



RULES GOVERNING THE SPOKANE COUNTY BAR ASSOCIATION'S ONLINE LAWYER REFERRAL SERVICE

RULE 1

Spokane County Bar Association (SCBA) Member lawyers may participate for a fee in an online lawyer referral service which refers prospective clients, but only if the service and the member lawyers conform to the rules below. The Washington State Rules of Professional Conduct (RPC), including amendments, are adopted and incorporated by reference herein.

RULE 2

The SCBA Online Referral Service is open to all fee paying members licensed and eligible to practice in this state who maintain an office within the County, and who: (1) meet reasonable objectively determinable experience requirements established by the SCBA; (2) pay reasonable registration and membership fees; and (3) maintain in force a policy of errors and omissions insurance, in an amount at least equal to the minimum established by the Committee. Policy limits must be at least \$100,000/300,000.

RULE 4

The combined fees and expenses charged a prospective client by a member lawyer to whom the client is referred shall be reasonable and necessary. It is unreasonable if the fees and expenses exceed the total charges which the client would have incurred had no referral service been involved.

RULE 5

The SCBA Online Referral Service shall periodically survey client satisfaction with its operations and reserves the right to take appropriate remedial action with respect to client complaints against attorneys, the service, and its employees. The SCBA Online Referral Service shall establish and publish a protocol for admitting, suspending or removing lawyers from its roll of panelists. Any lawyer adversely affected by the decision of the service may appeal to the Committee.

RULE 6

The operation of these Rules and compliance with their provisions shall be supervised by a Committee to be appointed by the Spokane County Bar Association Board of Trustees. The Committee shall develop and promulgate rules, regulations, procedures and forms to discharge its obligations consistent with these Rules and subject to approval by the SCBA Board of Trustees. The Committee may submit to the Board of Trustees recommendations for modification of these Rules.

**SPOKANE COUNTY BAR ASSOCIATION
ONLINE LAWYER REFERRAL SERVICE
2019-2020 Application for Panel Membership**

1. Name: _____

2. Firm: _____ Phone: _____

3. Address: _____ D.O.B.: _____

4. Web site Address (URL) : _____

I will accept cases in the areas checked. I consider myself competent in such areas. **You may check no more than 5 numbered categories of the 46 listed below.** If you pay to be listed on the Plaintiff Personal Injury panel, you are entitled to 6 categories. You may check as many of the subcategories as you wish. Categories (2) & 21(a) are interchangeable as are (6) & (32) and (29) & (46). **Please submit professional photos to be used to mwardrop@spokanebar.org.**

