CSD 3005 [3/01/2021]

Name, Address, Telephone No. & I.D. No.

|  |  |  |
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| **UNITED STATES BANKRUPTCY COURT**  SOUTHERN DISTRICT OF CALIFORNIA  325 West F Street, San Diego, California 92101-6991 | |  |
| In Re | Debtor. | BANKRUPTCY NO. |
|  | Plaintiff(s) | ADVERSARY NO. |
| v. | Defendant(s) | Date of Hearing:  Time of Hearing:  Name of Judge: |

**PRO HAC VICE APPLICATION AND ORDER THEREON**

The court orders as set forth on the continuation pages attached and numbered       through       with exhibits, if any, for a total of       pages.

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DATED:

Judge, United States Bankruptcy Court

CSD 3005 [3/01/2021] (Page 2)

|  |  |
| --- | --- |
| PRO HAC VICE APPLICATION AND ORDER THEREON | |
| DEBTOR: | CASE NO.: |
|  | ADV. NO.: |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Party Represented: | | | | | | | |  | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
|  | I, | |  | | | | | | | | | | , hereby petition the above-entitled court to permit me to appear | | | | | | |
|  |  | | (Applicant) | | | | | | | | | |  | | | | | | |
| and participate in this case/adversary proceeding and in support of petition state: | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
|  | My firm name: | | | | | | | |  | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | |
|  | Street address: | | | | | | | | |  | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | |
|  | City, State, ZIP: | | | | | | | | |  | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | |
|  | Phone number: | | | | | | | | |  | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | |
|  | My State Bar Membership Number is | | | | | | | | | | |  | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | |
|  | That on | | | | | |  | | | | , I was admitted to practice before | | | | | |  | | |
|  |  | | | | | | (Date) | | | |  | | | | | | (Name of Court) | | |
|  | | | | | | | | | | | | | | | | | | | |
| and am currently in good standing and eligible to practice in said court, | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
|  | that I am not currently suspended or disbarred in any other court, | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | |
|  | that I  have  have not concurrently or within the year preceding this application made any pro hac vice | | | | | | | | | | | | | | | | | | |
| application to this court. | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| **(If previous application made, complete the following)** | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| Title of Case: | | | | | |  | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| Case Number: | | | | | | |  | | | | | | |  | | Date of Application: | | |  |
|  | | | | | | | | | | | | | | | | | | | |
| Application  granted  denied | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
|  | I declare under penalty of perjury that the foregoing is true and correct. | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | |
| Dated: | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | |  | | | | | | |
|  |  | | | | | | | | | | | | Signature of Applicant | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | **DESIGNATION OF LOCAL COUNSEL** | | | | | | |  | |
|  | | | | | | | | | | | | | | | | | | | |
|  | I hereby designate the below named as associate local counsel. | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| Name: | |  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| Firm: | | |  | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| Address: | | | |  | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| City, State & ZIP Code: | | | | | | | | | |  | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| Phone No. | | | | |  | | | | | | | | | | | | | | |
|  | | | | |  | | | | | | | | | | | | | | |
| Dated: | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |  | | | | |
|  | | | | | | | | | | | | | | | Signature of Applicant | | | | |
| I hereby consent to the above designation. | | | | | | | | | | | | | | |  | | | | |
|  | | | | | | | | | | | | | | |  | | | | |
| Dated: | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |  | | | | |
|  | | | | | | | | | | | | | | | Signature of Designee Attorney | | | | |

CSD 3005 [3/01/2021] (Page 3)

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| PRO HAC VICE APPLICATION AND ORDER THEREON | |
| DEBTOR: | CASE NO.: |
|  | ADV. NO.: |

Received $213.00 for Court Library fee

      , Deputy Clerk

**PRO HAC VICE** (for this one particular occasion)

An attorney who is not a member of the California State Bar, but who is a member in good standing of, and eligible to practice before, the bar of any United States Court or of the highest court of any State or of any Territory or Insular possession of the United States, who is of good moral character, and who has been retained to appear in this Court, be permitted to appear and participate in a particular case. An attorney is not eligible to practice pursuant to this paragraph if any one or more of the following apply to him/her: (1) he/she resides in California, (2) he/she is regularly employed in California, or (3) he/she is regularly engaged in business, professional, or other activities in California.

The pro hac vice application shall be presented to the Clerk and shall state under penalty of perjury (1) the attorney's residence and office address, (2) by what court he/she has been admitted to practice and the date of admission; (3) that he/she is in good standing and eligible to practice in said court; (4) that he/she is not currently suspended or disbarred in any other court; and (5) if he/she has concurrently or within the year preceding his/her current application the attorney made any pro hac vice application to this court, the title and the number of each matter wherein he/she made application, the date of application, and whether or not his/her application was granted. He/She shall also designate in his/her application a member of the bar of this Court with whom the Court and opposing counsel may readily communicate regarding the conduct of the case and upon whom papers shall be served. He/She shall file with such application the address, telephone number, and written consent of each designee.

Fee: $213.00, Library fee, payable to Clerk, United States District Court Please complete and return the library card with this application.

# Application, fee and library card should be mailed directly to:

Clerk, US District Court

333 West Broadway, Ste. 420

San Diego, California 92101-8900

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| UNITED STATES DISTRICT COURT  SOUTHERN DISTRICT OF CALIFORNIA  PRO HAC VICE   |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | | APPLICANT |  | | | | | | | | (Please Print) | | | | | | | | | STATE BAR # | |  |  | STATE |  | | | |  | |  |  |  |  | | | | FIRM NAME | |  |  | | | | | | (Mailing address) | | | | | | | | |  | | | | | | | | |  | | |  | **COURT USE ONLY** | | | | |  | | |  | FEES PAID | | | | |  | | |  |  | | | | |  | | |  |  | | | | |  | | |  |  | |  |  | | (Telephone) | | |  | (Date) | |  | (Amount) | |  | | |  |  | |  |  | |  | | |  |  | | | | | (Signature) | | | | (Initials) | | | | |  | | | |  | | | | |