

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

at _____

IN RE:

Debtor

Case No. _____

Chapter _____

APPLICATION FOR SUPPLEMENTAL ALLOWANCE OF ATTORNEY'S FEES

NOW COMES _____, counsel to the debtor, (hereafter "Applicant") who makes this request for the allowance of attorney's fees for services rendered for the benefit of the debtor and the bankruptcy estate, and in support thereof states as follows:

1. Applicant has served as counsel to the debtor throughout the pendency of the chapter 13 proceedings.
2. The fees sought in this application result from services rendered for or on behalf of the debtor.
3. The fees sought to be paid to Applicant result from services rendered or required to be rendered for a matter which was not contemplated or included in the initial retainer agreement as evidenced by Federal Bankruptcy Rule 2016(b) Disclosure Statement filed at the beginning of this case.
4. The services for which the additional fees are now sought by Applicant are described in the attached Supplemental Federal Bankruptcy Rule 2016(b) Disclosure Statement, which has been filed with the court and is included herein by reference.
5. The services for which the additional fees are now sought by Applicant are reasonable and necessary services that benefit the estate for the following reasons:

6. In support of this Application, Applicant has attached relevant time records that identify the professionals who worked on this case, their hourly rates, the tasks performed, and the amount of time spent on each such task.

7. Prior to the filing of this Application, Applicant has been paid a total of \$_____ in fees and \$_____ in expenses in this case. Of those amounts, Applicant has received \$_____ in fees and \$_____ in expenses in distributions from the Trustee and \$_____ in fees and \$_____ in expenses in payments from the debtor or on debtor's behalf.
8. Applicant respectfully submits and hereby affirms to the court that the fees and costs requested by this application were both reasonable and necessary.
9. Further, that the fees charged for the services described are reasonable based upon the customary fees charged and generally approved by this court for services of this nature provided by comparably skilled professionals.
10. No agreement or understanding exists between Applicant and any other person for the division or sharing of compensation for services rendered or costs advanced in connection with Applicant's representation of the debtor.
11. The debtor has requested that the services be provided by counsel and that this court allow the payment of the requested attorney's fees and, if necessary, approve the payment of the fees as an administrative expense through the Chapter 13 Plan.
12. Applicant avers the approval of the requested fees:
 - will not affect distribution to creditors under the plan
 - will affect distribution to creditors under the plan in the following manner:

WHEREFORE, Applicant prays that this court approve the attorney's fees and costs prayed for herein in the amount of \$_____, to be paid by the debtor or to be paid by the Chapter 13 Trustee as an administrative expense through the Chapter 13 Plan.

Respectfully submitted,

/s/ _____
 Attorney, Esquire
 Firm, LLC
 Address
 Address
 Address
 Telephone
 Telephone No. _____

CERTIFICATE OF SERVICE

I hereby certify that on the _____ day of _____, 20__, I reviewed the court’s CM/ECF system and it reports that an electronic copy of the Notice of Application for Supplemental Allowance of Attorney’s Fees will be served electronically by the court’s CM/ECF system on the following:

Name of Trustee, Chapter 13

Name of Attorney

Name of Attorney

I hereby further certify that on the _____ day of _____, 20__, a copy of the Notice of Application for Supplemental Allowance of Attorney’s Fees was also mailed first class, postage prepaid to:

Name of Party
Address of Party
City, State Zip

Name of Party
Address of Party
City, State Zip

Name of Party
Address of Party
City, State Zip

Signature _____
[Type or print your name]