

JOINT REPRESENTATION WORKERS' COMPENSATION ENGAGEMENT LETTER

Date: [Date]

Client A: [Name of Client A]

Client B: [Name of Client B]

Re: Joint Representation in Workers' Compensation Claim

Date of Injury: [Date of Injury]

Employer: [Employer Name]

Dear [Client A] and [Client B],

This letter confirms that [Law Firm Name] ("the Firm") has been retained to represent both of you jointly in connection with your respective workers' compensation claims arising from the incident occurring on [Date of Injury].

1. Scope of Representation

The Firm will provide legal services to pursue workers' compensation benefits including medical treatment, temporary disability, and permanent disability awards. Our representation is limited specifically to this workers' compensation matter.

2. Joint Representation and Potential Conflicts

By signing this agreement, you acknowledge that you have asked the Firm to represent both of you. While your interests currently appear aligned, a conflict of interest may arise in the future (e.g., if there are limited insurance funds or if one party is found to have different liability status). If a conflict arises that prevents the Firm from maintaining undivided loyalty to both parties, the Firm may be required to withdraw from representing one or both of you.

3. Confidentiality and Information Sharing

In a joint representation, there is no expectation of confidentiality between the clients. Any information provided by one client relating to the case may be shared with the other client. However, all information remains confidential as to third parties outside of this attorney-client relationship.

4. Legal Fees and Costs

Legal fees in workers' compensation cases are typically set by statute and are contingent upon a recovery. These fees must generally be approved by a Workers' Compensation Judge. Costs incurred (e.g., medical records, filing fees) will be deducted from any final settlement or award.

5. Withdrawal or Termination

You have the right to terminate this representation at any time. The Firm also reserves the right to withdraw from representation as permitted or required by the Rules of Professional Conduct.

Please sign below to indicate your agreement to the terms of this joint representation.

Sincerely,

[Attorney Name]
[Law Firm Name]

CONSENT TO JOINT REPRESENTATION

I have read this letter and understand the potential risks of joint representation. I hereby consent to [Law Firm Name] representing me and [Other Client Name] jointly.

[Client A Signature] / Date

[Client B Signature] / Date