

## 468-a Reinstatements

Judiciary Law §468-a requires that every attorney admitted to practice in the State of New York register every two years with the Chief Administrator of the Courts, and a registration fee of \$375 is mandated, except for attorneys who certify to the Chief Administrator of the Courts that they are “*retired*” from the practice of law as defined in Part 118 of the Rules of the Chief Administrator.

Attorneys who default on this obligation are subject to the imposition of discipline by the Appellate Division. If you are suspended for registration delinquency, you: a) must refrain and desist from the practice of law in any form in New York State; b) are forbidden to appear as an attorney before any New York State court, and c) are forbidden to give to another an opinion as to the law of New York State or its application, effective immediately and until further order of the Court.

### **Instructions on How to Apply for a 468-a Reinstatement in the First Department:**

1. Before applying for reinstatement, you must become current with your registration obligations. Visit the Office of Court Administration (OCA) Attorney Registration Unit website, update your contact information, file all past-due registrations, and pay all outstanding registration fees (if applicable). You will be issued a receipt.  
[Attorney Registration - Overview | NYCOURTS.GOV](#)
2. After you update your contact information and file all outstanding registrations, you must prepare a motion for reinstatement which must include the following:
  - Notice of Motion for Reinstatement – the return date must be on a Monday only and the return date must be a minimum of 13 days from the date of service. Add an extra week if the next available Monday is less than 13 days to avoid a rejection of service.
  - Affirmation in Support of Motion for 468-a Reinstatement.
  - Exhibit A – Copy of the receipt from OCA showing payment of outstanding registration fees *or* certification of retirement for all past-due biennial periods.
  - Affirmation of Service on the Attorney Grievance Committee (AGC). The AGC will accept service of a PDF copy of your motion package via email at [AD1-AGC@nycourts.gov](mailto:AD1-AGC@nycourts.gov), Attn: 468-a Reinstatements Clerk. You must state in your email that you are submitting your filing to the Court through NYSCEF (instructions below).
  - Our server does not allow us to click on third party links or access external drop boxes – your motion must be attached as a PDF document to your email.

**Please note that the AGC is only a party in this action, has no authority to issue an order in this matter, and cannot provide status reports about your filing. For questions about your filing, please contact the Court directly.**

A sample of the motion papers is attached here.

3. File your motion for 468-a reinstatement directly with the Court via the New York State Courts Electronic Filing (NYSCEF) Digital Portal. This is a Court requirement. If you are unable to file your motion through NYSCEF, contact the Court directly to let them know. [Filing Papers \(state.ny.us\)](http://state.ny.us)

The filing must be a single, bookmarked, and searchable PDF document. [TechnicalRequirementsEfiling.pdf \(nycourts.gov\)](http://nycourts.gov/TechnicalRequirementsEfiling.pdf)

This guide provides step-by-step instructions for the use of the Digital Submission portal. [Microsoft Word - Memo for Digital Submissions Revised 2 \(nycourts.gov\)](http://nycourts.gov/MicrosoftWord-MemoforDigitalSubmissionsRevised2)

4. After submitting your filing through the NYSCEF Digital Portal, send via regular mail the following:
  - Check for \$45.00 made payable to “Appellate Division, First Department”
  - Copy of your 468-a reinstatement motion package
  - Self-addressed stamped envelope

To:

Appellate Division, First Judicial Department  
27 Madison Avenue  
New York, New York 10010  
Attn: Motions Clerk

5. You do not need to appear in Court on the return date. Once the Court decides the motion, the Court will send a copy of its decision directly to all parties. Please make sure that your contact information is up-to-date.

SUPREME COURT OF THE STATE OF NEW YORK  
APPELLATE DIVISION, FIRST JUDICIAL DEPARTMENT

-----  
In the Matter of Attorneys Who Are In  
Violation of Judiciary Law Section 468-a:

Attorney Grievance Committee  
for the First Judicial Department,

NOTICE OF MOTION  
FOR REINSTATEMENT

Respondent,

[YOUR ADMISSION NAME]  
Admitted on [spell out date of admission], at a  
Term of the Appellate Division,  
[Department] Department,  
(OCA Atty. Reg. No. [Registration Number]),

Petitioner.

