UCS 137-9 (10/2014)		(Office Use Only)		
In the Matter of Fee Di Arbitration between	ispute	Case Number:		
Client	,	NOTICE OF ARBITRATION AWARD		
	, Attorney			
Attached is the determination of the arbitrator(s) who heard the fee dispute between the above parties. This determination is final and binding on the parties, except that a party dissatisfied with this award may seek one of the following post award options within the time frames indicated:  1. Trial de novo: Either party may reject the decision of the arbitrator(s) and commence an action on the merits of the fee dispute in a court of competent jurisdiction within 30 days after the arbitration award has been mailed;				
NOTE: Trial <i>de novo</i> is not available to parties who have previously waived this right. See 22 NYCRR 137.2(c), 137.8(b) and Standards and Guidelines Section 6(B)(2) and Section 12(C).				
	OR			
2.	1 1	seek to vacate the award within 90 days after post award option is governed by CPLR		
the arbitration award bed payment does not occur, the court to be enforceable	comes binding on the parties the arbitration award must be ble. You have one year after and a proceeding in the appropriate to the pro-	om the award has been rendered will pay as if de novo review is not sought. However, if be confirmed and entered as a judgment of the date of delivery of the award to confirm priate court. Confirmation of arbitration		
For more information on these options, please see <a href="http://nycourts.gov/admin/feedispute/faqs.shtml">http://nycourts.gov/admin/feedispute/faqs.shtml</a> or contact your local program or an attorney. The local program may not give legal advice.				

Dated: \_\_\_\_\_, 20\_\_

## Tenth Judicial District Administrative Judge's Office

Tenth Judicial District Administrative Office Nassau County Fee Dispute Program 100 Supreme Court Drive, Room 186 Mineola, New York 11501

	e Matter of Fee Dispute	(Office Use Only)	
1101	tration between	Case Number:	
	,Client		
	and	HEARING INFORMATION	
	, Attorney.		
1.	Please confirm that the parties' names and conta changes below: No changes	ct information are accurate. Indicate any	
2.	Please indicate whether any of the following peo an "X" next to their name(s):	ple did not attend the hearing by placing	
	Client Attorney Arbitrator(s):  (name)		
3.	Client Attorney Arbitrator(s):		
3. 4.	Client Attorney Arbitrator(s):	No	

Please mail this form to the Part 137 Program Administrator at the address at the top of this form. Thank you for your essential service in the Part 137 Program!

## In the Matter of Fee Dispute Arbitration between

(Office Use Only)

	, Client	
	and	ARBITRATION AWARD
	, Attorney	AWARD
1.	The AMOUNT IN DISPUTE is:	\$
2.	The TOTAL of the AMOUNT IN DISPUTE to which the attorney is entitled is (including all costs and disbursements and amounts previously	
	paid by the client):	\$
3.	The AMOUNT of this total PREVIOUSLY PAID by the client is:	\$
4.	(a) The BALANCE DUE by the client to the	ne attorney is: \$
	-OR-	
State	(b) The AMOUNT TO BE REFUNDED between the of Reasons:	by the attorney is: \$
and po	AFFIRMATI ndersigned arbitrator(s), having been duly appointed pursuant t ursuant to any applicable Rule of the Chief Administrator, T ations, or the Agreement of the parties to the dispute re	to the Rules of <u>Local Program Name</u> , ritle 22, of the Official Compilations of Codes, Rules and esolved by this award, and having duly taken the oath
to CP	ding to the law and having duly heard the proofs and allege LR 7507, under the penalties of perjury, that the above award red in the above-captioned arbitration, duly executed by the under	d is a true, correct and complete statement of the award
	(Signatures of Arbitrator(s); print	t name below signatures)
Date	ed:	[Mail copy to each party]