State Bar of Georgia

Lawyers Serving the Public and the Justice System

Please read the Rules and the Frequently Asked Questions carefully. They will answer most of your questions about this service of the State Bar of Georgia. **The entire Fee Arbitration process takes an average of eleven months to complete**. Please understand that the State Bar of Georgia cannot represent you, give you any legal advice, or change the outcome of a court decision. **Please note that the Fee Arbitration Program does not arbitrate fee disputes in which the amount in dispute is $1,000.00 or less.**

If you wish for your fee dispute to be considered, complete and return the original Petition and any attachments. Please **ANSWER ALL QUESTIONS COMPLETELY, BEING AS BRIEF AS POSSIBLE**. **Failure to complete the Petition and to follow the instructions below may result in your processing timebeing delayed or case being closed**.

On the Petition, the numbers in brackets [] refer to the specific Fee Arbitration Rule from the Supreme Court of Georgia that relates to the question you are answering on the Petition. Please read the listed Rule so that you will better understand the purpose of the question.

To speed processing of your case:

1. Please use the form provided. Do not alter the form.
2. Be sure to include ALL the information listed below:
    a. Petition form
    b. Narrative written/typed on a separate sheet of paper
    c. Receipts, invoices, and/or bank statements, etc showing your payments to the attorney
    d. Copy of a certified letter, email, or text you sent to the attorney requesting a refund.
    e. A copy of your contract (if you signed one)
3. *Mail* your original Petition to the address on the top of the Petition Form. Photocopied, faxed or emailed Petitions WILL NOT BE ACCEPTED.
4. Your submission is limited to only 50 pages including exhibits.
5. Please TYPE or WRITE LEGIBLY in black ink only.
6. Please DO NOT STAPLE any pages of the Petition and attachments.
7. Please DO NOT WRITE ON THE BACK of any pages of your submission.
8. DO NOT ATTACH A COPY OF ANY GRIEVANCE you may have filed, or plan to file, with the Office of General Counsel.
9. Use ONLY standard 8½" by 11" paper.

NOTE: The Committee on the Arbitration of Attorney Fee Disputes determines if each case has sufficient merit based on the Fee Arbitration Rules. Only disputes that meet the jurisdictional requirements of the Fee Arbitration Rules warrant the full arbitration process. You will be notified by mail if jurisdiction of your dispute is accepted or declined.

If you have any questions regarding this Petition or the Fee Arbitration process, please call the State Bar of Georgia, (404) 527-8750. In the meantime, you have the right to, and we urge you to, exert your best efforts to resolve the dispute directly with the other party.

HEADQUARTERS
104 Marietta St. NW, Suite 100
Atlanta, GA 30303-2743
404-527-8700 • 800-334-6865
Fax 404-527-8717
www.gabar.org

COASTAL GEORGIA OFFICE
7402 Hodgson Memorial Drive, Suite 105
Savannah, GA 31406
912-239-9910 • 877-239-9910
Fax 912-239-9970

SOUTH GEORGIA OFFICE
244 E. 2nd St. (31794)
P.O. Box 1390
Tifton, GA 31793-1390
229-387-0446 • 800-330-0446
Fax 229-382-7435

State Bar of Georgia
Petition for Fee Arbitration

PRINT FORM

SAVE FORM

TO: COMMITTEE ON ARBITRATION OF ATTORNEY FEE DISPUTES
State Bar of Georgia, 104 Marietta Street, NW, Suite 100, Atlanta, Georgia 30303

If you have a disability that prevents you from completing this form and need to request an accommodation, please email ADACoordinator@gabar.org or call Donna Davis (404) 527-8750

DO NOT ALTER THIS FORM.

Date *[Rule 6-201 (e)]* : _____ **Is Petitioner the:** ☐ **Client** ☐ **Attorney or Law Firm** ☐ **Other** _____

Petitioner's Name: _____
[Rule 6-201 (b)]

Mailing Address: _____
City State/Zip

Telephone #: _____ Email: _____

Respondent's Name: _____
[Rule 6-201 (b)]

Mailing Address: _____
City State/Zip

Telephone #: _____ Email: _____

1. What is the total amount of the attorney's fee? $ _____
2. How much of this amount is in dispute? *[Rule 6-204 (c)]* $ _____
3. How much has been paid to the attorney? $ _____
4. EXACTLY what date did the fee dispute first arise (month/day/year) ? *[Rule 6-204 (f)]* _____

	Start Date	End Date
5. Provide the beginning and ending dates (month/day/year) of representation. *[Rule 6-204 (f)]*		

6. Where (city & state) were the legal services performed or supposed to have been performed? *[Rule 6-204 (b)]* _____
7. For which field of law (type of case or legal services) was the attorney employed? _____
8. On separate paper, explain in DETAIL (1) the nature of the dispute, (2) the particulars of your position, and (3) all relevant dates. **Attach any receipts, invoices, emails, text messages, etc. which support your case.** This is your opportunity to explain your side of the fee dispute.

	Yes	No
9. Have you made a good faith effort to resolve this dispute? If the answer is yes, attach copies of your written request for the refund. If he answer is no, send a written request for the refund before filing this Petition. *[Rule 6-201 (c)]*	☐	☐
10. Has there been a lawsuit filed in court concerning this fee dispute over legal fees? If the answer is yes, enclose a full explanation and copies of all pleadings. *[Rule 6-204 (e)]*	☐	☐
11. Is there a written contract? (If yes, attach a copy) *[Rule 6-412]*	☐	☐
If you signed a contract, but do not have a copy, please check here: ☐		

By filing this Fee Arbitration Petition, I agree to be bound by the result of the arbitration. *[Rule 6-201 (d)]* I certify that the above information is true and correct. I certify that I have read the explanatory brochure entitled, "The Fee Arbitration Program," and the Rules which govern this public service of the State Bar of Georgia. I understand that I am waiving other legal rights including the right to bring a lawsuit on this fee dispute. I understand that my decision to be bound by the result of the arbitration may be irrevocable under *Rule 6-206*. I agree to pay any unpaid fees or refund any overpayment in accordance with the award and to do so promptly. I certify that no promises have been made to me regarding the results of the arbitration and that this Petition is filed by me in a voluntary effort to finally resolve the fee dispute recognizing that the results may be *favorable* or *unfavorable* to my position.

Date: _____ Your Signature: _____
[Rule 6-201 (e)] *[Rule 6-201 (f)]*

Co-Petitioner's Signature: _____ Co-Petitioner's Signature: _____
[Rule 6-201 (f)] *[Rule 6-201 (f)]*

On separate paper, please provide the name, address, telephone number, and email address for each Co-Petitioner.