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RECORDS REQUEST

Policy: In order to protect our client's confidential information and so that we meet standards set by the New York BAR and the Texas BAR, the following policies are in place:

(1) Clients need to verify their identity.

- a. The client must be able to verify his/her identity by presenting an original government-issued identification document. Acceptable ID: Driver's license issued by any state or U.S. territory; Passport U.S. or foreign; Foreign Cedula, Documento Único de Identidad (DUI), Documento Personal de Identificación (DPI), Documento Nacional de Identificación (DNI).

(2) Clients may request their file to be sent by:

- a. **In person:** the client must complete this form and sign it at our main office in Katy, TX.
- b. **Mail:** the client must complete this form, sign it, attach an ID copy and send it back to the following address: Alcozer Law Firm Attn: Records 25722 Kingsland Blvd Suite 104, Katy, TX 77494.
- c. **Email:** the client must complete this form, sign it, attach an ID copy and send it back to info@alcozer.com
- d. **Fax:** the client must complete this form, sign it, attach an ID copy and send it back to 1-866-550-4272.

(3) Clients can receive their file in one of the following ways below. They will then receive an invoice via email, with the option to pay their fees online. Once the fees are paid, their records will be processed.

- a. **In person:** the client will be notified the day the file will be ready for pick up. Please note that we need an original document to verify your identity and only the copy of the file will be given to the client. We will not release files to anyone other than the client.
- b. **Certified mail:** please specify the address to which the file will be sent. Please note that the client is responsible for the shipping cost which will be added to your account.
- c. **Email:** please specify the email address to which the file will be sent
- d. **Fax:** please let us know the fax number and where the file should be sent to.

(4) Fees: the fee is **\$6.00 for each 15 minutes of work**, and additional:

- a. **Paper records:** \$0.50 center per page + shipping costs
- b. **Fax Records:** \$0.50 cents per page
- c. **Electronic records:** \$0.30 cents per page

Special Rule: If another attorney is representing you, he/she may fill out this form on your behalf. We highly encourage other attorneys to send over a formal request on their firm letterhead. We also appreciate a signed G-28 but is not required.

Processing Time: For records prior to 2018, we require at least 5 business days to process your request. For all others, your request may be processed within 2 business days. This is an estimate of our processing times, please note the older the record, the longer it might take the firm to process the request. Older records at times are in secure storage.

**PLEASE FILL OUT THE RECORDS REQUEST FORM ON THE FOLLOWING
PAGE AND ATTACH A COPY OF YOUR ID**



RECORDS REQUEST FORM

Parties: The term “client” refers to you, the individual that signed an agreement with this law firm. The term “attorney” refers to any attorney working at Alcozer & Associates P.C., DBA Alcozer Law Firm.

Client’s Full Name

Date of Birth

Country or Origin

Alien Registration Number: A#

Address

Phone

Email

¿Have you retained a new attorney?

☐

If yes, please fill out the following:

Attorney’s name

Phone

Address

Email

Fax

I am requesting the following record (Mark with an “X”):

All records available

☐

Specific documents

☐

Please indicate the required documents:

Please send my records in the following manner: (Please be specific: Enter the person's name, full address, e-mail address or fax number):

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I hereby understand the record procedures, rules, and fees associated with this request. Please send me an invoice to the email listed above. If you have a new attorney we will also email your new attorney.

I hereby authorize the attorneys at Alcozer Law Firm to send over my records as requested above. I do not and will not hold the attorney liable for providing my records as requested. I understand the firm will send over the records as requested and changes to this form cannot be made after it has been processed.

I authorize the firm to send over my records as requested above. Signed today, on this

	day of		of	
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Signature of
Client:

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VERIFICATION:

Signed before me on
this

	day of		of	
--	--------	--	----	--

Notary Public:

If notary is not available, have a witness sign and include both a copy of your ID and the witness's ID.

Witness:

--

Date:

--

Signature of the
Witness

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