

CAMDEN COUNTY BAR ASSOCIATION LAWYER REFERRAL SERVICE Panel Application 2020-2021



Please Print

Annual Panel Fee: \$75 admitted 1-5 years \$150 six years or longer

Name

Firm

Partner Associate Of Counsel Other (*please specify*) _____

Principal Office Address

Office Telephone

Office Fax

E-mail

Office Hours

Law School

Degree(s) Received Year(s)

Year Admitted to New Jersey Bar

Other Court Admissions and Dates of Admission

- | | |
|--|--|
| <input type="checkbox"/> Will accept evening appointments | <input type="checkbox"/> Will accept weekend appointments |
| <input type="checkbox"/> Will travel to meet with client | <input type="checkbox"/> Will accept collect calls from clients |
| <input type="checkbox"/> Will meet with client in jail, if necessary | <input type="checkbox"/> Fluent in foreign/sign language (<i>please specify below</i>) |
- _____

Malpractice Insurance Carrier

Malpractice Coverage Amount (minimum \$500,000/\$500,000)

Malpractice Deductible Amount (maximum \$5,000)

Malpractice Insurance Expiration Date

LRS Practice Categories

The LRS has 5 primary categories and over 35 special area categories. Each is considered a separate panel. Referrals within each panel rotate on a strict “next up” basis, with the only exceptions being those described in Rule 5A. Rotations occur within the 5 primary categories by the subgroups listed. Applicants should indicate each specific area of the law in which he/she wishes to receive referrals by checking the box next to all areas from which referrals are sought.

Referrals rotate within each of the special area panels independently of the others. For example, if a panelist requests referrals in all of the 5 primary categories and in 5 special categories, he/she will rotate within 10 panels simultaneously. This attorney could possibly receive referrals from each panel independent of the others according to the rotation. Once a referral is made in any one of the subcategories of a primary panel, the attorney will automatically be moved to the bottom of the rotation for that category.

When completing this application, in addition to checking the primary practice area boxes, be sure to indicate the specific areas of interest within each category. Remember that you should only indicate areas in which your practice, experience and education permit you to represent clients competently as required by the Code of Professional Responsibility. You will receive referrals in indicated categories only.

Thank you for participating in the Camden County Bar Association’s Lawyer Referral Service, and advancing our mission to provide legal service to those in need throughout our community.

Please indicate in which of the following areas of law you practice, have experience, and can competently represent a client as provided by Canon 6 of the Code of Professional Responsibility. All referred cases are subject to the percentage fee program as stated in paragraph 4c(b) of the LRS Rules. **Cases will be referred only in the areas indicated.**

◆ **COMMERCIAL**

- | | |
|--|--|
| <input type="checkbox"/> Banking | <input type="checkbox"/> Insurance |
| <input type="checkbox"/> Bankruptcy (<input type="checkbox"/> Debtor <input type="checkbox"/> Creditor) | <input type="checkbox"/> Labor Relations |
| <input type="checkbox"/> Collections | <input type="checkbox"/> Employees (<i>incl. wrongful discharge</i>) |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Employers |
| <input type="checkbox"/> Consumer Protection | <input type="checkbox"/> Unions |
| <input type="checkbox"/> Contracts | <input type="checkbox"/> Non-profit organizations |
| <input type="checkbox"/> Corporations | <input type="checkbox"/> Partnerships |
| <input type="checkbox"/> Debtor Defendants | <input type="checkbox"/> Unemployment Compensation |
| <input type="checkbox"/> Franchises | |

◆ **CRIMINAL**

- | | |
|--|---|
| <input type="checkbox"/> Expungements | <input type="checkbox"/> Major Crimes (<i>White Collar</i>) |
| <input type="checkbox"/> Juvenile | <input type="checkbox"/> Municipal Court |
| <input type="checkbox"/> Major Crimes (<i>Indictable Offenses</i>) | |

◆ **FAMILY**

- | | |
|---|---|
| <input type="checkbox"/> Adoption | <input type="checkbox"/> Paternity |
| <input type="checkbox"/> Child Abuse | <input type="checkbox"/> Property Settlement Agreements |
| <input type="checkbox"/> Custody/Visitation | <input type="checkbox"/> Domestic Violence |
| <input type="checkbox"/> Divorce Mediation | <input type="checkbox"/> Domestic Relations |
| <input type="checkbox"/> Support | <input type="checkbox"/> DCP&P/DYFS Defense |
| <input type="checkbox"/> Separation/Divorce | |

