

2020.07.17



Non-Attorneys Representing Themselves (Unrepresented Litigants) /
Filing Agent / Pro Hac Vice
"NYSCEF" Account Registration Form
for Existing Cases

Expedited Processing: An E-Filing account will normally be issued in 24-48 hours. If you are operating under time constraints, type "**Expedite**" in the field at the top of the page.

I, BARIS DINCER, am:
(print full name)

1. Choose option a, b, or c below:

- a. not an attorney and I am a party to the case set forth below.
- b. a member in good standing of the Bar in a jurisdiction outside the State of New York, and I have been admitted pro hac vice in the case set forth below and I have attached the order of admission to this application.

If you have selected option (a) or (b) above, you **MUST** enter the case information into the fields below.

Index/File/Claim Number: 153974/2020

Court: NYS Court of Claims (New York District) ☒

Caption: SULLIVAN PROPERTIES L.P.
Plaintiff/Petitioner

- against -

BARIS DINCER
Defendant/Respondent

- c. a person seeking to use NYSCEF as an authorized agent ("filing agent") for attorney(s) of record in a case or cases.

NOTE: Non-attorney applicants MUST have their signature on Page 3 notarized.*

2. I understand and agree that:

- a. The Primary E-Mail Address below is the address at which service of documents after commencement may be made through NYSCEF upon the Account Holder or parties represented by the Account Holder.
- b. If I am not an attorney and am representing myself, I understand the NYSCEF Resource Center must first verify with the court that I am a party to the action before an ID will be issued.

All pages of this signed application must be returned to the E-filing Resource Center at nyscef@nycourts.gov or (212) 401-9146 (fax) in order to complete the registration process.

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I acknowledge that I have read, understand and agree to the terms as stated on this registration form and have provided accurate information: (Please print name, sign and date)

Note: Non-attorney applicants must have signature notarized.*

Name: BARIS DINCER

Print

Signature

Date: 07/17/2020

Address (Street, City, State, Zip Code): 111 SULLIVAN STREET, APT 2BR

Telephone Number: 917-378-3467

Fax Number (optional): _____

***(For non-attorneys only)**

Sworn to before me this

_____ day of _____, 20__.

Notary Public

Please return completed registration form (3 pages) to:

E-Mail: nyscef@nycourts.gov (Preferred Method of Submission)

Fax: (212) 401-9146