**NSW Government Legal Services Panel**

**[Agency Name]**

**LEGAL SERVICES ORDER**

Where you have provided an estimate of fees and disbursements, this has been included below. If you have not yet provided an estimate, please do so and proceed with the work once we have confirmed it is acceptable.

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| **Legal Services Order Client Ref No:** |  |
| **Service Provider Name:** |  |
| **Client:** |  |
| **NSW Government Cluster Name:** |  |

| 1. **SERVICES** | |
| --- | --- |
| **Matter name** | |
| **Scope of engagement** | |
| **Delivery timeframe** | |
| Sub-Panel |  |
| Area of Law |  |
| Expense Type **(mandatory field)** | OPEX  CAPEX |
| Advice  Transaction  Litigation | |

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| 1. **FEES** | |
| Fixed fee/price |  |
| Fee estimate |  |
| Specific expenses and disbursements authorised by TfNSW (under clause 9.3 of the Panel Deed) |  |
| Cap on expenses and disbursements |  |

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| 1. **SPECIAL TERMS** | |
| Special Terms (if any) |  |
| 1. **CLIENT’S REPRESENTATIVE** | |
| Client’s Representative | Internal Lawyer:  Email: [NAME]@[agency].nsw.gov.au  Mobile: [NUMBER] |
| 1. **INVOICING REQUIREMENTS** | |
| [Invoicing Requirements]  If costs will exceed initial estimate, please send revised estimate **before exceeding** to ensure prompt payment | |

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| 1. **PANEL DEED CONDITIONS APPLY** |
| Except as expressly provided above, any Legal Services Contract between the parties concerning this matter are governed by the terms and conditions of the Panel Deed, including the Rates specified in the Fee Schedule. |

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| **ACKNOWLEDGEMENT**  The Service Provider has no actual, potential, perceived or apparent conflict of interest as defined in the Panel Deed, except as disclosed to the Client, in providing the services requested.  Signed on behalf of the Service Provider by:  Signature  Name  Date:  **Please return the Legal Services Order to the Client’s Representative** |