



2020 Lawyer Referral Service Application

Dear Panelist:

Thank you for your interest in the Onondaga County Bar Association's Lawyer Referral Service (LRS).

I would like to take this opportunity to express the appreciation of the OCBA Lawyer Referral Service Standing Committee to those panelists continuing with the Service, and to give a special welcome to those panelists participating for the first time. It is hoped that the coming year will be prosperous for your practice and that the Lawyer Referral Service will be a part of that success. I would like to thank the panelists for the public service that is provided on a daily basis in dealing with the needs of potential clients calling the Service.

The LRS Committee continues to make improvements to the Service. **Please be sure to carefully read the rules and regulations** contained in this packet. Our staff helps determine which area of the law to refer a client, and also whether they are ready to hire an attorney. **The \$100 LRS panelist fee will allow the panelist to choose up to 5 major categories. Additional categories, up to 3 more, can be added for a \$50 fee. For your information, 10% of total fees from all referred cases are to be remitted to the OCBA Lawyer Referral Service immediately after payment is received by the attorney.**

In order to process your application quickly and efficiently, please be sure to submit a:

- a) Completed 2020 LRS Enrollment form
- b) Lawyer Referral Category checklist
- c) Signed Attorney Affirmation
- d) Photocopy of your current Malpractice Insurance Policy. No referrals can be made if a copy of a current liability policy is not on file with the Lawyer Referral Service.

If you have any questions, please call Jeff Unaitis, Executive Director, at 471-2667. We look forward to your participation and to a successful and prosperous 2020!

Sincerely,

Stuart J. LaRose, Esq., Chairman
Lawyer Referral Service Committee

Enclosure



LAWYER REFERRAL SERVICE 2020 ENROLLMENT FORM

NAME: _____

STREET ADDRESS: _____

CITY / STATE / ZIP CODE: _____

PHONE: _____ FACSIMILE: _____

EMAIL: _____

STATES ADMITTED TO PRACTICE: _____

FLUENT IN THESE LANGUAGES: _____

PROFESSIONAL LIABILITY COVERAGE COMPANY: _____

POLICY #: _____ EXPIRATION DATE: _____

NUMBER OF LRS CATEGORIES SELECTED BELOW: _____

LRS PANELIST FEE, UP TO (5) MAJOR CATEGORIES: \$ 100.00

(OPTIONAL) ADDITIONAL CATEGORIES, MAXIMUM 3: \$ _____

TOTAL FEE SUBMITTED: \$ _____

My consent and agreement to the terms and conditions of the Lawyer Referral Service of the Onondaga County Bar Association is evidenced by my signature:

SIGNATURE: _____ DATE: _____

PLEASE PRINT OR TYPE NAME HERE: _____

OFFICE PERSON RESPONSIBLE FOR COMPLETING STATUS REPORTS (IF NOT ASSIGNED ATTORNEY)

Lawyer Referral staff receive many calls from prospective clients outside of the immediate Onondaga County area. We would like to be able to direct these clients to LRS panelists who are willing to travel to represent a client in court.

Are you willing to travel to represent a client in court? __ Yes __ No

To which counties? _____

Do you have an office in another town or city? __ Yes __ No Where _____

2020 CATEGORY CHECKLIST

Panelist may select as many subcategories under any FIVE of the major (BOLD) categories for the annual \$100 panel fee. Panelist may then add THREE additional categories for an additional \$50/year.

ADMINISTRATIVE LAW

- Pistol / Gun Permits
- Liquor Licenses
- Professional Discipline
- Professional Licensing
- Education
- Environment

APPELLATE WORK

- NYS Civil Criminal
- Federal Civil Criminal

BANKRUPTCY* _____

CIVIL RIGHTS

- Police Brutality
- Wrongful Arrest

CONSUMER AFFAIRS

- Lemon Law
- Student loans
- Warranty Issues
- Product Liability

CONTRACTS

- Commercial
- Construction, Home Improvement
- Debt Collection
- Employment
- Entertainment
- Commercial Litigation

CORPORATIONS, SMALL

BUSINESS & PARTNERSHIPS

- Securities
- Not-for-Profit
- Buy/Sell Agreements
- Copyrights & Trademarks
- LLC, Start-up
- Patents*

CRIMINAL LAW

- Federal
- Felony* DWI*
- Juvenile
- Misdemeanor
- Expungement
- Vehicle and Traffic
- Harassment

