

[Date]

[Prospective Client Name]

[Address]

[City, State, Zip Code]

Re: Conflict of Interest Waiver and Implementation of Information Barrier

Dear [Name of Contact Person],

We are pleased that [Law Firm Name] has been asked to represent [Prospective Client Name] in connection with [Description of Matter] (the "Matter").

As we discussed, our firm currently represents [Existing Client Name] in [Description of Existing Matter]. While these two matters are not substantially related, we recognize that [Existing Client Name] is an adverse party to [Prospective Client Name] in [Context of Potential Conflict].

Under applicable rules of professional conduct, we are required to obtain your informed consent to proceed with this representation. To ensure the protection of your confidential information and to mitigate any potential conflict, our firm will implement a formal "Information Barrier" (Ethical Wall). This barrier will include the following protocols:

- Screening of all personnel working on your Matter from any access to files or information related to [Existing Client Name].
- Prohibiting all personnel working for [Existing Client Name] from accessing files or information related to your Matter.
- Instruction to all involved attorneys and staff regarding their obligation not to discuss these respective matters with excluded personnel.
- Restricted electronic access to digital folders and physical locking of paper files.

By signing this letter, [Prospective Client Name] confirms that it has been informed of the nature of the conflict, the steps taken to protect its interests, and hereby waives any conflict of interest arising from our firm's representation of [Existing Client Name] in the aforementioned matter.

Please indicate your consent by signing and returning the enclosed copy of this letter.

Sincerely,

[Attorney Name]

[Law Firm Name]

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**AGREED AND ACCEPTED:**

On behalf of [Prospective Client Name]

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

Name: [Name of Authorized Signatory]

Title: [Title]

Date: [Date]