

REQUEST FOR JUDICIAL INTERVENTION

UCS-840 (7/2012)

Supreme _____ **COURT, COUNTY OF** **New York**

Index No: _____ **Date Index Issued:** _____

For Court Clerk Use Only:
IAS Entry Date
Judge Assigned
RJI Date

CAPTION: Enter the complete case caption. Do not use et al or et ano. If more space is required, attach a caption rider sheet.

In the Matter of a Proceeding under Article 70 of the CPLR for a Writ of Habeas Corpus,
THE NONHUMAN RIGHTS PROJECT, INC. on behalf of TOMMY, Petitioner

Plaintiff(s)/Petitioner(s)

-against-

PATRICK C. LAVERY, individually and as an officer of Circle L Trailer Sales, Inc., DIANE LAVERY and CIRCLE L TRAILER SALES, INC., Respondents.

Defendant(s)/Respondent(s)

NATURE OF ACTION OR PROCEEDING: Check ONE box only and specify where indicated.

MATRIMONIAL

Contested

NOTE: For all Matrimonial actions where the parties have children under the age of 18, complete and attach the **MATRIMONIAL RJI Addendum**.
For Uncontested Matrimonial actions, use RJI form UD-13.

COMMERCIAL

Business Entity (including corporations, partnerships, LLCs, etc.)

Contract

Insurance (where insurer is a party, except arbitration)

UCC (including sales, negotiable instruments)

Other Commercial: _____ (specify)

NOTE: For Commercial Division assignment requests [22 NYCRR § 202.70(d)], complete and attach the **COMMERCIAL DIV RJI Addendum**.

TORTS

Asbestos

Breast Implant

Environmental: _____ (specify)

Medical, Dental, or Podiatric Malpractice

Motor Vehicle

Products Liability: _____ (specify)

Other Negligence: _____ (specify)

Other Professional Malpractice: _____ (specify)

Other Tort: _____ (specify)

REAL PROPERTY: How many properties does the application include? _____

Condemnation

Mortgage Foreclosure (specify): _____ Residential Commercial

Property Address: _____
Street Address City State Zip

NOTE: For Mortgage Foreclosure actions involving a one- to four-family, owner-occupied, residential property, or an owner-occupied condominium, complete and attach the **FORECLOSURE RJI Addendum**.

Tax Certiorari - Section: _____ Block: _____ Lot: _____

Tax Foreclosure

Other Real Property: _____ (specify)

OTHER MATTERS

Certificate of Incorporation/Dissolution [see **NOTE** under Commercial]

Emergency Medical Treatment

Habeas Corpus

Local Court Appeal

Mechanic's Lien

Name Change

Pistol Permit Revocation Hearing

Sale or Finance of Religious/Not-for-Profit Property

Other: _____ (specify)

SPECIAL PROCEEDINGS

CPLR Article 75 (Arbitration) [see **NOTE** under Commercial]

CPLR Article 78 (Body or Officer)

Election Law

MHL Article 9.60 (Kendra's Law)

MHL Article 10 (Sex Offender Confinement-Initial)

MHL Article 10 (Sex Offender Confinement-Review)

MHL Article 81 (Guardianship)

Other Mental Hygiene: _____ (specify)

Other Special Proceeding: Pet for a Writ of Habeas Corpus and Order to Show Cause _____ (specify)

STATUS OF ACTION OR PROCEEDING: Answer YES or NO for EVERY question AND enter additional information where indicated.

	YES	NO	
Has a summons and complaint or summons w/notice been filed?	<input type="radio"/>	<input checked="" type="radio"/>	If yes, date filed: _____
Has a summons and complaint or summons w/notice been served?	<input type="radio"/>	<input checked="" type="radio"/>	If yes, date served: _____
Is this action/proceeding being filed post-judgment?	<input type="radio"/>	<input checked="" type="radio"/>	If yes, judgment date: _____

NATURE OF JUDICIAL INTERVENTION: Check ONE box only AND enter additional information where indicated.

- Infant's Compromise
- Note of Issue and/or Certificate of Readiness
- Notice of Medical, Dental, or Podiatric Malpractice Date Issue Joined: _____
- Notice of Motion Relief Sought: _____ Return Date: _____
- Notice of Petition Relief Sought: _____ Return Date: _____
- Order to Show Cause Relief Sought: Habeas Corpus Return Date: _____
- Other Ex Parte Application Relief Sought: _____
- Poor Person Application
- Request for Preliminary Conference
- Residential Mortgage Foreclosure Settlement Conference
- Writ of Habeas Corpus
- Other (specify): _____

RELATED CASES: List any related actions. For Matrimonial actions, include any related criminal and/or Family Court cases. If additional space is required, complete and attach the **RJI Addendum**. If none, leave blank.

