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APPLICATION FOR INTERNET ACCESS TO RECORDS MANAGEMENT SYSTEM
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The approval of this application is at the discretion of the Clerk of the City of Williamsburg & County of James City Circuit Court. By signing this application the Subscriber acknowledges and accepts the terms and conditions of the **Subscriber Agreement for Internet Access to City of Williamsburg & County of James City Circuit Court Documents** as incorporated by reference herein.

PLEASE SPECIFY REGION: _____
(City of Williamsburg, County of James City or Both)

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I certify that the information above is true and correct. I further certify that *I will not share my subscription with anyone*; understanding that my access will be permanently terminated if I do not abide by the Subscriber Agreement.

STATE OF _____ SIGNATURE

City/County of _____

I, _____ a Notary Public, do hereby certify that on this ____ day of _____, 20____, _____ personally appeared before me and swore and acknowledged to me that the statements contained therein are true and correct.

My Commission Expires: _____

Notary Public Printed Name

Notary Public Telephone Number

Notary Public Registration Number

Notary Public/Clerk/Deputy Clerk

Notary Seal Required

For use by Circuit Court Clerk's Office only

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