-----  
**PLEASE TAKE NOTICE**, that upon the annexed affirmation of [Your Admission Name], affirmed on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, the undersigned will move this Court at a term thereof to be held at the Appellate Division Courthouse, located at 27 Madison Avenue, New York, New York 10010, on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at 10:00 A.M., for an Order of Reinstatement from the suspension of movant from the practice of law for violation of Judiciary Law Section 468-a, and for such other and further relief as

may be just and proper.

DATED: [City, State]  
[Date]

Yours,

[Name of suspended attorney]  
[Address]  
[Telephone number]  
[Email address]

TO: Attorney Grievance Committee  
Supreme Court, Appellate Division  
First Judicial Department  
180 Maiden Lane, FL 17  
New York, New York 10038  
[AD1-AGC@nycourts.gov](mailto:AD1-AGC@nycourts.gov)  
Attn: 468-a Reinstatements Clerk

SUPREME COURT OF THE STATE OF NEW YORK  
APPELLATE DIVISION, FIRST JUDICIAL DEPARTMENT

-----  
In the Matter of Attorneys Who Are In  
Violation of Judiciary Law Section 468-a:

Attorney Grievance Committee  
for the First Judicial Department,

Respondent,

[YOUR ADMISSION NAME]  
Admitted on [spell out date of admission], at a  
Term of the Appellate Division,  
[Department] Department,  
(OCA Atty. Reg. No. [Registration Number]),

Petitioner.

AFFIRMATION IN  
SUPPORT OF MOTION  
FOR REINSTATEMENT

-----  
I, [YOUR ADMISSION NAME], affirm this \_\_\_ day of \_\_\_\_\_, 20 \_\_,  
under the penalties of perjury under the laws of New York, which may include a  
fine or imprisonment, that the foregoing is true, and I understand that this  
document may be filed in an action or proceeding in a court of law:

1. I was admitted to practice law in the State of New York on [admission  
date] in the [Department of Admission] Judicial Department under the name  
[admission name].

2. On [date of your suspension], the Supreme Court of the State of New  
York, Appellate Division, First Judicial Department, suspended me for  
delinquency in registration.

3. I first learned that I was suspended on [date] under the following circumstances: [describe how you learned that you were suspended.] The reason for my default in registration is [provide full explanation and documentation, if applicable].

4. I attest that during the period of my suspension, I: a) have refrained and desisted from the practice of law in any form in New York State; b) have not appeared as an attorney before any New York State court, and c) have not given to another an opinion as to the law of New York State or its application.

*Or*

4. Prior to learning of my suspension, I engaged in the practice of law in the following matter(s) [for each matter identify the client, describe the nature of the matter, the date of retention, and what legal services you rendered.] In the course of my legal representation, I appeared before [for each matter identify court, name of judge, date of appearance] on behalf of [name of the client, describe the nature of the matter, and what legal services you rendered].

I attest that after learning of my suspension on \_\_\_\_\_, I: a) have refrained and desisted from the practice of law in any form in New York State; b) have not appeared as an attorney before any New York State court, and c) have not given to another an opinion as to the law of New York State or its application.

5. On [date], I paid my registration fees in accordance with Judiciary Law Section 468-a, and I am now seeking reinstatement. A copy of the receipt from the Office of Court Administration acknowledging payment of my past due registration fees is attached as Exhibit “A.”

