

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 each individual user 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: _____

VSJ NUMBER OF SUPERVISING ATTORNEY OR ATTORNEY APPLICANT: _____

(Include a copy of your Virginia State Bar card)

UNITED STATES CITIZEN: () YES () NO

NAME OF ACTIVE ATTORNEY SUBSCRIBER BY WHOM YOU ARE DIRECTLY SUPERVISED:

ARE YOU A CURRENT SUBSCRIBER TO OCRA IN ANOTHER COURT? () YES () NO

IF YES PROVIDE YOUR: USER ID _____ PASSWORD _____

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 _____ day of _____, 20____,
by _____ and _____

Print or Type Name and Phone # of Notary _____

 Notary Public Clerk Deputy Clerk

Mail this completed application with payment to: Clerk of the Circuit Court
Attn: OCRA Subscription
Post Office Box 371
Yorktown, VA 23690

Make checks payable to: York County - Poquoson Circuit Court Clerk

The Subscriber's ID, password and expiration date with instructions
will be e-mailed to you if approved.

<p><i>For use by the Circuit Court Clerk's Office Only</i></p> <p>SUBSCRIBER'S USER ID : _____</p> <p>SUBSCRIBER'S PASSWORD _____</p> <p>SUBSCRIBER'S EXPIRATION DATE: _____</p>
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