medical treatment progress and any changes in contact information.

5. No Guarantee of Outcome

You acknowledge that we have made no guarantees regarding the successful outcome or the specific amount of any potential settlement.

Please sign and return a copy of this letter to indicate your acceptance of these terms.

Sincerely,

[Attorney Name]
[Law Firm Name]

Client Acceptance

I have read, understood, and agree to the terms set forth above.

Signature: _____ Date: _____