



REQUEST FOR JUDICIAL INTERVENTION

Kings Supreme COURT, COUNTY OF Kings

Index No: \_\_\_\_\_ Date Index Issued: \_\_\_\_\_

For Court Use Only:

CAPTION Enter the complete case caption. Do not use et al or et ano. If more space is needed, attach a caption rider sheet.
ROCCO GENEROSO, MARY JOSEPHINE GENEROSO, ROCCO's BROOKLYN BAKERY, INC., PASTICCERIA ROCCO, INC.
-against-
BILL de BLASIO, THE CITY OF NEW YORK
Plaintiff(s)/Petitioner(s)
Defendant(s)/Respondent(s)

Table with 3 rows: IAS Entry Date, Judge Assigned, RJI Filed Date

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

COMMERCIAL
Business Entity (includes corporations, partnerships, LLCs, LLPs, etc.)
Contract
Insurance (where insurance company is a party, except arbitration)
UCC (includes sales and negotiable instruments)
Other Commercial (specify): \_\_\_\_\_

NOTE: For Commercial Division assignment requests pursuant to 22 NYCRR 202.70(d), complete and attach the COMMERCIAL DIVISION RJI ADDENDUM (UCS-840C).

REAL PROPERTY: Specify how many properties the application includes: \_\_\_\_\_

Condemnation
Mortgage Foreclosure (specify): Residential Commercial
Property Address: \_\_\_\_\_
NOTE: For Mortgage Foreclosure actions involving a one to four-family, owner-occupied residential property or owner-occupied condominium, complete and attach the FORECLOSURE RJI ADDENDUM (UCS-840F).
Tax Certiorari - Section: Block: Lot:
Tax Foreclosure
Other Real Property (specify): \_\_\_\_\_

OTHER MATTERS

Certificate of Incorporation/Dissolution [see NOTE in COMMERCIAL section]
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): \_\_\_\_\_

MATRIMONIAL
Contested
NOTE: If there are children under the age of 18, complete and attach the MATRIMONIAL RJI Addendum (UCS-840M).
For Uncontested Matrimonial actions, use the Uncontested Divorce RJI (UD-13).

TORTS
Asbestos
Child Victims Act
Environmental (specify): \_\_\_\_\_
Medical, Dental, or Podiatric Malpractice
Motor Vehicle
Products Liability (specify): \_\_\_\_\_
Other Negligence (specify): \_\_\_\_\_
Other Professional Malpractice (specify): \_\_\_\_\_
Other Tort (specify): \_\_\_\_\_

SPECIAL PROCEEDINGS

CPLR Article 75 (Arbitration) [see NOTE in COMMERCIAL section]
[X] CPLR Article 78 (Body or Officer)
Election Law
Extreme Risk Protection Order
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 (specify): \_\_\_\_\_

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

Table with 3 columns: Question, YES, NO. Includes questions about summons filing and service.

NATURE OF JUDICIAL INTERVENTION: Check one box only and enter additional information where indicated.

Infant's Compromise
Extreme Risk Protection Order Application
Note of Issue/Certificate of Readiness
Notice of Medical, Dental, or Podiatric Malpractice Date Issue Joined: \_\_\_\_\_
Notice of Motion Relief Requested: \_\_\_\_\_ Return Date: \_\_\_\_\_
Notice of Petition Relief Requested: \_\_\_\_\_ Return Date: \_\_\_\_\_
Order to Show Cause Relief Requested: \_\_\_\_\_ Return Date: \_\_\_\_\_
Other Ex Parte Application Relief Requested: \_\_\_\_\_
Poor Person Application
[X] Request for Preliminary Conference
Residential Mortgage Foreclosure Settlement Conference
Writ of Habeas Corpus
Other (specify): \_\_\_\_\_

**RELATED CASES:** List any related actions. For Matrimonial cases, list any related criminal or Family Court cases. If none, leave blank. If additional space is required, complete and attach the **RJI Addendum (UCS-840A)**.

Case Title	Index/Case Number	Court	Judge (if assigned)	Relationship to instant case

**PARTIES:** For parties without an attorney, check the "Un-Rep" box and enter the party's address, phone number and email in the space provided. If additional space is required, complete and attach the **RJI Addendum (UCS-840A)**.

Un-Rep	Parties	Attorneys and/or Unrepresented Litigants	Issue Joined	Insurance
<input type="checkbox"/>	Name: GENEROSO, ROCCO Role(s): Plaintiff/Petitioner	PATRICIA FINN, PATRICIA FINN ATTORNEY, P.C., 58 E ROUTE 59 STE 4 , NANUET, NY 10954, patriciafinnattorney@gmail.com	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
<input type="checkbox"/>	Name: GENEROSO, MARY J. Role(s): Plaintiff/Petitioner	PATRICIA FINN, PATRICIA FINN ATTORNEY, P.C., 58 E ROUTE 59 STE 4 , NANUET, NY 10954, patriciafinnattorney@gmail.com	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
<input type="checkbox"/>	Name: ROCCO's BROOKLYN BAKERY, INC. Role(s): Plaintiff/Petitioner	PATRICIA FINN, PATRICIA FINN ATTORNEY, P.C., 58 E ROUTE 59 STE 4 , NANUET, NY 10954, patriciafinnattorney@gmail.com	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
<input type="checkbox"/>	Name: PASTICCERIA ROCCO, INC. Role(s): Plaintiff/Petitioner	PATRICIA FINN, PATRICIA FINN ATTORNEY, P.C., 58 E ROUTE 59 STE 4 , NANUET, NY 10954, patriciafinnattorney@gmail.com	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
<input type="checkbox"/>	Name: de BLASIO, BILL Role(s): Defendant/Respondent	Edward Murray, CORPORATION COUNSEL, 100 Church Street 5-319, New York, NY 10007, 212 356 4036, emurray@law.nyc.gov	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
<input type="checkbox"/>	Name: THE CITY OF NEW YORK Role(s): Defendant/Respondent	Edward Murray, CORPORATION COUNSEL, 100 Church Street 5-319, New York, NY 10007, 212 356 4036, emurray@law.nyc.gov	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
<input type="checkbox"/>	Name: Role(s):		<input type="checkbox"/> YES <input type="checkbox"/> NO	
<input type="checkbox"/>	Name: Role(s):		<input type="checkbox"/> YES <input type="checkbox"/> NO	
<input type="checkbox"/>	Name: Role(s):		<input type="checkbox"/> YES <input type="checkbox"/> NO	
<input type="checkbox"/>	Name: Role(s):		<input type="checkbox"/> YES <input type="checkbox"/> NO	

**I AFFIRM UNDER THE PENALTY OF PERJURY THAT, UPON INFORMATION AND BELIEF, THERE ARE NO OTHER RELATED ACTIONS OR PROCEEDINGS, EXCEPT AS NOTED ABOVE, NOR HAS A REQUEST FOR JUDICIAL INTERVENTION BEEN PREVIOUSLY FILED IN THIS ACTION OR PROCEEDING.**

Dated: 11/09/2021

PATRICIA ANN FINN  
Signature

4109997  
Attorney Registration Number

PATRICIA ANN FINN  
Print Name