

## ECF Certification Form

Complete this three page form in its entirety and photocopy a government-issued photo id, and email them to [vaed\\_ecf\\_helpdesk@vaed.uscourts.gov](mailto:vaed_ecf_helpdesk@vaed.uscourts.gov) and mail or deliver **original documents** to: **ECF Certification/Registration Form**, U.S. District Court, EDVA, Clerk's Office, 600 Granby Street, Norfolk, VA 23510. **If you are a Government Attorney pursuant to Local Rule 83.1, do not fill out this form.**

This notice informs all attorneys and their staff doing business with the U.S. District Court for the Eastern District of Virginia (EDVA) that improper registration to e-file with us is a serious matter that may have serious consequences. Falsely certifying and/or registering to e-file with the EDVA constitute making false statements to the Court, which is a grave offense. Such actions may lead to disbarment and a referral to the Virginia State Bar. The Court will act on any known instance of false certification and/or registration for e-filing in the CM/ECF system.

\_\_\_\_\_  
[First Name] [Middle Name] [Last Name]

Phone Number: \_\_\_\_\_ E-mail Address \_\_\_\_\_

Are you a CJA Panel Attorney? *Check the box that applies.*

☐ Yes. ☐ No.

*Check one or both boxes below. Fill in your bar number if you check the first box.*

☐ I am a member of the EDVA bar. My Virginia bar number is: \_\_\_\_\_

You may not register to e-file with the EDVA until you have completed the mandatory training requirement by passing the online EDVA ECF policies and procedures quiz with a score of 92% or higher. (Note: Quiz now discontinued. Requisite knowledge was acquired through private study.)

*You must check in **all** the boxes for the items below.*

**As an officer of the Court, I certify the following:**

- ☐ I acknowledge that I may be required to attend live remedial or update training at some point in the future.

AND

- ☐ A photocopy of a government-issued photo identification accompanies this form. (We are collecting this photocopy as proof of the identity of the signer of this form. The photocopies will be secured and not made available to the public in any way.)

AND

- ☐ I agree to abide by all Court rules, orders, and policies and procedures governing the use of the electronic filing system. I also consent to receiving notice of filings pursuant to Federal Rules of Civil Procedure and Federal Rules of Criminal Procedure via the Court's electronic filing system.

\_\_\_\_\_  
[Your signature]

\_\_\_\_\_  
[Date]



# United States District Court Eastern District of Virginia

[VAED-Home](#)||-||[Electronic Case Filing Home Page](#)

## Electronic Case Registration Form

This form must be used to register for a NextGen CM/ECF account. By submitting this registration form, you agree to abide by the requirements stated herein.

**NOTE: Your NextGen CM/ECF registration will not be processed until your completed ECF Certification form and photocopied government issued photo id , and email them as one PDF document to:**  
[vaed\\_ecf\\_helpdesk@vaed.uscourts.gov](mailto:vaed_ecf_helpdesk@vaed.uscourts.gov) .

Please do NOT re-register if you already have received an EDVA ECF login/password prior to April 19, 2021.

Pro Hac Vice attorneys are eligible to register at pacer.gov as PHV with non-filing access.

**(\*) Represents a Required Field.**

\*First Name

Middle Name

\*Last Name

Generation (e.g., "Jr.," "III," etc.)

\*US Attorney's Office Attorney

Select one

\*Are you a CJA Panel Attorney?

Select one

\*If U.S. Attorney's Office attorney,  
you must enter 99999 as Bar  
Number.

\*If not a U.S. Attorney's Office  
attorney, enter your **VA bar number**  
here (must be 5 numeric characters)

\*Bar Number

\*If you are an attorney not Admitted  
to the EDVA but are participating in  
and MDL case, you must enter  
88888 as Bar Number.

*Law Firm	<input type="text"/>	
*Address	<input type="text"/>	
Suite/Building	<input type="text"/>	
*City	<input type="text"/>	
*State	*Zip Code	
*Telephone (numeric digits only eg:7001234567)	Fax	
*Email	<input type="text"/>	
*Retype Email	<input type="text"/>	

By placing a check in the acceptance box below, I state that, as an officer of the Court, I agree to abide by all Court rules, orders, and policies and procedures governing the use of the electronic filing system. I also consent to receiving notice of filings pursuant to Federal Rules of Civil Procedure and Federal Rules of Criminal Procedure via the Court's electronic filing system. The combination of login and password will serve as my official signature when I file documents in the system. I must protect the security of my password. If I believe that my password has been compromised, I must immediately notify the Court and contact PACER to apply for a new username/password.

**Note: Email your NextGen CM/ECF Registration form and photocopied government issued ID in PDF format to [vaed\\_ecf\\_helpdesk@vaed.uscourts.gov](mailto:vaed_ecf_helpdesk@vaed.uscourts.gov) and you must register for e-filing using your individual upgraded PACER account. Go to [pacer.gov](http://pacer.gov) - Under "Manage My Account", you will click on the Maintenance tab, then click on "Attorney Admissions/E-File Registration". You will then select Virginia Eastern District Court and choose the E-File Registration Only option.**

☐ I accept the above rules and guidelines. (If you do not check this box, your application will not be submitted)