

United States Bankruptcy Court  
District of Massachusetts

**Application for Limited Access to the CM/ECF System**

This application is for creditors and attorneys representing creditors who wish to file proofs of claim, notice requests, notices of transfer or assignment of claim, notices of withdrawals of claim and notices of appearance, notice of mortgage payment change, notice of fees, expenses and charges, and requests for notice. The Limited Use Applicant must be an employee or agent authorized to file the above-referenced documents on behalf of the Creditor Entity or Firm. A login and password are issued to qualified applicants so they may file documents on behalf of the Creditor Entity or firm.

Creditor Entity/Firm Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Federal Tax Id # \_\_\_\_\_ Email Address: \_\_\_\_\_

I, \_\_\_\_\_, swear and affirm under penalty of perjury that 1) I am properly authorized to submit this Limited Use Application form on behalf of the Creditor Entity/Firm identified above, 2) the Limited Use Applicant identified on this form is authorized by the Creditor Entity/Firm to file the above-referenced documents and 3) by submitting this form the Creditor Entity agrees to adhere to the terms and conditions specified on this form.

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Print Name Title

The following information is provided as a condition of receiving my password:

Limited Access Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Bar ID# (If applicable): \_\_\_\_\_ State of: \_\_\_\_\_

The Bankruptcy Court for the District of Massachusetts reserves the right to require onsite training in the use of the CM/ECF system prior to the issuance of a user login and password to any prospective or current participant.

As the Limited Use Applicant, I \_\_\_\_\_, hereby declare and certify under penalty of perjury that by registering for ECF and signing this form, the Creditor Entity/Firm and I understand and agree to the following:

1. Upon acceptance of this Limited Access Application and issuance of a login and password by the Court, I become a Registered User of the Court's ECF System entitled to file documents on behalf of the Creditor Entity/Firm listed.
2. I understand that use of the my login and password to file a document in the record of a bankruptcy case or proceeding with the /s/ and my typed name will constitute my signature upon and my signing of any declarations, verifications, proofs of claim, creditor requests for notice, notices of appearance, transfers or assignments of claims, or proofs of claim or other papers involving a child support creditor, or other papers or documents filed by use of the password obtained pursuant to this Application (my password), 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, Federal Rules of Criminal Procedure and any applicable nonbankruptcy law. I understand that criminal penalties may apply for falsifying or filing a false or fraudulent document electronically.
3. As the Registered User, it is my responsibility to protect and secure the password issued by the Court. No Registered User may knowingly permit or cause to permit their assigned password to be utilized by any other person. If any reason exists to suspect the password has been compromised in any way, it is the responsibility of the Registered User to or Creditor Entity/Firm to notify the Court immediately.
4. If the Registered User ceases to be an employee or agent of the Creditor Entity/Firm on whose behalf the Registered User was authorized to file electronically, or ceases for any reason to be authorized to file electronically for that Creditor Entity/Firm, the Creditor Entity/Firm will immediately inform the Court and cease using the login and password issued. If any information provided on this form changes, the Registered User or the Creditor Entity/Firm will promptly send an amended registration form to the Court.
5. Each time the Registered User electronically files a document through the Court's ECF system, they are certifying that:
  - a. They are authorized to file the document(s) by the Creditor Entity/Firm on whose behalf the document is being filed.
  - b. The Creditor Entity/Firm is the same entity stated on the Registered User's Limited Access Application.

- c. The individual whose signature appears on the original document(s) has authorized the filing of that document.
6. I understand that I will be required to pay for all fee-related filings by 12:00 midnight of the day of filing, and that any failure to pay the fees due will result in my account being “locked” which may ultimately result in the permanent revocation of my access to ECF. Registered Users shall serve any document filed electronically in accordance with the applicable rules.
7. The Registered User is responsible for adding the creditor and the correct mailing address to the creditor matrix if the current address is incorrect.
8. The Limited Access Applicant has met the following requirements:
- I have an Internet Service Provider
  - I have an Internet Browser
  - I have a computer that has and is capable of running Adobe Acrobat (Adobe Reader is not sufficient) and word processing software (Microsoft Word or Corel’s WordPerfect).
  - A scanner with a document feeder that is able to scan a document, save it as a PDF document, and open it again as a PDF document.
  - I have a PACER Account.
9. I understand that training is not required for a limited use registration, however, any abuse or continual errors in the ECF System may be reason for action by the Court including mandatory retraining, suspension or termination of my electronic filing privileges.

**I DECLARE THAT THE FOREGOING REPRESENTATIONS OF FACT ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.**

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Signature of Limited Use Applicant Date

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Signatory for Creditor Entity/Firm Date

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Telephone Number

**When completed, email to: [ecf\\_accounts@mab.uscourts.gov](mailto:ecf_accounts@mab.uscourts.gov)**