

SUPREME COURT, CIVIL BRANCH
New York County
60 Centre Street, New York, N.Y. 10007

HELP CENTER
Room 116
646-386-3025

ORDER TO SHOW CAUSE WITH TRO

ATTACHED TO THIS ORDER TO SHOW CAUSE WITH TRO, you will find an Affidavit of Compliance (Uniform Rule Section 202). This Affidavit **MUST** be filled out and notarized with the Order to Show Cause with TRO submitted in Room 315. **Failure to submit this document may result in your application being denied by the court.**

[Print in ***black*** ink all areas in bold letters. Other spaces are for Court use].

At I.A.S. Part ____ of the Supreme Court of the State of New York, held in and for the County of New York at the Courthouse therefore, 60 Centre Street, New York, N.Y., on the ____ day of _____, 20__

PRESENT: HON. _____
Justice of the Supreme Court
-----X

_____,
[fill in name(s)] Plaintiff(s)
- against -

Index Number

ORDER TO SHOW CAUSE
WITH T.R.O.
IN CIVIL ACTION

_____,
[fill in name(s)] Defendants(s)
-----X

Upon reading and filing the affidavit(s) of

_____ [your name(s)], sworn to on _____, 20__

[date Affidavit in Support notarized], and upon the exhibits attached to the affidavit,

[Identify Exhibits below. List additional Exhibits on separate page.]

Exhibit A-

Let the party or attorney in opposition show cause at I.A.S. Part _____, Room _____, of this Court, to be held at the Courthouse, 60 Centre Street, New York, N.Y., on the ____ day of _____, 20__ at _____ o'clock in the _____ noon or as soon as such party or attorney may be heard why an order should not be made, providing the following relief:

[briefly describe what you are asking the Court to do]: _____

for the reasons that [*briefly describe the reasons why you should be granted what you are requesting*]

Pending the hearing of this motion it is

ORDERED that [*describe what you are asking this court to stay*]

Sufficient cause appearing therefore, let personal service of a copy of this order, the affidavit in support, and all other papers upon which this order is granted, upon all other parties to this action or their attorneys, who have appeared in this action, on or before the ____ day of _____, 20____ be deemed good and sufficient. An affidavit or other proof of service shall be presented to this Court on the return date directed in the second paragraph of this order.

ENTER

J.S.C.

[Print in black ink all areas in bold letters]

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF NEW YORK

-----X

Index Number

[fill in names(s)]

_____,
Plaintiff(s)/Petitioner(s),

- against -

AFFIDAVIT IN SUPPORT

[fill in name(s)]

_____,
Defendant(s)/Respondent

-----X

STATE OF NEW YORK)
COUNTY OF NEW YORK)

ss:

_____ **[your name]**, being duly sworn, deposes
and says:

1. I am **[circle one]** the plaintiff/ petitioner/ defendant/ respondent in this matter. I make this
affidavit in support of this motion for an order **[Describe what you are asking the Court to do. This
relief must also be stated in the Notice of Motion or Order to Show Cause.]** _____

2. I believe the Court should grant this motion because **[Explain why you should be granted
what you are requesting. Attach, identify, and explain any Exhibits (documents) you wish to
submit to the court in support of your position. Add more pages if needed.]** _____

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF NEW YORK

-----X

Index Number

[fill in name(s)] Plaintiff(s)/Petitioner(s)

- against -

[fill in name(s)] Defendant(s)/Respondent(s)

UNIFORM RULE SECTION 202.7
AFFIDAVIT OF COMPLIANCE

-----X
STATE OF NEW YORK)
COUNTY OF _____) ss:

_____, [your name], being duly sworn, deposes and says:
I am the self represented [circle one] plaintiff / defendant in this matter. I make this supplemental affidavit in support of my Order to Show Cause for a Temporary Restraining Order (TRO).

[Check box that applies]

- I have made a good faith effort to notify the party against whom the TRO is sought of the date, time and place that this request will be made in a manner sufficient to permit the party an opportunity to appear in response to the application as follows:

On [date] _____, 200__, at [time] _____ AM / PM, I contacted by telephone, the [circle one] plaintiff / plaintiff's attorney / defendant / defendant's attorney / other named below.

[name, address, telephone number]

I informed the above named party that on [date and time] _____, 200__, at _____ AM / PM, I will submit the Order to Show Cause to the [name of Judge] Hon. _____, located at [circle one] 60 - 80 - 100 - 111 Centre St. / 71 Thomas St., Part _____ [number], Room _____ [number], [telephone number] (646) 386 - _____.

