

**REQUEST FOR JUDICIAL INTERVENTION**

UCS-840 (REV 1/2000)

COURT \_\_\_\_\_ COUNTY \_\_\_\_\_ INDEX NO. \_\_\_\_\_ DATE PURCHASED \_\_\_\_\_

For Clerk Only
_____ IAS entry date
_____ Judge Assigned
_____ RJI Date

PLAINTIFF (S):

DEFENDANT (S):

Date issue joined: \_\_\_\_\_ Bill of particulars served (Y/N):     Yes     No

**NATURE OF JUDICIAL INTERVENTION** (check **ONE** box only **AND** enter information)

- |   |  |
|---|--|
| <input type="checkbox"/> Request for preliminary conference                   | <input type="checkbox"/> Notice of petition (return date: _____)                         |
| <input type="checkbox"/> Note of issue and/or certificate of readiness        | <input type="checkbox"/> Relief sought _____   |
| <input type="checkbox"/> Notice of motion (return date: _____)                | <input type="checkbox"/> Notice of medical or dental malpractice action (Specify: _____) |
| <input type="checkbox"/> Relief sought _____                                  | <input type="checkbox"/> Statement of net worth  |
| <input type="checkbox"/> Order to show cause (clerk enter return date: _____) | <input type="checkbox"/> Writ of habeas corpus   |
| <input type="checkbox"/> Relief sought _____                                  | <input type="checkbox"/> Other (Specify: _____)  |
| <input type="checkbox"/> Other ex parte application (Specify: _____)          |  |

**NATURE OF ACTION OR PROCEEDING** (Check **ONE** box only)

**MATRIMONIAL**

- |                                      |     |
|--------------------------------------|-----|
| <input type="checkbox"/> Contested   | -CM |
| <input type="checkbox"/> Uncontested | -UM |

**COMMERCIAL**

- |   |       |
|---|-------|
| <input type="checkbox"/> Contract   | -CONT |
| <input type="checkbox"/> Corporate  | -CORP |
| <input type="checkbox"/> Insurance (where insurer is a party, except arbitration) | -INS  |
| <input type="checkbox"/> UCC (including sales, negotiable instruments)            | -UCC  |
| <input type="checkbox"/> *Other Commercial  | -OC   |

**REAL PROPERTY**

- |  |       |
|--|-------|
| <input type="checkbox"/> Tax Certiorari      | -TAX  |
| <input type="checkbox"/> Foreclosure         | -FOR  |
| <input type="checkbox"/> Condemnation        | -COND |
| <input type="checkbox"/> Landlord/Tenant     | -LT   |
| <input type="checkbox"/> Other Real Property | -ORP  |

**OTHER MATTERS**

- |                                  |      |
|----------------------------------|------|
| <input type="checkbox"/> * _____ | -OTH |
|----------------------------------|------|

**TORTS**

**Malpractice:**

- |  |      |
|--|------|
| <input type="checkbox"/> Medical / Podiatric                 | -MM  |
| <input type="checkbox"/> Dental                              | -DM  |
| <input type="checkbox"/> *Other Professional                 | -OPM |
| <input type="checkbox"/> _____                               |      |
| <input type="checkbox"/> Motor Vehicle                       | -MV  |
| <input type="checkbox"/> *Products Liability                 | -PL  |
| <input type="checkbox"/> _____                               |      |
| <input type="checkbox"/> Environmental                       | -EN  |
| <input type="checkbox"/> Asbestos                            | -ASB |
| <input type="checkbox"/> Breast Implant                      | -BI  |
| <input type="checkbox"/> *Other Negligence                   | -OTN |
| <input type="checkbox"/> _____                               |      |
| <input type="checkbox"/> *Other Tort (including intentional) | -OT  |

**SPECIAL PROCEEDINGS**

- |   |          |
|---|----------|
| <input type="checkbox"/> Art. 75 (Arbitration)      | -ART75   |
| <input type="checkbox"/> Art. 77 (Trusts)           | -ART77   |
| <input type="checkbox"/> Art. 78                    | -ART78   |
| <input type="checkbox"/> Election Law               | -ELEC    |
| <input type="checkbox"/> Guardianship (MHL Art. 81) | -GUARD81 |
| <input type="checkbox"/> *Other Mental Hygiene      | -MHYG    |
| <input type="checkbox"/> *Other Special Proceeding  | -OSP     |

\* If asterisk used, please specify further.

**Check "YES" or "NO" for each of the following questions:**

Is this action / proceeding against a

YES NO

- Municipality: (Specify: \_\_\_\_\_)
- Public Authority: (Specify: \_\_\_\_\_)
- Does this action / proceeding seek equitable relief?
- Does this action / proceeding seek recovery for personal injury?
- Does this action / proceeding seek recovery for property damage?

**Pre-Note Time Frames: (This applies to all cases except Contested Matrimonials and Tax Certiorari cases)**

Estimated time period for case to be ready for trial (from filing of RJI to filing of Note of Issue):

- Expedited: 0-8 months
- Standard: 9-12 months
- Complex: 13-15-months

**Contested Matrimonial Cases Only: (check and give date)**

- Has summons been served?  No  Yes, Date \_\_\_\_\_
- Was a Notice of No Necessity filed?  No  Yes, Date \_\_\_\_\_

**ATTORNEY (S) FOR PLAINTIFF (S):**

Self- Repr. **	Name	Address	Phone No.
<input type="checkbox"/>			
<input type="checkbox"/>			

**ATTORNEY (S) FOR DEFENDANT (S):**

Self- Repr. **	Name	Address	Phone No.
<input type="checkbox"/>			
<input type="checkbox"/>			

\*\* Self Represented: parties representing themselves, without an attorney, should check the "Self Repr." box and enter their Name, Address and Phone Number in the space provided above for attorneys.

**INSURANCE CARRIERS:**

**RELATED CASES: (If NONE, write "NONE" below)**

TITLE INDEX NO. COURT NATURE OF RELATIONSHIP

I AFFIRM UNDER PENALTY OF PERJURY THAT, TO MY KNOWLEDGE, OTHER THAN 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:

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Print or type name)

\_\_\_\_\_  
Attorney for

ATTACH RIDER SHEET IF NECESSARY TO PROVIDE REQUIRED INFORMATION