◆ **PROBATE**

- | | |
|--|---|
| <input type="checkbox"/> Decedent’s Estates | <input type="checkbox"/> Guardianship/Incompetency |
| <input type="checkbox"/> Elder Law/Medicare/Medicaid | <input type="checkbox"/> Wills/Trusts/Estate Planning |

◆ **PROPERTY**

- | | |
|---|---|
| <input type="checkbox"/> Advance Directives (<i>Living Wills</i>) | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> Condemnation | <input type="checkbox"/> Commercial |
| <input type="checkbox"/> Condominium Law | <input type="checkbox"/> Industrial |
| <input type="checkbox"/> Landlord/Tenant | <input type="checkbox"/> Residential |
| <input type="checkbox"/> Landlord/Tenant Commercial | <input type="checkbox"/> Real Estate Litigation |
| <input type="checkbox"/> Land Use Planning | <input type="checkbox"/> Tax Appeals |

◆ **TORTS**

- | | |
|---|---|
| <input type="checkbox"/> Civil Rights | <input type="checkbox"/> Products Liability |
| <input type="checkbox"/> Intentional Torts (<i>Libel, Slander, etc.</i>) | <input type="checkbox"/> Professional Malpractice |
| <input type="checkbox"/> Negligence <input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant | <input type="checkbox"/> Accounting <input type="checkbox"/> Legal |
| <input type="checkbox"/> Nursing Home Abuse & Neglect | <input type="checkbox"/> Architectural <input type="checkbox"/> Medical |
| <input type="checkbox"/> Police Misconduct | <input type="checkbox"/> Dental <input type="checkbox"/> Stockbroker |
| <input type="checkbox"/> Prisoners’ Rights | <input type="checkbox"/> Engineering <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Workers’ Compensation | |

(Continued on next page)

◆ **SPECIALTY AREAS**

- Administrative Law
- Admiralty
- Animal Rights
- Anti-trust
- Appellate Practice (*incl. Supreme Court*)
- Asbestos Litigation
- Business
- Civil Litigation
- Class Actions
- Commercial Litigation
- Constitutional Law
- Computers/Technology
- Disabled Persons
- Education Law Special Education
- EMS, Fire & Dispatch Law
- Entertainment
- Health Care Law
- Identity Theft
- Immigration/Naturalization
- International Law
- Military/Veterans Affairs
- Name Changes
- Neighbor Disputes
- Patents/Trademarks/Copyrights
- Pennsylvania Matters
- Pension Plans (ERISA)
- Securities
- Social Security Disability
- Sports
- State Licensing
- Taxation
- Victims of Violent Crimes Assistance
- Other _____

Certification

By executing this application, I hereby certify the following:

- A. I am a member in good standing of the Bar of the State of New Jersey;
- B. I am an active member in good standing of the Camden County Bar Association;
- C. I authorize any review of my records by the Lawyer Referral Service Advisory Committee relative to my participation in the LRS Program;
- D. I am duly qualified to practice law;
- E. I have the requisite experience and competence to practice in the areas of law I have indicated for referrals as provided by the Code of Professional Responsibility;
- F. I will adhere to the recognized ethical standards of the Profession;
- G. I authorize the LRS Advisory Committee to examine any and all material presently on file, or which may hereafter be filed, with the appropriate District Ethics Committee during the period that I am a member of the LRS Panel;
- H. I carry legal malpractice insurance with minimum coverage of \$500,000/\$500,000 with a maximum deductible of \$5,000;
- I. I will provide a Certificate of Coverage with a 10-day cancellation clause to the Camden County Bar Association as a condition of my Panel membership. Said insurance shall be in force at all times during my term of membership on the Panel;
- J. I agree to be bound by all rules and regulations of the Lawyer Referral Service presently, or as may be modified in the future.

Signature

Date

Please return completed application, annual panel fee - payable to Camden County Bar Association - and Insurance Certificate to:

CCBA Lawyer Referral Service
1040 N. Kings Highway, Suite 201
Cherry Hill, NJ 08034

Questions?

Call 856.482.0620 or email rry@camdencountybar.org

Visit our website: camdencountybar.org