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|--|---|---|
| <p>___ (1) ADMINISTRATIVE</p> <p>___ (a) Dept. of Licensing Issues</p> <p>___ (b) Miscellaneous</p> <p>___ (2) ADOPTIONS</p> <p>___ (3) AGRICULTURAL / LIVESTOCK</p> <p>___ (4) ANIMAL LAW</p> <p>___ (5) APPEALS</p> <p>___ (a) Civil</p> <p>___ (b) Criminal</p> <p>___ (c) Small Claims Appeals</p> <p>___ (d) Miscellaneous</p> <p>___ (6) ARBITRATION / MEDIATION</p> <p>___ (7) AVIATION</p> <p>___ (8) BANKRUPTCY</p> <p>___ (a) Personal, Ch. 7</p> <p>___ (b) Personal, Ch. 13</p> <p>___ (c) Business, Ch. 7</p> <p>___ (d) Business, Ch. 11</p> <p>___ (e) Creditors</p> <p>___ (f) Debtors</p> <p>___ (g) Miscellaneous</p> <p>___ (9) BUSINESS</p> <p>___ (a) Business Formation</p> <p>___ (b) Dissolve Business</p> <p>___ (c) Commercial Litigation</p> <p>___ (d) Corporations/Non-Profit</p> <p>___ (e) Franchises</p> <p>___ (f) Partnerships</p> <p>___ (g) Miscellaneous</p> <p>___ (10) CIVIL RIGHTS</p> | <p>___ (11) COLLABORATIVE PRACTICE</p> <p>___ (12) COLLECTIONS</p> <p>___ (a) Debtor</p> <p>___ (b) Creditor</p> <p>___ (c) Credit Reporting</p> <p>___ (d) Miscellaneous</p> <p>___ (13) CONSUMER PROTECTION</p> <p>___ (a) Home Improvement</p> <p>___ (b) Consumer Fraud</p> <p>___ (c) Lemon Law/Used Cars</p> <p>___ (d) General Consumer</p> <p>___ (e) Miscellaneous</p> <p>___ (14) CONSTRUCTION</p> <p>___ (15) CONTRACTS</p> <p>___ (16) CRIMINAL DEFENSE</p> <p>___ (a) Infractions/Traffic</p> <p>___ (b) DWI/DUI</p> <p>___ (c) Misdemeanors</p> <p>___ (d) Felonies</p> <p>___ (17) EDUCATION</p> <p>___ (a) Students</p> <p>___ (b) Teachers</p> <p>___ (c) Miscellaneous</p> <p>___ (18) ELDER LAW</p> <p>___ (19) EMPLOYMENT / LABOR</p> <p>___ (a) Employment Contracts</p> <p>___ (b) Employee/Employer Relations</p> <p>___ (c) Wrongful Termination</p> <p>___ (d) Discrimination/</p> | <p style="text-align: right;">Harassment</p> <p>___ (e) Miscellaneous</p> <p>___ (20) ENVIRONMENTAL</p> <p>___ (21) FAMILY LAW</p> <p>___ (a) Adoptions</p> <p>___ (i) Step-Parent Adoptions</p> <p>___ (b) Custody</p> <p>___ (c) Dissolution, Collaborative</p> <p>___ (d) Dissolution, General</p> <p>___ (e) Dissolution, Military</p> <p>___ (f) Guardianship</p> <p>___ (g) Legal Separation</p> <p>___ (h) Live-In Relationships</p> <p>___ (i) Name Change</p> <p>___ (j) Paternity</p> <p>___ (k) Pre-marital Agreements</p> <p>___ (l) Restraining Orders</p> <p>___ (m) Support</p> <p>___ (n) Visitation</p> <p>___ (22) GENERAL PRACTICE</p> <p>___ (23) HEALTH CARE</p> <p>___ (24) IMMIGRATION & NATURALIZATION</p> <p>___ (25) INSURANCE</p> <p>___ (a) Defense</p> <p>___ (b) Disability, Health, Life</p> <p>___ (c) Fire, Home, Property</p> <p>___ (d) Plaintiff</p> <p>___ (e) Miscellaneous</p> |
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|---|--|---|
| <input type="checkbox"/> (26) INTELLECTUAL PROPERTY | <input type="checkbox"/> (32) MEDIATION / ARBITRATION | <input type="checkbox"/> (39) S.S.I. / SOCIAL SECURITY DISABILITY |
| <input type="checkbox"/> (a) Copyrights | | |
| <input type="checkbox"/> (b) Computer Law | <input type="checkbox"/> (33) MILITARY | |
| <input type="checkbox"/> (c) Patents | | <input type="checkbox"/> (40) TAXATION |
| <input type="checkbox"/> (d) Piracy Issues | <input type="checkbox"/> (34) OIL & GAS | <input type="checkbox"/> (a) Audits/Litigation |
| <input type="checkbox"/> (e) Trademarks | | <input type="checkbox"/> (b) Personal |
| <input type="checkbox"/> (f) Miscellaneous | <input type="checkbox"/> (35) PERSONAL INJURY / NEGLIGENCE – PLAINTIFF | <input type="checkbox"/> (c) Business |
| | <input type="checkbox"/> (a) Assaults | <input type="checkbox"/> (d) Miscellaneous |
| <input type="checkbox"/> (27) JUVENILE | <input type="checkbox"/> (b) Auto Accident Injuries | <input type="checkbox"/> (41) UNEMPLOYMENT COMP. |
| <input type="checkbox"/> (a) Dependency/CPS | <input type="checkbox"/> (c) Fall Injuries | |
| <input type="checkbox"/> (b) Delinquency | <input type="checkbox"/> (d) Product Liability | <input type="checkbox"/> (42) VETERANS BENEFITS |
| <input type="checkbox"/> (c) Miscellaneous | <input type="checkbox"/> (e) Property Damage | |
| | <input type="checkbox"/> (f) Wrongful Death | <input type="checkbox"/> (43) WATER RIGHTS |
| <input type="checkbox"/> (28) LABOR | <input type="checkbox"/> (g) Dental Malpractice | |
| <input type="checkbox"/> (a) Labor Standards | <input type="checkbox"/> (h) Legal Malpractice | <input type="checkbox"/> (44) WILLS / ESTATE PLANNING / PROBATE |
| <input type="checkbox"/> (b) Union Rep./Coll. Barg. | <input type="checkbox"/> (i) Medical Malpractice | <input type="checkbox"/> (a) Wills |
| <input type="checkbox"/> (c) Employee/Union Relat. | <input type="checkbox"/> (j) Miscellaneous | <input type="checkbox"/> (b) Probate |
| <input type="checkbox"/> (d) Pensions | | <input type="checkbox"/> (c) Estate Planning |
| <input type="checkbox"/> (e) ERISA | <input type="checkbox"/> (36) PERSONAL INJURY / NEGLIGENCE - DEFENSE | <input type="checkbox"/> (d) Trusts |
| <input type="checkbox"/> (f) Miscellaneous | | <input type="checkbox"/> (e) Power of Attorney |
| <input type="checkbox"/> (29) LAND USE / ZONING | <input type="checkbox"/> (37) REAL ESTATE/PROPERTY | <input type="checkbox"/> (f) Complex Admin./Litigation |
| | <input type="checkbox"/> (a) Buy/Sell-Commercial | <input type="checkbox"/> (g) Conservatorship |
| <input type="checkbox"/> (30) LANDLORD/TENANT | <input type="checkbox"/> (b) Buy/Sell-Residential | <input type="checkbox"/> (h) Medicare/Medicaid |
| <input type="checkbox"/> (a) Tenants | <input type="checkbox"/> (c) Closings | <input type="checkbox"/> (i) Reduced Fee Wills-Seniors |
| <input type="checkbox"/> (b) Landlords | <input type="checkbox"/> (d) Easements, Land Use, Subdivisions, Zoning | <input type="checkbox"/> (j) Miscellaneous |
| <input type="checkbox"/> (c) Tenants, Commercial | <input type="checkbox"/> (e) Eminent Domain | <input type="checkbox"/> (45) WORKER'S COMP. |
| <input type="checkbox"/> (d) Landlords, Commercial | <input type="checkbox"/> (f) Foreclosures, Forfeitures | |
| <input type="checkbox"/> (e) Mobile Homes, Tenant | <input type="checkbox"/> (g) Litigation | <input type="checkbox"/> (46) ZONING/LAND USE |
| <input type="checkbox"/> (f) Mobile Homes, Landlord | <input type="checkbox"/> (h) Partnerships | |
| <input type="checkbox"/> (g) Tenant Groups | <input type="checkbox"/> (i) Miscellaneous | |
| <input type="checkbox"/> (h) Miscellaneous | | |
| <input type="checkbox"/> (31) MARITIME | <input type="checkbox"/> (38) SECURITIES | |

6. I recognize that continuing malpractice coverage with policy limits at least \$100,000/\$300,000 is required for panel membership and **have attached a copy of the declarations page as supplied by my malpractice insurance carrier.**
7. At the time of this application, has the Local Administrative Committee of the Washington State Bar Association or the Disciplinary Board of the Washington state Bar Association recommended that you be tried for violation of your duties as an attorney? [] NO [] YES
8. I hereby agree to indemnify and hold harmless the Spokane County Bar Association from all claims arising out of or resulting from my own negligent acts or omissions in the performance of legal services for the person referred and further resulting errors or omission from any and all claims arising from involuntary error which may result from the administration of this Online Lawyer Referral Service. Any awarded damages against SCBA Online Lawyer Referral Service shall be limited to refund of all panel application fees associated with participant's application.

CERTIFICATION

The undersigned hereby applies for registration on the panel of the Online Lawyer Referral Service of the Spokane County Bar Association. I certify that I am familiar with the Rules governing the Online Lawyer Referral Service and that I will abide by such rules and all such rules which may be promulgated by the Association, and agree to be bound thereby so long as I shall continue to be registered under the service. I will carry malpractice insurance; I recognize the Service as a means and opportunity whereby the legal profession can render better service to the public, and agree to set reasonable fees in matters referred to me and all ethical requirements in accordance with the Washington State Rules of Professional Conduct. I will not charge a prospective client referred by the OLRs fees to exceed the total charges that the client would have incurred had not the client been referred by the OLRs.

I understand that an **annual fee of one hundred eighty dollars (\$180.00) is required per attorney** and is valid from September 1, 2019 through August 31, 2020. I agree to pay this annual fee to participate on the Spokane County Bar Association's Online Lawyer Referral Service. **I also understand that if I desire to participate on the Plaintiff Torts/Negligence panel, an additional annual one hundred dollar (\$100.00) fee will be charged** listing me with the OLRs at the time application is made. In the event I withdraw my name from the panel at any time during the year, I understand my annual fee will not be reimbursed to me.

An attorney's participation in the SCBA Online Lawyer Referral Service is by invitation only to qualified lawyer members of the Association. Such participation is subject to the approval of the SCBA Board of Trustees and may be withheld and/or revoked at any time on good cause.

I certify that I meet the experience standards for each area of law for which I have applied and as set forth in the Rules Governing the SCBA Online Lawyer Referral Service, which is provided with this application.

DATED this _____ day of _____, 201____.

(Signature of applicant)

RETURN TO:

Spokane County Bar Association
Online Lawyer Referral Service
1116 West Broadway Avenue
4th Floor Annex, County Courthouse
Spokane, Washington 99260-0030