

FEENEY & DIXON, L.L.C.

COUNSELLORS AT LAW

DAVID C. DIXON†
JOHN F. FEENEY
OF COUNSEL
†MEMBER NJ AND DC BAR

620 NEWARK POMPTON TURNPIKE, SUITE TWO
POMPTON PLAINS, NEW JERSEY 07444
(973) 839-5100 FAX (973) 839-4203
E-MAIL: LAWOFFICE@FEENEYDIXON.COM

CLIENT INFORMATION SHEET - INTAKE

Name(s): _____ Date: _____

Address: _____

Telephone No(s): _____ E-mail: _____

Social Security No(s): _____ Date of birth: _____
(last 4 digits only)

Company/Employer: _____

Company/Employer Address: _____

Company/Employer
Telephone No(s): _____ E-mail: _____

Brief description of matter(s):

Case Type:

<input type="checkbox"/> Real Estate (Residential, purchaser)	<input type="checkbox"/> Estate Administration/Probate
<input type="checkbox"/> Real Estate (Residential, seller)	<input type="checkbox"/> Business Formation
<input type="checkbox"/> Real Estate (Residential, refinance)	<input type="checkbox"/> Matrimonial, Plaintiff
<input type="checkbox"/> Real Estate (Commercial, purchaser)	<input type="checkbox"/> Matrimonial, Defendant
<input type="checkbox"/> Litigation, Civil/General, Plaintiff	<input type="checkbox"/> Domestic Violence, Plaintiff
<input type="checkbox"/> Litigation, Civil/General, Defendant	<input type="checkbox"/> Domestic Violence, Defendant
<input type="checkbox"/> Litigation, Civil/Collection, Plaintiff	<input type="checkbox"/> Criminal, Superior Court, Defendant
<input type="checkbox"/> Litigation, Civil/Collection, Defendant	<input type="checkbox"/> Criminal, Municipal Court, Defendant
<input type="checkbox"/> Landlord/Tenant, Landlord/Plaintiff	<input type="checkbox"/> Land Use, Developer/Applicant
<input type="checkbox"/> Landlord/Tenant, Tenant/Defendant	<input type="checkbox"/> Land Use, Objector/Other
<input type="checkbox"/> Wills, Trusts, Powers of Attorney and/or Estate Planning	<input type="checkbox"/> Other (Describe) _____
<input type="checkbox"/> Tax Appeal, Commercial	<input type="checkbox"/> Tax Appeal, Residential

Have you ever been represented by or consulted with this firm or its attorneys on any prior matter? Yes No
If yes, please describe the prior matter:

Have you, or any member of your family, ever been involved in any prior matter, in which this firm or its attorney(s) represented an adverse or opposing party? Yes No
If yes, please describe the prior matter:

Prospective Client Signature: _____
(Date)

Proposed method of payment: Cash Check Credit/Debit
Check - Acct. #: _____
Bank name: _____
Credit/Debit - Acct. #: _____**
SID# _____ Exp. Date: _____

DO NOT WRITE BELOW THIS LINE

FOR OFFICE USE ONLY

THE USE OF THIS FORM DOES NOT ESTABLISH AN ATTORNEY-CLIENT RELATIONSHIP, NOR SHALL IT BE DEEMED AN AGREEMENT TO PROVIDE LEGAL SERVICES.

PRIOR TO TAKING YOUR CASE, WE MUST CHECK FOR CONFLICTS, AND MEET WITH YOU TO DISCUSS YOUR INQUIRY AND THE TERMS OF OUR RETENTION.

NO ATTORNEY-CLIENT RELATIONSHIP WILL BE FORMED UNLESS AN AGREEMENT TO PROVIDE LEGAL SERVICES IS SIGNED BY BOTH ATTORNEY AND CLIENT. NO LEGAL ADVICE WILL BE PROVIDED UNLESS AND UNTIL WE ARE FORMALLY RETAINED