

ULB Enrollment Package

Step 1:

Review this Detailed Summary of Plan Services ("PLAN AGREEMENT") which describes the legal services provided for no-additional-charge, legal services provided at discounts, enhanced special coverage and certain exclusions.

Step 2:

Complete the appropriate Enrollment Form – Payroll Deduction or Credit Card/Direct Billing. Make sure to select your law firm from the Network of Law Firms.

Step 3:

Detach the completed Enrollment Form and return it to your H.R. Department for Payroll Deduction. If electing the Credit Card/Direct Billing payment method, please mail or fax the form directly to United Legal Benefits.



United Legal Benefits, LLC

30 E. Padonia Road, Suite 304

Timonium, Maryland 21093

Tel: 410.628.1110

Toll Free: 800.546.1602

Fax: 410.628.0166

Email: info@unitedlegalbenefits.com

Website: www.unitedlegalbenefits.com

DETAILED SUMMARY OF PLAN SERVICES

Service Description

Charge to Members

I. INCLUDED IN BASIC FEE

A. General Advice and Consultation

Unlimited use of telephone consultation in ALL areas of the law. If appropriate, in office consultation, as jointly agreed to by client and attorney. These services can include, but are not limited to:

1. Traffic Violations
2. I.D. Theft/Fraud
3. Family law/support/custody
4. HIPAA Laws
5. Consumer/Seller Relations
6. Bankruptcy
7. Wills, simple estate planning and administration
8. Civil matters as a Plaintiff or Defendant
9. Adoption and guardianships
10. Purchase and/or sale of non-commercial real estate
11. Insurance matters
12. Landlord/tenant matters (as tenant only)
13. Criminal and juvenile matters
14. Personal Injury

B. Review and Explanation of any Legal Document

Up to 10 pages per incident. This includes, but is not limited to:

1. Loan and mortgage agreements
2. Insurance documents
3. Terms of sale
4. Lease and/or purchase agreements

N
O

A
D
D
I
T
I
O
N
A
L

C
H
A
R
G
E

DETAILED SUMMARY OF PLAN SERVICES

I. INCLUDED IN BASIC FEE

C. Document Preparation

1. Simple wills which could include:
 - a. Guardianship provisions
 - b. Simple trusts for minor children of the member only
2. Specific or general powers of attorney which would include:
 - a. General durable power of attorney (i.e. for a spouse or child acting on behalf of the parent)
 - b. The typical "vacation power of attorney" for supervision of minor children
 - c. An advance directive or medical power of attorney, "including living will provisions"
3. Documents permitting the sale or purchase of property or other specific actions
4. Simple deed transfers – between family members, where no money is exchanged
5. Affidavits and bills-of-sale
6. Promissory notes
7. Uncontested divorces* - where either a written agreement already exists or there are no minor children or assets to be decided.
(*In Virginia, this is a discounted fee matter.)
8. Uncontested and recommended adoptions
9. Uncontested name changes
10. Letters and follow-up telephone calls on the member's behalf in a consumer, insurance, landlord/tenant or other legal matter.
Coverage includes up to three (3) letters or telephone calls per legal matter.

N
O

A
D
D
I
T
I
O
N
A
L

C
H
A
R
G
E

II. SET FEE - PERCENTAGE DISCOUNTED MATTERS

In certain areas of the law, many attorneys establish a set fee for representation. The fee is set based on the nature and individual circumstances of the matter. After an initial review at no additional charge to the member, the plan attorney will establish a set fee for handling such matter. The Plan provides a percentage discount from the attorney's set-fee services.

A. Criminal and Traffic Related Matters

For matter not otherwise covered in the "No Additional Charge" section including:

- | | |
|--|--------------------|
| 1. Traffic Court representation – For first time DUI/DWI – | Maximum \$1,000.00 |
| 2. District Court representation | 30% Discount |
| 3. Circuit Court representation | 30% Discount |
| 4. Juvenile Court representation | 30% Discount |

B. Bankruptcy

In all matters relating to the filing of bankruptcy relating to the member individually (including spouse)

30% Discount

C. Personal Injury

In all non-work related matters relating to personal injury as a result of a motor vehicle accident, product liability, medical or dental malpractice, where the fee is determined on a contingency basis against percentage of the amount recovered.

- | | |
|--|---------------------|
| 1. If matter is settled without filing suit | 25% Contingency fee |
| 2. If matter is settled after the filing of the suit | 33% Contingency fee |

D. Other Matters

In all other matters where attorney representation would be based upon a set fee.

30% Discount

III. REDUCED HOURLY RATE

For the following legal services which are traditionally charged on an hourly basis, a minimum discount of 25% is provided by the plan attorney.