6. I respectfully request to be reinstated to the practice of law in the State of New York.

7. All correspondence concerning this matter can be addressed to me at:

[mailing address \*\* required \*\*]  
[telephone number \*\* required \*\*]  
[email address \*\* required \*\*]

[signature \_\_\_\_\_]  
[YOUR ADMISSION NAME]



**NEW YORK STATE  
Unified Court System**

OFFICE OF COURT ADMINISTRATION  
ATTORNEY REGISTRATION UNIT

# RECEIPT

DATE

[NAME OF ATTORNEY]

**Attorney Registration #:**  
**Batch #:**  
**Process Date:**  
**Receipt #:**  
**Credit Card Ending In:**  
**Registration Fee Transaction #:**  
**Authorization Code:**  
**Non-Refundable Service Fee:**  
**Service Fee Transaction #:**  
**Service Fee Auth. Code:**  
**Next Registration:**  
**Registration Status:**

This will acknowledge receipt of your 2021-2022 registration as an attorney and receipt of the \$375 fee.

**Name:**

First:  
Middle:  
Last:  
Suffix:

**DOB:** XX/XX/XXXX

**SSN:** XXX-XX-XXXX

AN EXPLANATION OF WHY SOCIAL SECURITY NUMBERS ARE  
REQUIRED AS PART OF THIS APPLICATION MAY BE FOUND AT:  
<http://ww2.nycourts.gov/attorneys/registration/index.shtml>

**Admission Data:**

Year Admitted  
Judicial Dept. of Admission:

**Law School:**

**Business Address:**

**Home Address:** (Note: Is public information ONLY if no business is provided.)

**Business County:** New York

**Home County:**

**Business Phone:**

**e-mail (optional):**

Note: If provided, the e-mail address will be made public.

**Our records contain information above, return only if changes to the above are required and retain a copy for your records.**

Please review the above information on this receipt for accuracy. The Rules of the Chief Administrator require that this office be notified of any changes in the above information within 30 days of any such change. If changes are required you may make them online.

▣ **Online** 1) Go to [www.nycourts.gov](http://www.nycourts.gov) and Attorney Online Services 2) Make desired changes 3) Print a corrected receipt.

- OR -

▣ **By Mail** 1) Circle the item 2) Enter the correct information directly on the receipt 3) Sign and date the receipt 4) Return to the address at the bottom of the receipt.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Child Support Oblig. §3-503:** No Obligation

**Part 1200 (1.15) Affirmation:** Yes

**CLE:** Hours Completed: / Carried Over:

**Pro Bono Reported:** Yes

SUPREME COURT OF THE STATE OF NEW YORK  
APPELLATE DIVISION, FIRST JUDICIAL DEPARTMENT

-----  
In the Matter of Attorneys Who Are In  
Violation of Judiciary Law Section 468-a:

Attorney Grievance Committee  
for the First Judicial Department,

AFFIRMATION  
OF SERVICE

Respondent,

[YOUR ADMISSION NAME]  
Admitted on [spell out date of admission], at a  
Term of the Appellate Division,  
[Department] Department,  
(OCA Atty. Reg. No. [Registration Number]),

Petitioner.

-----  
I, [NAME OF PERSON SERVING MOTION ON AGC], affirm this \_\_\_\_  
day of \_\_\_\_\_, 20\_\_, under the penalties of perjury under the laws of New  
York, which may include a fine or imprisonment, that the foregoing is true, and I  
understand that this document may be filed in an action or proceeding in a court of  
law:

1. [I am/I am not] a party to the action, am over 18 years of age and  
reside at [complete mailing **and** email address of person serving motion].

2. On [date of service] I served via email the within Notice of Motion for  
Reinstatement, Affirmation in Support of Motion for Reinstatement and Exhibit(s)  
[A-X] upon:

Attorney Grievance Committee  
Supreme Court, Appellate Division  
First Judicial Department  
180 Maiden Lane, FL 17  
New York, New York 10038  
[AD1-AGC@nycourts.gov](mailto:AD1-AGC@nycourts.gov)  
Attn: 468-a Reinstatements Clerk

[signature \_\_\_\_\_]  
[Name of person serving motion]

SAMPLE