

QUESTIONNAIRE

Please answer this questionnaire carefully for an easier processing of your legal matter. The information you provide is handled with the strictest confidentiality.

Please let us know in advance against which person/company you require legal advice. This is necessary in order to avoid any potential conflict of interest.

Surname: _____ First name: _____
Birth name: _____ Nationality: _____
Marital status: _____ Date of birth: _____ Place of birth: _____
Company: _____
Street/No.: _____ Postcode/Place: _____
Phone number (private): _____ Mobile phone number: _____
Phone number (business): _____ Fax number: _____
Email - address: _____

Are you entitled to deduct input tax? Yes/ No

Your bank account:

Bank: _____
IBAN: _____
BIC: _____

Occupation: _____ Employer: _____

Legal expense insurance? Yes/ No

Insurance company: _____ Insurance number: _____

Claim number (if applicable): _____

Personal contribution? No/ Yes in the amount of _____ €

Information only: by post/ mail/ fax/ phone (private or business)

How did you find us?

- Existing client
- Recommendation by Mr./Ms. _____
- Via Internet
- Other

Please be advised that the lawyers' fees are calculated pursuant to the lawyers' compensation act on the basis of the object value, unless a fee agreement has already been expressly stated.

Place, Date:

Client: