

Clark County District Court Electronic Filing (CCDCEF) User Registration Form

Please visit <https://www.clark.wa.gov/clerk/electronic-filing> to register to E-File with Superior Court.

This registration application is for DISTRICT COURT ONLY (Limited Jurisdiction Court).

NOTE: An authorized user ID for the Clark County District Court Electronic Filing System will normally be issued with-in 2-4 weeks.

[New user account request](#)

[Update existing user account](#)

1. I am:

___ a member of the Washington State Bar Association and in good standing. **WSBA No:** _____

___ a legal assistant/secretary or authorized "filing agent"

___ a representative of a State of Washington government agency

Agency Name: _____

2. I am providing information as a condition of registering as a filing user of Clark County District Court E-Filing System (CCDCEF) and receiving my user ID and password. The primary email address below is the address to which conformed copies will be returned.

First Name: _____ Firm Name: _____

Middle Initial: _____ Firm Tel No: _____

Last Name: _____ Primary Email: _____

Tel No. _____ Email-2: _____

Email-3: _____

3. I understand and agree to the following:

- a. I will adhere to the ruled governing Electronic Filing in the WA State Court Rules and any local rule or protocols promulgated by participating courts
- b. I understand that each use of my password for filing documents with CCDCEF constitutes my signature on the document being submitted.
- c. I understand that my filing agent is authorized to file documents on my behalf.
- d. I understand that providing any false information in this form may result in a revocation of my authorized User status.
- e. I will protect and secure the confidentiality of my password. If I have reason to believe that my password has been compromised, I will notify CCDCEF representative immediately.
- f. I will inform the court and CCDCEF agent of any change in my employment affiliation.
- g. I will also inform the CCDCEF agent of any change of information contained in this form.

District Court Efile contact:
district.efile@clark.wa.gov

Signature _____

Date _____