UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF FLORIDA

ver. 2/1/11

APPLICATION FOR ATTORNEY PASSWORD & LOGIN
FOR ELECTRONIC CASE FILING SYSTEM

I, , swear or affirm that I am a member of the Bar in good standing of the United States District Court for the District of and am admitted to practice in the Northern District of Florida. By submitting this application and receiving a password, I agree to adhere to the court's Standing Order and Administrative Procedures Authorizing Electronic Case Filing, and supplements and/or amendments thereto and the rules promulgated for the court's Electronic Case Filing (ECF) system.

I am providing the following information as a condition of receiving my login and password:

First/Middle/Last Name:

Bar ID Number:

Firm Name:

Mailing Address:

Telephone Number:
(include area code)

FAX Number:

Internet E-mail Address:
*If you have additional E-mail addresses you would like to include on your account please list them below:

☐ I am NOT a registered ECF user in another U.S. Court (Bankruptcy or District)

☐ I am a registered ECF user in another U.S. Court (Bankruptcy or District) - Name of Court:

Type of login requested (select only one): ☐ **debtor** ☐ **creditor**

Preferred login name (select only one):

☐ I do not have a preferred login and request the court to create a login on my behalf.

or

☐ I would like my login name to be as follows: _____.

NOTE: If access is required for both Debtor and Creditor work please complete the ECF "Application for Combination Attorney Login and Password" located on our website.

I have read and understand the following rules:

1. I will employ the Electronic Case Filing System for cases filed in the United States Bankruptcy Court for the Northern District of Florida.

2. My office and I have an understanding of a windows-based word processing program, an internet based browser, and a program that allows for the viewing of PDF documents. We feel competent in creating or printing a document into a PDF format.

*Please be aware that your Login/Password will only be sent to the primary E-mail address listed on this form.

3. I will attempt to adhere to all hardware and software requirements promulgated by the Court for system use.

4. Each use of my password for filing documents will meet the requirements of FRBP 9011. I understand that the use of my password constitutes my signature on the document being submitted for all purposes authorized and required by law, including, without limitation, the United States Code, Federal Rules of Civil Procedure, Federal Rules of Bankruptcy Procedure, and the Federal Rules of Criminal Procedure.

5. I understand that it is my responsibility to redact personal identifiers in all documents, pleadings and/or attachments in accordance with Fed. R. Bankr. P. 9037 and N.D. Fla. LBR 9037-1. By signing this application I acknowledge that I am responsible for redacting personal identifiers described in the aforementioned Rules and I agree to comply therewith.

6. I understand that it is my responsibility to maintain in my records all documents bearing my original signature that are filed using my password, and all documents bearing the original signature of any signer on whose behalf I file the documents using my password, for a period of four years after the case or proceeding in which the documents have been filed has been closed.

7. Inasmuch as the combination of my identification with my password constitutes my signature, I agree to protect and secure the confidentiality of my password. If I believe that my password may have been compromised, it is my responsibility to immediately notify the court in writing. It is also my responsibility to immediately inform the court of any long-term change in my firm affiliation, address, telephone, fax or e-mail address.

8. I understand that the issuance of a password to me constitutes a waiver of conventional service pursuant to FRBP 9036 and the court's electronic case filing general order. I agree to accept a Notice of Electronic Filing by hand, facsimile, first class mail or authorized e-mail in lieu of conventional service. In so doing, I also agree to maintain a current and active e-mail address to receive such notification.

9. Notwithstanding No. 6 above, in cases wherein service of documents filed electronically is required to be made on the United States and its agencies, corporations or officers, full compliance with rules 2002(j) and 7004(b)(4),(5)and(6) of the FRBP and Rule 4(l) and (j) of the FRCP is also required.

10. I understand that, for security reasons, staff at the Clerk's Office will not be able to provide me with a login or password via telephone and that communication of my login and/or password will only take place via email.

You will receive your Login/Password via e-mail at the e-mail address you provided on this application.

Date: /S/_____
Attorney/Applicant Signature

Sworn to or affirmed before me this day of , 20 .

State of _____
County of _____

_____
Notary Public

Return completed applications to:
U. S. Bankruptcy Court
Attn: Ne'Shoni Foulks
110 E. Park Ave., Suite 100
Tallahassee, FL 32301

NOTE: If you have an emergency filing or need your registration process expedited you may email your application to me at: Neshoni_Foulks@flnb.uscourts.gov. However, please be aware that the application which contains your original signature must also be mailed to the address provided above.