

# UNITED STATES COURTS BANKRUPTCY COURTS

## Notice Provider Application

*Pursuant to Fed. R. Bankr. P. 2002(g)(4) and 9001(9)*

This Application should only be used by a person or entity that intends to route bankruptcy notices to preferred physical or electronic addresses based on agreements with notice recipients regarding the manner and address for receiving the notices pursuant to [Fed. R. Bankr. P. 2002\(g\)\(4\)](#). Absent any such agreements with notice recipients, it is unnecessary to become approved as a “Notice Provider” pursuant to [Fed. R. Bankr. P. 9001\(9\)](#). This Application is provided by the United States Bankruptcy Courts and may not be altered or changed in any manner.

Applicant Information	
Firm/Company Name	
Address Line 1	
Address Line 2	
Address Line 3	
City, State, Zip	
Contact Name	
Phone No.	
Contact E-mail Address	

By completing this form, the applicant affirms that it:

1. Understands and will comply with Rule 2002(g)(4) of the Federal Rules of Bankruptcy Procedure for providing notices to entities;
2. Possesses the equipment, personnel and other resources for maintaining a database of preferred physical and/or electronic addresses and routing notices to those addresses pursuant to Rule 2002(g)(4) in a timely and professional manner;
3. Will maintain appropriate records for all mailing lists and notices received and transmitted pursuant to Rule 2002(g)(4); and
4. Possesses ample capacity to handle anticipated noticing volumes.

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The applicant submits the following references as to the applicant's capability and past performance routing notices based on noticing agreements under Fed. R. Bankr. P. 2002(g)(4):

<b>REFERENCE #1</b>	
Firm/Company Name	
Address Line 1	
Address Line 2	
Address Line 3	
City, State, Zip	
Contact Name	
Phone No.	
Contact E-mail Address	
<b>REFERENCE #2</b>	
Firm/Company Name	
Address Line 1	
Address Line 2	
Address Line 3	
City, State, Zip	
Contact Name	
Phone No.	
Contact E-mail Address	
<b>REFERENCE #3</b>	
Firm/Company Name	
Address Line 1	
Address Line 2	
Address Line 3	
City, State, Zip	
Contact Name	
Phone No.	
Contact E-mail Address	

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The applicant should list work provided in any Bankruptcy Court district (up to five). Include any district in which the applicant has been subject to sanctions or other discipline:

Bankruptcy Court	
District Name	
District Name	
District Name	
District Name	
District Name	

Authorization	
I am an authorized officer of the named applicant. I declare, under penalty of perjury, that I am duly authorized to affirm the information submitted above.	
Name	
Signature	
Corporate Officer Title	
Date	

Please e-mail the completed Application to Gary Streeting of the Administrative Office of the United States Courts, Court Services Office at [Gary\\_Streeting@ao.uscourts.gov](mailto:Gary_Streeting@ao.uscourts.gov). An initial response should be received within 5 business days. Answers to follow-up questions and/or additional information regarding your Application may be required. If this Application is approved, the applicant will be added to the list of [Approved Bankruptcy Notice Providers](#) on the Judiciary's public website at <https://www.uscourts.gov/>. Any questions regarding the status of this Application should be directed to the Court Services Office at (202) 502-1500.