Case Title	Index/Case No.	Court	Judge (if assigned)	Relationship to Instant Case
THE NONHUMAN RIGHTS PROJECT, INC. v. LAVERY, et al	02051	Supreme Court, Fulton County	Joseph M. Sise	same parties, same issues of law
THE NONHUMAN RIGHTS PROJECT, INC. v. STANLEY, et al	152736/15	Supreme Court, New York County	Barbara Jaffe	common issue of law
THE NONHUMAN RIGHTS PROJECT, INC. v. STANLEY	32098/13	Supreme Court, Suffolk County	W. Gerard Asher	common issue of law

PARTIES: For parties without an attorney, check "Un-Rep" box AND enter party address, phone number and e-mail address in space provided. If additional space is required, complete and attach the **RJI Addendum**.

Un-Rep	Parties:	Attorneys and/or Unrepresented Litigants:	Issue Joined (Y/N):	Insurance Carrier(s):
<input type="checkbox"/>	THE NONHUMAN RIGHTS PROJECT, INC. Last Name on behalf of TOMMY First Name Primary Role: Petitioner Secondary Role (if any):	Stein Elizabeth Last Name First Name Firm Name 5 Dunhill Road New Hyde Park New York 11040 Street Address City State Zip +1 (516) 747-4726 +1 (516) 742-6680 liddysteine@aol.com Phone Fax e-mail	<input type="radio"/> YES <input checked="" type="radio"/> NO	
<input type="checkbox"/>	LAVERY Last Name PATRICK C. First Name Primary Role: Respondent Secondary Role (if any):	Spring Arthur Carl Last Name First Name Firm Name 10 South Market Street Johnstown New York 12095 Street Address City State Zip +1 (518) 762-4503 Phone Fax e-mail	<input type="radio"/> YES <input checked="" type="radio"/> NO	
<input type="checkbox"/>	LAVERY Last Name DIANE First Name Primary Role: Respondent Secondary Role (if any):	Spring Arthur Carl Last Name First Name Firm Name 10 South Market Street Johnstown New York 12095 Street Address City State Zip +1 (518) 762-4503 Phone Fax e-mail	<input type="radio"/> YES <input checked="" type="radio"/> NO	
<input type="checkbox"/>	CIRCLE L TRAILER SALES, INC. Last Name First Name Primary Role: Respondent Secondary Role (if any):	Spring Arthur Car; Last Name First Name Firm Name 10 South Market Street Johnstown New York 12095 Street Address City State Zip +1 (518) 762-4503 Phone Fax e-mail	<input type="radio"/> YES <input checked="" type="radio"/> NO	

I AFFIRM UNDER THE PENALTY OF PERJURY THAT, TO MY KNOWLEDGE, OTHER THAN AS NOTED ABOVE, THERE ARE AND HAVE BEEN NO RELATED ACTIONS OR PROCEEDINGS, NOR HAS A REQUEST FOR JUDICIAL INTERVENTION PREVIOUSLY BEEN FILED IN THIS ACTION OR PROCEEDING.

Dated: 12/2/2015

1721083

ATTORNEY REGISTRATION NUMBER

Elizabeth Stein

SIGNATURE

Elizabeth Stein

PRINT OR TYPE NAME

Request for Judicial Intervention Addendum

Supreme

COURT, COUNTY OF New York

Index No: _____

For use when additional space is needed to provide party or related case information.

PARTIES: For parties without an attorney, check "Un-Rep" box AND enter party address, phone number and e-mail address in "Attorneys" space.

	Parties:	Attorneys and/or Unrepresented Litigants:	Issue Joined (Y/N):	Insurance Carrier(s):
<input type="checkbox"/>	List parties in caption order and indicate party role(s) (e.g. defendant; 3rd-party plaintiff). Last Name First Name Primary Role: Secondary Role (if any):	Provide attorney name, firm name, business address, phone number and e-mail address of all attorneys that have appeared in the case. For unrepresented litigants, provide address, phone number and e-mail address. Last Name First Name Firm Name Street Address City State Zip Phone Fax e-mail	<input type="radio"/> YES <input type="radio"/> NO	
<input type="checkbox"/>	Last Name First Name Primary Role: Secondary Role (if any):	Last Name First Name Firm Name Street Address City State Zip Phone Fax e-mail	<input type="radio"/> YES <input type="radio"/> NO	
<input type="checkbox"/>	Last Name First Name Primary Role: Secondary Role (if any):	Last Name First Name Firm Name Street Address City State Zip Phone Fax e-mail	<input type="radio"/> YES <input type="radio"/> NO	
<input type="checkbox"/>	Last Name First Name Primary Role: Secondary Role (if any):	Last Name First Name Firm Name Street Address City State Zip Phone Fax e-mail	<input type="radio"/> YES <input type="radio"/> NO	
<input type="checkbox"/>	Last Name First Name Primary Role: Secondary Role (if any):	Last Name First Name Firm Name Street Address City State Zip Phone Fax e-mail	<input type="radio"/> YES <input type="radio"/> NO	
<input type="checkbox"/>	Last Name First Name Primary Role: Secondary Role (if any):	Last Name First Name Firm Name Street Address City State Zip Phone Fax e-mail	<input type="radio"/> YES <input type="radio"/> NO	

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Case Title	Index/Case No.	Court	Judge (if assigned)	Relationship to Instant Case
THE NONHUMAN RIGHTS PROJECT INC., v. PRESTI, et al	151725	Supreme Court, Niagara County	Ralph A. Boniello, III	common issue of law