

THIS FORM MUST BE FILLED OUT COMPLETELY
TO REQUEST AN ADJOURNMENT OF ANY CONFERENCE OR MOTION

CASE NAME: _____

INDEX NUMBER: _____ LAST COURT APPEARANCE: _____

NATURE OF THIS ACTION (i.e. motor vehicle, Labor Law etc.): _____

NUMBER OF PRIOR ADJOURNMENTS (OF THIS PARTICULAR EVENT): _____

LAST ADJOURNMENT REQUESTED BY: _____

DATE OF CONFERENCE/MOTION APPEARANCE: _____

PROPOSED ADJOURNMENT DATES (AT LEAST TWO): _____

MOTION, CONFERENCE OR OTHER: _____

IF MOTION, NATURE OR RELIEF SOUGHT: _____

REASON FOR ADJOURNMENT: _____

DISCOVERY COMPLETED: (Y/N): _____ WAS NOT FILED? _____ DATE FILED/DATE TO FILE NOI: _____

IS THE ADJOURNMENT REQUEST ON CONSENT: _____

IF NO CONSENT, WHAT IS THE REASON FOR THE OBJECTION: _____

ATTORNEY REQUESTING ADJOURNMENT:

NAME: _____ PHONE: _____
EMAIL: _____ ATTORNEY FOR PLAINTIFF/DEFENDANT (circle)

ADVERSARY'S CONTACT INFO:

NAME: _____ PHONE: _____
EMAIL: _____ ATTORNEY FOR PLAINTIFF/DEFENDANT (circle)

NAME: _____ PHONE: _____
EMAIL: _____ ATTORNEY FOR PLAINTIFF/DEFENDANT (circle)

ALL REQUESTS MUST BE RECEIVED BY EMAIL OR FAX TO CHAMBERS BEFORE 4:45 P.M.
ON THE BUSINESS DAY PRIOR TO THE SCHEDULED APPEARANCE DATE.