A. Consumer Matters

Representation over and above the "No Additional Charge" benefit and more than small claims ceilings.

B. Civil Litigation

Representation where the member is Plaintiff or Defendant at District Court or Circuit Court level and where the amount in controversy exceeds the limit of small claims (presently \$2,500.00)

C. Adoptions

Not classified as "simple or uncontested".

D. Real Estate Services

Representation over and above the "No Additional Charge" benefit including negotiation and drafting of contracts of sale

E. Insurance Matters

Not otherwise covered

F. Landlord/Tenant Matters

Not otherwise covered

G. Family Law

Not otherwise covered

1. Contested Divorces including:
 - a. Settlement agreements
 - b. Issues of custody, visitation and support
 - c. Distribution of marital property
 - d. All other related matters including litigation at Masters or Trial level

H. All Other Matters

Not previously mentioned or otherwise excluded.

**Hourly
Rate
Discounted
25%**

IV. MATTERS OUTSIDE THE LOCAL COVERED AREA

Outside of a 40 mile radius from the Plan Attorney, or outside the covered area, referrals will be made by the Plan Attorney or Plan Administrator.

**Discounted
Hourly Rate**

- *The annual premium for ULB Membership is less than the average cost of consultation with an attorney for one hour.*
- *No waiting periods – No claim forms – No deductables – No co-pays.*
- *ULB Members receive membership cards which include the contact information for their chosen law firm. Upon receipt, members contact their attorney directly for all legal needs. All legal matters are confidential between client & attorney.*



ENHANCED SPECIAL COVERAGE

- A. Pre-Existing Legal Matters** - Matters requiring legal services that originate prior to the effective date of the Member Agreement that involve either (a) the commencement of any legal action or proceedings by or against the Member or (b) the prior retention by the Member of the services of another attorney. This coverage is subject to participating attorney acceptance based on all factors.
- B. Commercial or Business Activities** - The service coverage is intended only for personal legal services. However, your Plan Attorney may be able to assist you with commercial or business venture legal needs. Any such arrangements are negotiated directly with the Attorney firm.

EXCLUSIONS

Some matters are not covered by the benefits provided by the Plan. These exclusions are:

- A. Controversies With Your Employer or Plan Administrator** - Any legal issue involving United Legal Benefits, parties to the ULB Plan, the Plan Administrator, its Officers, Directors, Consultants or Employees, or any adversary relationship between the parties or implied parties to this Contract, including but not limited to: Plan Members, the Plan Administrator; Attorneys; General Agents; any endorsing, purchasing or sponsoring Group, Association or Employer; or any combination thereof.
- B. All Non-Attorney Costs** - Includes: Filing fees, court costs, expert or witness fees, court reporters or transcript related costs. Filing expenses including but not limited to telephone, facsimile, copying or reproduction of any kind, postage and other incidentals. Fines, restitution and costs that members are directed by a Court to pay. Production of exhibits.
- C. Appeals** - Such as any appeal to the Court of Appeals or the Court of Special Appeals of the State of Maryland.
- D. Frivolous Matters** - All matters that, in the opinion of the Plan Attorney, are frivolous in nature or objective. Any case, matter or requested service which is determined by the Plan Attorney to lack sufficient merit to warrant pursuit, or which the Plan Attorney determines has been raised an inordinate or unreasonable number of times without change of circumstances.
- E. Highly Specialized Legal Matters** - Includes, but not limited to: admiralty; labor, environmental and water laws; federal tax laws; class actions; defendant workers compensation; SEC; federal crimes involving interstate acts; estate administration; intellectual property matters including patent, copyright, trademark and computer alterations.
- F. Preparation and/or Filing of Tax Returns** - Preparation and filing tax returns, tax law issues, securities law issues, appellate court proceedings, removals, appeals, trials de novo, felonies, and Federal Court proceedings.
- G. Covered Member** - In any matter where the member and any covered family member have adverse interests, only the member is entitled to representation. The adverse family member will not be entitled to benefits unless all parties involved, including the member and family member, have provided the Plan and all Plan Attorneys providing service with written consent to represent multiple parties.



