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| **Family Law Client Intake Form** | **Conflict Check?**  |

Please fill out this questionnaire. It is important that you answer each question fully because your attorney will use this information to prepare your case. Your responses to these questions will help to organize your case and allow our firm to better represent you. If a question does not apply to your particular situation, please indicate by marking the question “N/A”. Your answers are protected by confidentiality and by the attorney-client privilege, but please note that a legal consultation does not establish on ongoing attorney-client relationship and that neither the attorney nor you have any obligation to accept or offer any additional services. You are free to have the presence of a third party (or parties) present during your consultation, but ***please note that doing so constitutes your waiver of attorney-client privilege as to anything discussing during the consultation***, meaning that anything discussed could potentially be discoverable in litigation. **NOTE**: **There is a flat non-refundable fee of $250.00 for the initial, one-hour consultation.** If you have any questions about this fee, please discuss it with the attorney before beginning the consultation.

**I understand that a legal consultation does not establish an ongoing attorney-client relationship and that neither the attorney nor I have any obligation to accept or offer any additional services. I understand that the presence of a third party during this consultation constitutes a waiver of attorney-client privilege as to anything discussed during this consultation and that anything discussed could be potentially discoverable in litigation. I understand and agree that the firm charges a flat non-refundable fee of $250.00 for the initial, one-hour consultation. I agree to pay said fee before the start of the initial consultation. I understand that if a do not retain the attorney within 60 days of this consultation, a second consultation may be required.**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DATE PROSPECTIVE CLIENT SIGNATURE**

**Prospective Client Info**

FULL NAME:

DATE OF BIRTH: SSN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS:

 Street Number City State Zip County

How long in NC?: EMAIL ADDRESS:

CELL PHONE: ALTERNATE PHONE:

Okay to leave messages at these numbers?: **☐** Yes **☐** No

YOUR EMPLOYER:

POSITION: INCOME: (**circle one**: salary/hourly rate/other)

If self-employed, Company & Type of Business (LLC, Corp., etc):

REASON FOR YOUR VISIT TODAY:

HAVE YOU CONSULTED WITH OR RETAINED ANOTHER ATTORNEY? **☐** Yes **☐** No

IF YES, WHO?:

HOW DID YOU HEAR ABOUT US?

[ ] Google [ ] Avvo [ ] Yelp [ ] Findlaw [ ] Other Website:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ] Friend: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [ ] Attorney Referral \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [ ] I am a former client

**Opposing Party Info**

FULL NAME:

DATE OF BIRTH: SSN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS:

 Street Number City State Zip County

How long in NC?: EMAIL ADDRESS:

CELL PHONE: ALTERNATE PHONE:

EMPLOYER:

POSITION: INCOME: (**circle one**: salary/hourly rate/other)

STOCK OPTIONS, BONUSES, PAID FOR BENEFITS, ETC?:

If self-employed, Company & Type of Business (LLC, Corp., etc):

OPPOSING PARTY’S ATTORNEY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Marriage Information**

**(concerning the marriage out of which your present issues arise)**

MARRIAGE DATE: COUNTY/STATE MARRIED:

CURRENTLY SEPARATED? : **☐**Yes **☐**No DATE OF SEPARATION:

REASON FOR SEPARATING:

SEPARATION AGREEMENT? **☐**Yes **☐**No IF YES, DATE SIGNED:

If seeking a divorce, do you wish to resume your maiden name? **☐**Yes **☐**No

IF YES, PLEASE STATE FULL MAIDEN NAME:

**Children**

**(including those children not involved in the present issue)**

1) FULL NAME: DOB:

 AGE: SEX: FATHER: On Birth Certificate?

2) FULL NAME: DOB:

 AGE: SEX: FATHER: On Birth Certificate?

3) FULL NAME: DOB:

 AGE: SEX: FATHER: On Birth Certificate?

4) FULL NAME: DOB:

 AGE: SEX: FATHER: On Birth Certificate?

***Child Custody***

Is Child Custody in dispute?: ☐Yes ☐No If **yes**, please explain:

Do you have a current child custody order?: ☐Yes ☐No If **yes**, please answer the following:

Date: County: Terms:

Is the order being followed? ☐Yes ☐No If **no**, why?:

If there is **no** court Order (or if different than), what is the current physical custody schedule and for how long have you been operating under this schedule?:

***Child Support***

Is Child Support in dispute?: ☐Yes ☐No If **yes**, explain:

Do you have a current child support order?: ☐Yes ☐No If **yes**, please answer the following:

Date: County: Amount per month:

Are you receiving or paying?: Arrears amount:

If there is **no** court Order (or if different) but support is being paid via agreement, what are the terms and for how long have you been operating under this agreement?:

**Property Distribution**

**(assets, debts, inheritances, etc., that will need to be distributed pursuant to divorce/separation)**

***Marital Residence:***

Address:

 Street Number City State Zip

Who Left/Will be Leaving?: Do you [ ] RENT **OR** [ ] OWN? If you OWN:

Titled to: Year Purchased: Value: Mortgage Balance: Person(s) on Mortgage:

***Other Real Estate Owned by You and/or Your Spouse (include timeshares):***

 Titled To Property Address Market Value Mortgage Balance

1.

2.

3.

***Vehicles (include mobile homes if titled, motorcycles, ATV’s, boats, etc.):***

 Titled To Make/Model Market Value Loan Balance

1.

2.

3.

***Assets:***

Do you have: IRA? ☐ 401k? ☐ Pension? ☐ Estimated Balance:

Your spouse: IRA? ☐ 401k? ☐ Pension? ☐ Estimated Balance:

If you have investment accounts (stocks, etc.): Estimated Balance:

If your spouse has investment accounts: Estimated Balance:

Expected inheritance? To whom and what is the anticipated amount?:

Do you have any frozen or stored embryos or other genetic material? ☐Yes ☐No

Does your spouse possess any compromising or explicit photos or videos of you? ☐Yes ☐No

***Debts (include credit cards, student loans, personal loans, home equity lines, etc.):***

Account Name Approx. Balance Account Name Approx. Balance

**Other Case Info**

PLEASE CHECK ALL THAT APPLY:

 I have been served with a lawsuit. Date: .

 I want a separation agreement. Both parties agree on the terms [ ] OR we do not agree [ ].

 I want a restraining order. Reason: .

\_\_\_\_\_\_I want to pursue contempt for violation of a Court order.

ANYTHING ELSE YOU THINK WE SHOULD KNOW?

**FOR OFFICE USE ONLY**

**INTAKE ATTORNEY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**RETAINING FOR:**

***OR* NOT RETAINING TODAY B/C:**

**FEES: Non-ref. retainer: Trust deposit: Min. Trust:**