ELDER LAW

- Article 81 (Mental Health)
- Medicare / Medicaid

ENVIRONMENTAL

- Litigation (oil spills, CERCLA)
- Permitting
- Superfund Issues

ESTATES*

- Will Drafting
- Trust & Estate Planning
- Probate
- Willing to Act as POA
- Special Needs Trust

FAMILY LAW

- Adoption International
- Custody
- Child / Spousal Support
- Interstate Support
- Order of Protection
- Family Court Appeal
- Divorce & Separation*
- Mediation
- Qualified Domestic Relations Order (QDRO*)
- CPS Issues

FEDERAL COURTS

- Civil Litigation

GENERAL LAW PRATICE _____

IMMIGRATION _____

INSURANCE LAW

- Home/Fire/Property Damage

INTERNATIONAL LAW _____

EMPLOYMENT & LABOR

- Employment Discrimination
- Wrongful Termination
- Long & Short-term Disability
- Pension & Retirement
- Unemployment Hearings
- Sexual Harassment

LANDLORD / TENANT _____

- Eviction (Home Owner) _____

NAME CHANGE _____

REAL ESTATE

- Quit Claim Deed
- Commercial Property
- Condo's / Homeowner's Associations
- Environ (storage tanks, etc.)
- Foreclosure
- Limited Partnerships & Joint Ventures
- Sales/Purchases/Refinance
- Zoning / Variance

SCHOOL DISTRICTS _____

SMALL CLAIMS COURT _____

SOCIAL SECURITY

- SSD (Adult)
- SSI (Adult)
- SSD/SSI Children
- Appeal

TORTS

- Bullying
- Civil
- NY Child Victims Act
- Negligence & Personal Injury*
- Wrongful Death *
- Property Damage
- Against a Municipality
- Environmental
- Malpractice (Legal*)
- Malpractice (Med*)
- Malpractice (Dental*)
- Malpractice (Professional*)
- Libel / Slander (Defense)
- Nursing Home Abuse
- HIPPA Violations
- Libel/Slander (Plaintiff)
- Lead Poisoning Dog Bites

TAXATION LAW

- Federal NYS

WORKER'S COMP.

- Federal State App

LOCAL COUNSEL

- Fed State

ATTORNEY AFFIRMATION

1. I affirm that the information contained in this application is true.
2. I affirm that I will notify the Executive Director of the Bar Association if my professional liability coverage set forth above is terminated or modified.
3. I affirm I am currently registered with the Office of Court Administration, and I am an attorney in good standing in the State of New York.
4. I will service persons referred to me by LRS at no charge for the first consultation with the understanding that it is to cover advice only. I may charge for the preparation of letters and/or any legal papers. **If I cannot personally handle the referral, I will direct the client to call the LRS for another referral. If any case is referred to another attorney, I understand that I am still responsible for the remittance of 10% of the entire legal fee.**
5. I agree that on referrals, I will remit to the Onondaga County Bar Association LRS 10% of legal fees received (excluding disbursements). The Onondaga County Bar Association reserves the right to take legal action in the event that a percentage fee is not returned. Action will be taken only upon consent of Committee and Board of Directors.
6. I certify that I possess the professional qualifications to handle matters competently in the area(s) which I have indicated on the Category Checklist, **that I am personally handling cases in these areas of law**, and that I am in compliance with the subject matter panel rules as determined by the LRS Committee, entitled "**OCBA LRS Subject Matter Panel Criteria – Self Certified**" in this packet.
7. Applicant agrees to indemnify, defend, and hold harmless the Onondaga County Bar Association, its officers, directors, members, and employees (OCBA) and the Lawyer Referral Service and its Committee from any claim, demand, action, liability, expense, or loss resulting in whole or in part from applicant's handling of any referral hereunder, the referral by the OCBA, or by applicant's failure to comply with any provision of this application.
8. **I agree to complete and return referral status reports, percentage fees, recap forms, and other correspondence to the Onondaga County Bar Association office within thirty days or by date specified.** I understand that the status reports are to be completed and returned within seven days of receipt by me. If I am removed from the panel for any reason OR if a case generates a percentage fee when/if I am no longer a Lawyer Referral Panelist, I will remit 10% of the fees to the Bar Office. **I understand my name may be dropped from the active panelist rotation list of the Lawyer Referral Service by failing to return referral summaries or percentage fees after written notification, either by letter or e-mail.**
9. I understand that if three (3) instances of negative feedback are reported by separate clients regarding my services, I may be called before the Lawyer Referral Committee and removed from the panel.

Signature: _____ **Date:** _____