

**[Law Firm Name]**  
[Address]  
[City, State, Zip Code]  
[Phone Number]

**[Date]**

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

**RE: Engagement for Legal Services - Motor Vehicle Collision on [Date of Accident]**

Dear [Client Name],

This letter confirms that [Law Firm Name] (the "Firm") has been retained to represent you in connection with legal claims arising from a motor vehicle collision that occurred on or about [Date of Accident].

### **1. Scope of Representation**

The Firm will provide legal services including investigation, negotiation, and, if necessary, litigation against all potentially liable parties. This engagement is limited to the specific motor vehicle collision mentioned above.

### **2. Legal Fees (Contingency Fee)**

Our fee is based on a percentage of the total recovery obtained. You are not required to pay attorney fees unless we recover money for you. The fees are as follows:

- [Percentage]% of any recovery obtained prior to filing a lawsuit.
- [Percentage]% of any recovery obtained after a lawsuit is filed or an arbitrator is appointed.

### **3. Costs and Expenses**

In addition to legal fees, you are responsible for costs incurred (e.g., filing fees, medical record fees, expert witness fees). The Firm may advance these costs, to be reimbursed from your portion of the settlement or judgment.

### **4. Client Responsibilities**

You agree to cooperate fully, provide all relevant documentation, and notify the Firm of any change in contact information or medical status.

### **5. Termination**

You may terminate this representation at any time. The Firm may withdraw from representation as permitted by the Rules of Professional Conduct.

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

Sincerely,

[Attorney Name]  
[Law Firm Name]

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**ACCEPTANCE**

I have read, understand, and agree to the terms set forth in this Engagement Letter.

\_\_\_\_\_  
[Client Signature]

\_\_\_\_\_  
[Date]