Print Form

UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF VIRGINIA

CASE MANAGEMENT/ELECTRONIC CASE FILING (CM/ECF) SYSTEM
PARTICIPANT REGISTRATION FORM

☐ I am requesting LIMITED FILING PRIVILEGES for filing documents in the CM/ECF system in the US Bankruptcy Court for the Western District of Virginia. Limited filing privileges shall be limited to the authorization to file proofs of claim, transfers of claims, and requests for notice via the court's Electronic Case Filing System (ECF).

☐ I am requesting FULL FILING PRIVILEGES for filing documents in the CM/ECF system in the U S Bankruptcy Court for the Western District of Virginia. A registered participant will have the privilege to file documents via the court's Electronic Case Filing System (ECF).

The following information is required for CM/ECF registration:

Full Name:

Mailing Address:

Voice Phone No.

E-Mail Address:

Limited Participants:

Agency/Company

Full Participants:

Bar ID #:

State of Admission:

Firm Name:

By signing and submitting this registration form, I agree to abide by the following requirements:

Limited Participants:

Signatures on documents filed pursuant to this authorization shall be indicated by /s/ and the typed name of the person signing in the following format: /s/ John Doe on the signature line. The use of my password constitutes my signature for all purposes under the Federal Rules of Bankruptcy Procedure and the Local Rules of this court.

The login and password for filing shall be used exclusively by me and by any person to whom I give authorization and for whose actions in the use thereof I acknowledge responsibility. I will not knowingly permit my login and password to be used by anyone who is not so authorized.

I will contact the Clerk of Court to report any suspected compromise of my password.

I will abide by all of the requirements of the Administrative Procedures of the Court which are currently in effect as well as any changes or additions that may be made later.

_____ Date

_____ Signature

Full Participants:

Pursuant to Federal Rule of Bankruptcy Procedure 9011 and LBR 5005-1, every pleading, motion and other paper shall be signed by the attorney of record and the signature shall be indicated by /s/ and the typed name of the person signing in the following format: /s/ John Doe on the signature line. The use of my password constitutes my signature for all purposes under the Federal Rules of Bankruptcy Procedure and the Local Rules of this Court.

I consent to receive service of documents and any docket activity electronically pursuant to FRBP 9036,where service of documents is otherwise permitted by first class mail, except with regard to a complaint initiating an adversary proceeding or a motion initiating a contested matter which must be served pursuant to FRBP 7004. In so doing, I agree to maintain a current and active e-mail address to receive notification in CM/ECF cases.

The login and password for filing shall be used exclusively by me and by any person to whom I give authorization and for whose actions in the use thereof I acknowledge responsibility. I will not knowingly permit my login and password to be used by anyone who is not so authorized.

I will contact the Clerk of Court to report any suspected compromise of my password.

I will abide by all of the requirements of the Administrative Procedures of the Court which are currently in effect as well as any changes or additions that may be made later.

_____ Date

_____ Signature