COURT OF THE STATE OF NEW YORK	
COUNTY OF	X
	INDEX/FILE/No.:
	x
DURING Pursuant to recent Administrative and specifically regarding the re- types approved for electronic fill such requirement in the case ide	TION FOR EXEMPTION FROM E-FILING THE COVID-19 HEALTH EMERGENCY We Orders issued as a result of the COVID-19 health emergency requirement of electronic filing via NYSCEF in courts and case ling during this emergency, I hereby request to be exempt from entified in the caption above. I certify that I am unable to participate the of documents in this case on behalf of my client because:
I lack:	
format the knowledge re participate in elec mine or of my firm possesses such k	he internet er device by which documents may be converted to an electronic egarding operation of computers and/or scanners needed to etronic filing of documents in this case and no employee of m, office or business who is subject to my direction
Dated:	
Attorney Signature:	Print Name:
Name of Client:	
Firm Name:	Address:
E-mail:	
FOR COURT USE:	
[] application is APPROVED ; the filed and served by mail or as follow	Clerk is directed to notify the applicant that all documents must be vs:
[] application is <u>NOT</u> APPROVED	; the Clerk is directed to notify the applicant.
Dated:	
Hon.	

APPLICATION TO BE SENT TO THE COURT BY MAIL OR SUCH OTHER METHOD AS THE COURT DIRECTS