

CITY COURT OF
COUNTY OF

**STATEMENT OF AUTHORIZATION FOR
ELECTRONIC FILING
(Single Attorney Authorizing Individual Filing Agent)**

I, _____, Esq., (Attorney Registration
No. _____) am an authorized user of the New York State Courts
Electronic Filing System ("NYSCEF") (User ID _____). I hereby
authorize _____ ("the filing agent") to utilize his/her NYSCEF
filing agent ID to file documents on my behalf and at my direction in any e-filed matter in which
I am counsel of record through the NYSCEF system, as provided in Section 202.5-b of the
Uniform Rules for the Trial Courts.

This authorization extends to any consensual matter in which I have previously
consented to e-filing, to any mandatory matter in which I have recorded my representation, and
to any matter in which I may authorize the filing agent to record my consent or representation
in the NYSCEF system.

This authorization extends to any and all documents I generate and submit to the filing
agent for filing in any such matter. This authorization, posted once on the NYSCEF website as to
each matter in which I am counsel of record, shall be deemed to accompany any document filed
in that matter by the filing agent.

This authorization also extends to matters of payment, which the filing agent may make
either by debiting an account the filing agent maintains with the Clerk of the District Court of
any authorized e-filing county or by debiting an account I maintain with the Clerk of the District
Court of any authorized e-filing county.

This authorization regarding this filing agent shall continue until I revoke it in writing
on a prescribed form delivered to the E-Filing Resource Center.

Dated:

Signature

City, State and Zip Code

Print Name

Phone

Firm/Department

E-Mail Address

Street Address