

PREMISES LIABILITY ATTORNEY-CLIENT FEE AGREEMENT

DATE: [Insert Date]

CLIENT: [Insert Client Name]

ATTORNEY: [Insert Law Firm Name]

1. SCOPE OF REPRESENTATION: The Client retains the Attorney to provide legal services regarding a premises liability claim involving an incident that occurred on [Insert Date of Accident] at [Insert Location/Address of Incident]. This includes investigation, negotiation, and, if necessary, litigation against [Insert Name of Property Owner/Manager, if known] and any other liable parties.

2. LEGAL FEES: This matter will be handled on a contingency fee basis. The Attorney will receive a percentage of the total recovery as follows:

- [Insert Percentage, e.g., 33.3%] if the case is settled before a lawsuit is filed.
- [Insert Percentage, e.g., 40%] if a lawsuit is filed or the case goes to trial/arbitration.

If no recovery is obtained, the Client shall owe no legal fees to the Attorney.

3. COSTS AND EXPENSES: The Attorney may advance costs (e.g., filing fees, medical records, expert witnesses). These costs will be deducted from the Client's share of the recovery after the contingency fee is calculated. If there is no recovery, the Client [is/is not] responsible for reimbursing the Attorney for advanced costs.

4. CLIENT RESPONSIBILITIES: The Client agrees to cooperate fully, provide all relevant documentation (medical bills, photos, witness info), and notify the Attorney immediately of any changes in contact information or medical status.

5. DISCHARGE AND WITHDRAWAL: The Client may discharge the Attorney at any time. The Attorney may withdraw from representation if the claim lacks merit, if a conflict of interest arises, or if the Client fails to cooperate.

6. NO GUARANTEE: The Attorney makes no promises or guarantees regarding the successful outcome or the amount of any potential recovery.

7. ENTIRE AGREEMENT: This document represents the entire agreement between the parties.

[Client Signature]

[Attorney Signature]