

ALCOZER LAW FIRM 25722 Kingsland Blvd. Suite 104 Katy, TX 77494 1980 Post Oak Blvd Ste 100 Houston, TX 77056 276 Fifth Ave. Suite 704 New York, NY 10001 Ph: 281.377.8070 • Fax: 1.866.550.4272 • www.alcozerlaw.com

INSTRUCTIONS TO REQUEST RECORDS

Applicable policies: The following policies shall apply for the protection of the confidential information of our clients and to comply with the standards established by the New York State BAR Association and the State BAR of Texas:

- 1. Clients need to verify their identity.
 - The client or the new attorney are the only ones authorized to file a records request. Relatives, friends, or acquaintances may not file a request for a client's records on his/her behalf.
 - The client must be capable of verifying his/her identity in person, producing an original identification document issued by the government. Acceptable forms of identification: Driving license issued by any State or territory of the United States, United States or foreign passport, foreign ID documents, Unique Identity Document (DUI), Personal Identification Document (DPI), or National Identification Document (DNI). If your request is not filled in in person in our office, you must take the request before a notary public when signing.
 - If the request is performed by an attorney, the G-28 document (Representation of New Client) must be attached, and the request may be filed using their own letterhead.

2. Clients may request their files as follows:

- In Person: The client must fill in this form and sign it in our main offices in Katy, TX. It is not necessary to sign this form before a notary public.
- **By mail:** The client must fill in this form, sign it before a notary public, attach a copy of the identity document, and mail it to the following address:
 - Alcozer Law Firm
 - Attn: Records
 - 25722 Kingsland Blvd. Suite 104
 - Katy, TX 77494
- **Email:** The client must fill in this form, sign it before a notary public, attach a copy of the identity document, and send it to filing@alcozer.com
- **Fax:** The client must fill in this form, sign it before a notary public, attach a copy of the identity document, and fax it to 1-866-550-4272

3. Clients may receive their files in a variety of ways. Subsequently, you will receive an invoice via email with the option to pay for your fees online or over the phone. Once the fees are paid, your records will be processed and submitted:

- In Person: Keep in mind that we need an original document to verify your identity and a copy of the file will only be submitted to the client. We do not hand over files to a person other than the client. Files must be picked up only at our main office in Katy, TX.
- **Mail:** The copy of your file will be delivered to the address included in your request. Keep in mind that the client is responsible for the shipping cost, which will be added to your bill.
- Email: A copy of your file will be sent to the designated email address.
- Fax: A copy of your file will be sent to the fax number indicated in the request.

4. The fees for your records request are as follows:

- Processing cost of \$40.00
- Documentation cost, depending on the type of file:
 - Records on paper: \$0.50 per page.
 - Fax records: \$0.90 per page.
 - Electronic records: \$0.30 per page.
 - \$10.00 shipping cost if your file is sent by mail.
- If your attorney files this request, no fee shall apply unless the attorney requests for the record to be shipped by mail. The processing and delivery by mail costs for an attorney are \$30.00.

5. The processing time is 5 business days after the request is received with payment. If we are unable to process your request within this period for any reason, we will notify you of the new delivery date to you.

PLEASE FILL IN THE RECORDS REQUEST FORM ON THE FOLLOWING PAGE AND ATTACH A COPY OF YOUR IDENTITY DOCUMENT



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RECORDS REQUEST FORM

PERSONAL DETAILS			
Name of Client			
Date of Birth		Country of Birth	
Address			
Phone No.		Email	
Type of Record	All Records Specific Docume	nts	
For "Specific Documents", write down which documents you require			
Delivery method	 Email Mail Fax I will collect them 	in person	
If you selected Email, Mail, or Fax, write down your email, full address, or fax number where your request will be sent			
If you are an attorney and are filing this request, please write down your name, the address of your firm, and your office phone number			

I authorize the attorneys of Alcozer Law Firm to send my records as requested above. The attorney is not and shall not be held responsible for providing my records as requested. I acknowledge that the firm will submit the records as requested and that this form may not be modified once it has been processed.

SIGNED BEFORE A NOTARY PUBLIC

Signature of Client	-	Date
FOR NOTARY PUBLIC USE ONLY		
STATE OF:	COUNTY OF:	
Subscribe and sworn on to (before) me on t	his: day of	202
My commission expires on,		NOTARY SEAL
X	_Notary Public	