**UNITED STATES BANKRUPTCY COURT**

**NORTHERN DISTRICT OF CALIFORNIA**

|  |  |  |
| --- | --- | --- |
| In re  [Debtor]    Debtor. | )  )  )  )  )  )  )  )  )  ) | Case No.  Chapter 13  Date:  Time: |

**[SUPPLEMENTAL] APPLICATION FOR COMPENSATION [SHORT FORM]**

[Insert name of counsel/ law firm], counsel for Debtor(s), requests an Order Approving Attorneys’ Fees and Costs incurred on behalf of Debtor to date. By this application, counsel requests that the Court allow an administrative claim for attorneys’ fees of $[Fees requested in application] and costs of $[Costs requested in application]. Counsel submits this application pursuant to 11 U.S.C. §§ 330 and 503 and Federal Rule of Bankruptcy Procedure 2016 and in accordance with the Rights and Responsibilities of Chapter 13 Debtors and Their Attorneys:

1. Date petition filed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Date plan confirmed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Amount of fees approved at confirmation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Subsequent fee application(s) filed: [Yes or No]
   1. If yes: Date approved: \_\_\_\_\_\_\_\_ Amount approved: \_\_\_\_\_\_\_\_
   2. [Insert additional lines if needed.]
5. Amounts of fees and costs received to date:

Fees: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Costs: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Time period covered by this application: [Beginning date to ending date]
2. Total fees requested: $\_\_\_\_\_\_\_\_\_
   1. Attorney: $\_\_\_\_\_ x \_\_\_\_\_\_ hours = $\_\_\_\_\_\_\_\_\_
   2. Assoc. attorney: $\_\_\_\_\_ x \_\_\_\_\_\_ hours = $\_\_\_\_\_\_\_\_\_
   3. Legal Assistant: $\_\_\_\_\_ x \_\_\_\_\_\_ hours = $\_\_\_\_\_\_\_\_\_

[Omit any categories that are not applicable.]

1. Total hours in this Application: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Amount included for appearance at hearing on this Application: \_\_\_\_\_\_\_\_\_\_\_

[Phone appearances are allowed.]

1. Total costs requested in Application: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Total fees and costs requested: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

A detailed billing statement is attached as Exhibit A.

Brief Description of Services:

[Summary of work performed and/or services warranting additional fees drafted by applicant.]

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Attorney for Debtor