

APPENDIX FORM 9.12B

Petitioner No. _____ Div. _____

Versus _____, Louisiana

Defendant Court _____

NOTICE OF LIMITED APPEARANCE – NON-FAMILY LAW CASES

1. Attorney, _____ and Client, _____, have agreed that attorney will provide limited scope representation, pursuant to La. Dist. Ct. Rule 9.12, as follows:

2. Attorney will represent the client:

Limited to the following matters: _____

And further includes:

___ at the hearing on: _____, ___ and for any continuance of that hearing;
___ until submission of the order after hearing; and/or
___ other: _____

3. By signing this form, or a subsequent Certificate of Acknowledgement of Limited Appearance, client agrees that attorney may withdraw at the completion of the stated representation.

4. The attorney named above is “attorney of record” and available for service of documents only for those issues specifically checked above, and for all other matters, client/party must be served directly at the following address:

Client Name: _____
Street Address: _____, Apt. or Suite: _____
City, State, Zip: _____, _____

5. Attorney contact information:

Attorney Name: _____

Street Address: _____, Suite: _____
City, State, Zip: _____, _____
Phone: _____
Fax: _____
E-mail: _____

THE UNDERSIGNED HEREBY CERTIFY that this form sets forth the limited scope of representation agreed to between the undersigned attorney and client. If the client is not available to sign this agreement at time of filing, a copy bearing his/her signature shall be filed within ten (10) days of the initial filing of this Notice.

Attorney

Client/Party

Date

Date

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a copy of this pleading has been duly served on all counsel of record and/or self-represented parties via facsimile, e-mail, hand delivery, and/or by placing a copy of same in the United States Mail, postage prepaid, this _____ day of _____, _____.

Attorney