

# **Kristoffer A. Diel, AMS® #870, CMI-1® #77**

Marine Surveying, Investigations & Consulting

**P.O. Box 636, Mandeville, La 70470-0636**

**Phone (504)-236-8151**

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## **Marine Surveying Consulting Service Retainer Agreement**

This signed agreement confirms that Kristoffer A. Diel, AMS® has been retained by the undersigned to provide marine surveying, site investigation, accident reconstruction, and/or factual investigation services in the following matter:

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The undersigned hereby acknowledges that he or she has the authority to retain Kristoffer A. Diel, AMS(R) to provide the aforementioned services and this retention has been made with the full consent of his or her law firm, company or client.

The nature and scope of the services to be provided by KRISTOFFER A. DIEL, AMS® shall be agreed upon between the parties prior to the acceptance of the assignment commencement of any work by KRISTOFFER A. DIEL, AMS®. All services provided by KRISTOFFER A. DIEL, AMS® shall be provided on a fee and expense basis in accordance with the rate schedule in effect on the date of execution of this document, a copy of which is attached.

The undersigned, as a duly authorized representative of the firm, guarantees payments of all fees and expenses for the services to be provided by KRISTOFFER A. DIEL, AMS®. The undersigned further acknowledges that payment shall be made in a timely manner in accordance with the following terms and conditions:

1. An initial retainer fee of \$1,000.00 will be due immediately with this signed agreement from each client. The retainer fee and this signed agreement should be submitted to KRISTOFFER A. DIEL, AMS® at the office in Slidell, LA promptly, in order that the work might begin on this matter. This retainer will be held and applied only to the final invoice issued to this specific file. Any balance of the retainer left after the final invoice is paid will be refunded.
2. KRISTOFFER A. DIEL, AMS® will submit to the undersigned client or other authorized representative service invoices on or about the end of each calendar month. All service invoices are due and payable immediately upon receipt.
3. The undersigned hereby guarantees payment of any service invoice charges for services provided, expenses incurred, and late fees accrued on any past due service invoice.

**CLIENT Name:** \_\_\_\_\_

**Client Signature:** \_\_\_\_\_

**Client Address:** \_\_\_\_\_

\_\_\_\_\_

**Client Contact No.:** \_\_\_\_\_

**Date:** \_\_\_\_\_