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THIS FORM MAY ONLY BE USED IF AUTHORIZED IN A SUBCHAPTER V CASE.

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF MARYLAND
at Baltimore**

In re: _____,
Debtor.

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* Case No. 20-_____-XXX
* Chapter 11 (Subchapter V)
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* * * * *

**APPLICATION FOR COMPENSATION IN A CASE UNDER
SUBCHAPTER V OF CHAPTER 11**

[Insert name of trustee, counsel, or other professional] (the “Applicant”), hereby requests entry of an order approving compensation and reimbursement of expenses incurred on behalf of the Debtor in this case under Subchapter V of Chapter 11 of Title 11 of the United States Code (the “Bankruptcy Code”). By this Application, Applicant requests that the Court allow an administrative claim for fees of \$_____ and expenses of \$_____. Applicant submits this application pursuant to § 330 and § 503 of the Bankruptcy Code and Federal Rule of Bankruptcy Procedure 2016, and states as follows:

1. Date petition filed: _____
2. Date plan confirmed: _____
3. The Court authorized employment of the Applicant by an Order entered in this case on _____, 2020. [or, as applicable] [The Applicant was appointed by the U.S. Trustee to serve as the Subchapter V Trustee in this case on _____, 2020.]
4. Amount of fees and expenses previously approved:
 - a. Fees: \$_____

- b. Expenses: \$ _____
5. Amounts of fees and expenses received to date:
- a. Fees: \$ _____
- b. Expenses: \$ _____
6. Time period covered by this Application: **[Beginning date to ending date.]**
7. Fees requested in this Application: \$ _____
- a. Partner: \$ _____ x _____ hours = \$ _____
- b. Associate: \$ _____ x _____ hours = \$ _____
- c. Other: \$ _____ x _____ hours = \$ _____
8. Total hours in this Application: _____
9. Total expenses requested in this Application: \$ _____
10. Total fees and expenses requested: \$ _____
11. A brief billing statement is attached as Exhibit A.
12. Brief description of services: **[insert summary by task of work performed – the court encourages use of descriptions of 250 words or less].**
13. Applicant hereby affirms to the Court that the fees and expenses requested by this Application are (i) for actual, reasonable, and necessary services rendered by the Applicant, (ii) based upon customary fees charged and generally approved by this Court for services of this nature provided by comparably skilled professionals, and (iii) consistent with Part C (Reimbursement of Disbursements and Expenses) of Appendix D to the Local Bankruptcy Rules.
14. Applicant submits that this Application satisfies the lodestar formula and factors set forth in § 330(a) of the Bankruptcy Code and in *Johnson v. Georgia Highway Express, Inc.*, 488 F.2d 714 (5th Cir. 1974) (as adopted by the Fourth Circuit in *Barber v. Kimbrells, Inc.*, 577 F.2d 216, 226 (4th Cir. 1978)).
15. No agreement or understanding exists between the Applicant and any other person for the division or sharing of the compensation or expenses that are the subject of this Application.
16. Use of this short form fee application was authorized for this case by the Court's Initial Scheduling Order in this case entered on _____, 2020.

WHEREFORE, the Applicant prays that the Court enter an Order approving the compensation and reimbursement of expenses as sought in this Application as an allowed administrative expense priority claim.

Dated: _____, 2020.

[Name of Applicant]

[Firm Name]

[Address]

[Email Address]

[Telephone Number]

[_____ for _____]

CERTIFICATE OF SERVICE

[insert certificate in accordance with Local Bankruptcy Rule 9013-4]