**AWARD OF THE LONG BEACH FEE ARBITRATION PROGRAM**

**PURSUANT TO STIPULATION OF PARTIES**

Arbitration No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In the matter of the arbitration between:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Petitioner

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Respondent

**INTRODUCTION**

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| This arbitration was assigned to the undersigned Panel Chair | 𝤿  | 𝤿  |
| This award is signed by the Program Chair, as the arbitration was not yet assigned to a Panel Chair. | 𝤿  | 𝤿  |
| The Petitioner was represented by counsel, [TYPE NAME HERE]. | 𝤿  | 𝤿  |
| The Respondent was represented by counsel, [TYPE NAME HERE]. | 𝤿  | 𝤿  |

The parties entered into a written stipulated award to resolve their dispute which is the subject of this arbitration, and submitted their stipulated award for incorporation in a binding fee arbitration award of this Program, AND GOOD CAUSE APPEARING THEREFOR:

**AWARD**

The STIPULATED AWARD attached hereto is incorporated herein by this reference, its terms and conditions are approved and made part of this binding award, and the parties are directed to perform its executory terms, all with the same force and effect as a binding award of this Program after an arbitration hearing.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

Arbitrator Name (Print) Arbitrator Name (Signature) Dated

OR

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

Program Chair (Print) Program Chair (Print) Dated

**REMINDER: DO NOT send the award to the parties.**

**Send the Award to the Arbitration Program Chair in WORD format by email. Page two of this document is for the parties to complete, arbitrators should not take any part in filling it out**.**STIPULATED AWARD**

1. The Parties agree that the total amount of fees, or costs, or both, that should have been charged in this matter are: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The client has paid: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The subtotal of fees still owed attorney or of any refund due client is: $\_\_\_\_\_\_\_\_\_\_\_

2. The Parties agree that pre-award interest

[ ] shall be awarded in the amount of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ] shall not be awarded

3. The Parties agree that the fee arbitration filing fee of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Was paid by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and shall be allocated:

Client: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Attorney: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. The Parties agree that the net amount due to attorney or to client is $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Accordingly, the Parties agree that the following payment shall be made:

1. Client, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ shall pay attorney, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ the sum

of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **OR**

 (b) Attorney, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ shall refund client, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ the sum

of $\_\_\_\_\_\_\_\_\_\_\_

The individual responsible attorney(s) is/are \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OR**

(c) Nothing further shall be paid by either attorney or client.

6. Payment terms, if any: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. The Parties have read and understand the terms and conditions of this agreement and intend to make this Stipulation For Arbitration Award **binding**.

8. If any party to this agreement is an entity the individual executing this agreement represents that he/she has full authority and consent to enter into this agreement on behalf of such entity.

9. This is intended to be a fully integrated agreement that may not be modified other than in a writing signed by all parties.

|  |  |  |
| --- | --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Petitioner(s) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature of Party  | \_\_\_\_\_\_\_\_\_Dated |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Respondent | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature of Party | \_\_\_\_\_\_\_\_\_Dated |