CLERK'S OFFICE OF YORK COUNTY – POQUOSON CIRCUIT COURT KRISTEN N. NELSON, CLERK

APPLICATION FOR REMOTE ACCESS TO YORK COUNTY – POQUOSON CIRCUIT COURT CASE IMAGING SYSTEM (OCRA)

This application must be completed by <u>each individual user</u> for access to case documents. A non-attorney applicant must be a directly supervised staff member of an Attorney who is an active Subscriber. The supervising Attorney must also sign this application. If you are a current subscriber to OCRA in another Circuit Court, you must furnish your user ID and Password below. The Supreme Court of Virginia only allows one username/password combination for subscribers to OCRA.

The approval of this application is at the Clerk of the Circuit Court's discretion. By signing this application the Subscriber acknowledges and accepts the terms and conditions of the Subscriber Agreement for Remote Access to York County - Poquoson Circuit Court Case Imaging System as incorporated by reference herein. All information below is mandatory (print clearly)

APPLICANT'S NAME:		
LAST	FIRST	MIDDLE
GOVERNMENTAL AGENCY (IF APPLICABLE):		
STREET ADDRESS:		
CITY/STATE/ZIP:		
PHONE NUMBER:		
EMAIL ADDRESS:		·
VSB NUMBER OF SUPERVISING ATTORNEY OR ATTO	ORNEY APPLICA	NT:
	(Inc	clude a copy of your Virginia State Bar card)
UNITED STATES CITIZEN: () YES () NO		•
NAME OF ACTIVE ATTORNEY SUBSCRIBER BY WHO	OM YOU ARE DIR	ECTLY SUPERVISED:
ARE YOU A CURRENT SUBSCRIBER TO OCRA IN ANG	OTHER COURT?	() YES () NO
IF YES PROVIDE YOUR: USER ID	PASS	SWORD
I certify that the information above is true and correct.		
APPLICANT SIGNATURE:		
SIGNATURE OF SUPERVISING ATTORNEY:		
State of :		
City / County of:		
The foregoing application was subscribed and sworn to/affirmed before me this		
by and		
Print or Type Name and Phone # of Notary ***********************************		• ·
his completed application with payment to: Clerk of the Circuit Court	,	
Attn: OCRA Subscription Post Office Box 371		For use by the Circuit Court Clerk's Office Only
Yorktown, VA 23690	·	SUBSCRIBER'S USER ID :
checks payable to: York County - Poquoson Circuit Court Clerk		SUBSCRIBER'S PASSWORD
Subscriber's ID, password and expiration date with instructions be e-mailed to you if approved.		SUBSCRIPBER'S EXPIRATION DATE: