

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF LOUISIANA**

**Application for Limited Use/Claim Password
for Electronic Case Filing System**

I, _____, understand that by submitting this application and receiving a password, I agree to adhere to the court's orders authorizing electronic case filing, and to the rules promulgated for the court's Electronic Case Filing System. I am providing the following information as a condition of receiving my password:

(Please Print or Type)

Name: _____

Address: _____

City, State, Zip: _____

Phone #: _____ FAX #: _____

E-Mail Address: _____

Bar ID# (if applicable) _____ State of: _____

I, _____, certify that I have personally completed the required on-line Electronic Learning Modules located on the website for the U. S. Bankruptcy Court, Eastern District of Louisiana. Date of training: _____.

OR

I, _____, certify that I have completed CM/ECF training in another federal court. Date and location of training: _____

I have read, understand, and agree to the following rules:

1. **Claims or Other Limited Use Application:** I affirm that I am authorized to prepare and file Proofs of Claim, Applications to Withdraw Unclaimed Funds, Notices of Appearance, Assignment of Claims, Transfer of Claims, and am authorized to execute and submit Reaffirmation Agreements on behalf of _____
_____. (Attach separate sheet if necessary.)
2. I understand that use of my Limited Use password to file a document in the record of the bankruptcy case or proceeding will constitute my signature upon and my signing of any proofs of claim or other papers or documents filed by use of the password obtained

pursuant to this Application.

3. 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 one year after the case or proceeding in which the papers are filed has been closed.
4. I understand that it is my responsibility to protect and secure the confidentiality of my password. If I believe that my password has been compromised, it is my responsibility to notify the court in writing immediately.
5. I understand that it is my responsibility to notify the court, immediately, of any change in my address, telephone number, fax number, or email address.
6. I understand that service of the Notice of Electronic Filing through the court's electronic filing system upon users who have ECF passwords with the court is the equivalent of service upon such parties by first class mail, postage prepaid. However, service upon the debtor or other parties entitled to service who are not registered for electronic service must be made by first class mail, postage prepaid. Moreover, in cases where service of documents filed electronically is insufficient through the court's electronic filing system, full compliance with Federal Rules of Bankruptcy Procedure, including Rules 2002(j), 7004(b), and 9016(b) is required.

Applicant Signature

Date

Please return to: Systems Department
 Attn: ECF Creditor Registration
 United States Bankruptcy Court
 500 Poydras Street, Suite B-601
 New Orleans, Louisiana 70130

REVISED: December 2013