When informed by the court of the date, time and place the Judge is available to hear argument on the TRO, I will immediately notify the above named party by telephone.

- I have not contacted the party against whom the TRO is sought of the date, time and place this request will be made. I believe that by giving notice there will be significant prejudice to me for the following reason(s):
[state reasons] _____

Sworn to before me this
____ day of _____, 200__

[sign your name in front of a notary]

Notary Public

[print your name]

[your address and telephone number]

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF NEW YORK

-----x

Index Number

[fill in name(s)] Plaintiff(s)/Petitioner(s),

- against-

AFFIDAVIT OF SERVICE AFTER
COMMENCEMENT OF LITIGATION

[fill in name(s)] Defendant(s)/Respondent(s).

-----x

STATE OF NEW YORK

COUNTY OF _____ ss:

I, [name of person who served papers] _____,

being duly sworn, depose and say:

I am over 18 years of age and am not a party to this case.

I reside at [your address] _____

On [date of service] _____, 20__, at [time of day] _____ AM/PM, I served a true copy of the following papers [identify papers served] _____

_____, in the following manner. [check box that applies]:

Personal Service By personally delivering the papers to [identify person served] _____ at [address] _____

The individual I served had the following characteristics [check one box in each category]

- | <u>Sex</u> | <u>Height</u> | <u>Weight</u> | <u>Age</u> |
|---------------------------------|--------------------------------------|---|--|
| <input type="checkbox"/> Male | <input type="checkbox"/> Under 5' | <input type="checkbox"/> Under 100 lbs. | <input type="checkbox"/> 21 - 34 years |
| <input type="checkbox"/> Female | <input type="checkbox"/> 5'0" - 5'3" | <input type="checkbox"/> 100 - 130 lbs. | <input type="checkbox"/> 35 - 50 years |
| | <input type="checkbox"/> 5'4" - 5'8" | <input type="checkbox"/> 131 - 160 lbs. | <input type="checkbox"/> 51 - 61 years |
| | <input type="checkbox"/> 5'9" - 6'0" | <input type="checkbox"/> 161 - 200 lbs. | <input type="checkbox"/> Over 61 years |
| | <input type="checkbox"/> Over 6' | <input type="checkbox"/> Over 200 lbs. | |

Color of skin [describe] _____ Hair color _____

Other identifying features, if any [describe]: _____

Mail By mailing the same in a sealed envelope, with postage prepaid thereon, in a post office or official depository of the U.S. Postal Service within the State of New York, addressed to the last-known address of the addressee(s) indicated below:

Overnight Delivery Service By depositing the same with an overnight delivery service in a wrapper properly addressed. Said delivery was made prior to the latest time designated by the overnight delivery service for overnight delivery. The delivery service used was [name of delivery service] _____

[Name(s) and address(es) of person(s) served by mail/overnight delivery]:

Sworn to before me this
_____ day of _____, 20__

[sign your name before a Notary]

Notary Public

[print your name]

*****NOTICE OF ENTRY*****

Sir/Madam:

Please take notice that the within is a (certified) true copy of a

_____ duly entered in the office of the clerk of
the within named court on the ___ day of _____, 20__

Dated: _____ Yours, etc.
Attorney for: _____
_____ Office and Post
_____ Office Address

To:
Attorney(s) for _____

*****NOTICE OF SETTLEMENT*****

Sir/Madam:

Please take notice that an _____,
of which the within is a true copy will be presented for settlement
to the Hon. _____, one of the Justices
of the within court, at _____, on
_____, 20__ at _____ AM/PM.

Dated: _____, 20__ Yours, etc.

Presenting Party _____

To:
Attorney(s) for _____

INDEX NUMBER _____

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF NEW YORK

In the Matter of the Application of _____,

Plaintiffs/Petitioners,
- against -

Defendant/Respondent,

To the best of my knowledge, information and belief, formed
after an inquiry reasonable under the circumstances, the presentation
of these papers and the contentions therein are not frivolous as defined
in subsection (c) of section 130 1.1 of the Rules of the Chief
Administrator (22NYCRR).

Sign Name: _____

Print Name: _____

Address: _____

Telephone: _____

Service of a copy of the within is hereby admitted

Dated: _____, 20__

Attorney for _____