

[Date]

[Client Name]

[Client Address]

[City, State, Zip Code]

Re: Informed Consent for Waiver of Conflict of Interest

Dear [Client Name],

This letter is to formally request your consent to our firm's representation of [Other Client Name] in connection with [Description of Matter B]. As you are aware, our firm currently represents you in [Description of Matter A].

Under applicable rules of professional conduct, a law firm may not represent a client if that representation is directly adverse to another client, or if there is a significant risk that the representation will be materially limited by the firm's responsibilities to another client, unless the firm obtains informed consent from each affected client.

Nature of the Conflict

While the matters we are handling for you and [Other Client Name] are separate and distinct, a conflict exists because [Describe how the interests are adverse or how the firm's duties are limited].

Protection of Confidential Information

We will ensure that your confidential information remains protected. Our firm has implemented an ethical wall to prevent the exchange of any sensitive information between the legal teams working on your matter and those working for [Other Client Name].

Risks and Benefits

The benefit of this waiver is that it allows both parties to continue working with their preferred legal counsel. The potential risks include the perception of divided loyalty or the possibility that, should a direct dispute arise between you and [Other Client Name] regarding these matters, we may be forced to withdraw from representing one or both parties.

Consent

By signing below, you acknowledge that you have been advised of the nature of the conflict, have had the opportunity to consult with independent counsel, and voluntarily waive the conflict of interest regarding this specific representation.

Sincerely,

[Attorney Name]
[Law Firm Name]

ACKNOWLEDGED AND AGREED:

Signature: _____

Name: [Client Name]

Date: _____