United Legal Benefits, LLC

30 E. Padonia Road, Suite 304, Timonium, Maryland 21093
Tel: 410.628.1110 • Toll Free: 800.546.1602 • Fax: 410.628.0166
Email: info@unitedlegalbenefits.com
Website: www.unitedlegalbenefits.com

ENROLLMENT APPLICATION

Payroll Deduction

EMPLOYER/GROUP SOCIAL SECURITY #
LAST NAME FIRST NAME INIT.
ADDRESS PHONE (home) (work)
BIRTH DATE SEX
EMAIL
SPOUSE (full name) DATE OF BIRTH
DEPENDENT CHILDREN
(1) Date of Birth (3) Date of Birth
(2) Date of Birth (4) Date of Birth

I hereby apply for enrollment in the UNITED LEGAL BENEFITS ("ULB") legal services plan. I have received a copy of the Plan Agreement ("Agreement") and understand the coverages, exclusions, limitations, and other provisions of the plan.

I understand and agree that the Agreement shall be effective upon the acceptance of this application (the "Commencement Date"). Through my company's payroll deduction program, I agree to pay the monthly fee for twelve (12) months and I understand that I am obligated to be a member of ULB for a minimum of 12 months.

I understand and agree that if the Agreement is canceled prior to the one-year anniversary of the Commencement Date for non-payment, I will be liable to ULB for the balance of monthly fees due for the remainder of the twelve (12) month period. ULB shall be entitled to reasonable attorneys' fees and/or collection expenses if required. Renewal of coverage following termination is subject to a twelve (12) month waiting period.

I understand that payment is due in advance and that if ULB does not receive payment within ten (10) days from the due date, ULB has the right to cancel the Agreement and shall have no further obligations to me.

I represent that all of the information furnished by me is true and correct and acknowledge that any pre-existing litigation, court proceedings, or other legal actions by or against any person covered by the Agreement shall not be covered, except as expressly provided in the Agreement.

This Agreement shall automatically renew annually on the anniversary of the Commencement Date unless ULB is notified in writing thirty (30) days prior to any such date.

MONTHLY FEE \$19.50

PAYROLL DEDUCTION - AGREEMENT ACCEPTANCE:

Accept - I hereby accept this Agreement and authorize my employer to process payroll deductions for my enrollment.

Signature Date

Effective date of coverage Law Firm (Law firm must be in same state as residence)

ENROLLMENT APPLICATION

Direct Billing or Credit Card

EMPLOYER/GROUP _____ SOCIAL SECURITY # _____

LAST NAME _____ FIRST NAME _____ INIT. _____

ADDRESS _____ PHONE (home) _____ (work) _____

_____ BIRTH DATE _____ SEX _____

EMAIL _____

SPOUSE (full name) _____ DATE OF BIRTH _____

DEPENDENT CHILDREN

(1) _____ Date of Birth _____ (3) _____ Date of Birth _____

(2) _____ Date of Birth _____ (4) _____ Date of Birth _____

I hereby apply for enrollment in the **UNITED LEGAL BENEFITS** ("ULB") legal services plan. I have received a copy of the Plan Agreement ("Agreement") and understand the coverages, exclusions, limitations, and other provisions of the plan.

I understand and agree that the Agreement shall be effective upon this acceptance of this application (the "Commencement Date"). Through my credit card or direct billing, **I agree to pay the monthly fee for twelve (12) months and I understand that I am obligated to be a member of the ULB Plan for a minimum of 12 months.**

I understand and agree that if the Agreement is canceled prior to the one-year anniversary of the Commencement Date for any reason, I will be liable to ULB for the balance of monthly fees due for the remainder of the twelve (12) month period. ULB shall be entitled to reasonable attorneys' fees and/or collection expenses to enforce the Agreement. **Renewal of coverage following termination is subject to a twelve (12) month waiting period.**

I understand that payment is due in advance and that if ULB does not receive payment within ten (10) days from the due date, ULB has the right to cancel the Agreement and shall have no further obligations to me.

I represent that all of the information furnished by me is true and correct and acknowledge that any pre-existing litigation, court proceedings, or other legal actions by or against any person covered by the Agreement shall not be covered, except as expressly provided in the Agreement.

This Agreement shall automatically renew annually on the anniversary of the Commencement Date unless ULB is notified in writing thirty (30) days prior to any such date.

MONTHLY FEE: \$19.50

Law Firm: _____
 (Law firm must be in same state as residence)

Please refer to the enclosed Network of Law Firms to select your legal services provider. The current list also may be found at the ULB website - www.unit-edlegalbenefits.com

DIRECT BILLING - AGREEMENT ACCEPTANCE Quarterly Annual

I hereby accept this Agreement and agree to pay my fees upon receipt of ULB invoices.

Signature _____ Date _____

CREDIT CARD PAYMENT - AGREEMENT ACCEPTANCE VISA MASTERCARD

I hereby accept this Agreement and authorize United Legal Benefits to charge my credit card **QUARTERLY FEES** in accordance with this agreement.

CARD NUMBER _____ EXP. DATE _____

Signature _____ Date _____