

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF CALIFORNIA**

<div style="display: flex; justify-content: space-between;"><div>In re:</div><div>Bankruptcy Case No.</div></div> <div style="text-align: center; margin-top: 40px;">Debtor(s).</div>	
<div style="display: flex; justify-content: space-between;"><div>v.</div><div>Plaintiff(s),</div><div>Adversary Proceeding No.</div></div> <div style="text-align: center; margin-top: 40px;">Defendant(s).</div>	

APPLICATION FOR PRO HAC VICE AND PROPOSED ORDER

Pursuant to Local Rule 1001-1(c) of the United States Bankruptcy Court for the Eastern District of California and Local Rule 180(b)(2) of the United States District Court for the Eastern District of California, _____
hereby applies for permission to appear and participate as counsel in the above entitled action on behalf of the following party or parties:

_____.

On _____ (date), I was admitted to practice and am presently am in good standing in the _____ (court). A certificate of good standing from that court is submitted in conjunction with this application. I have not been disbarred or formally censured by a court of record or by a state bar association, and there are not disciplinary proceedings against me.

☐ I have / ☐ I have not concurrently or within the year preceding this application made a pro hac vice application to this court. (If you have made a pro hac vice application to this court within the last year, list the name and case number of each matter in which an application was made, the date of application and whether granted or denied.)

The \$300.00 fee prescribed for filing an application for admission to practice pro hac vice has been paid to the Clerk, U.S. District Court, Eastern District of California. (U.S. District Court receipt number _____). **[NOTE: U.S. District Court receipt number indicating payment is REQUIRED. Applications submitted without a valid U.S. District Court receipt number will NOT be processed.]**

Date: _____ Signature of Applicant: _____

Pro Hac Vice Attorney

Applicant's Name: _____

Law Firm Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number (_____) _____

City and State of Residence: _____

Primary E-mail Address: _____

Secondary E-mail Address: _____

Local Attorney

I hereby designate the following member of the Bar of this Court who is registered for ECF with whom the Court and opposing counsel may readily communicate regarding the conduct of the case and upon whom electronic notice shall also be served via the Court's ECF system:

Local Counsel's Name: _____

Law Firm Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: (_____) _____

State Bar Number: _____

ORDER

Dated: _____