NYSCEF DOC. NO. 7

## **REQUEST FOR JUDICIAL INTERVENTION**

RECEIVED NYSCEF: 10/02/2023 UCS-840

(rev. 11/24/2022)

Index No: 654820/2023 Date Index Issued: 10/02/2023 EACH POUTS Enter the complete case caption. Do not use et all or et ano. If more space is needed, attach a caption rider sheet.  Rachel Pouyafar  Pulnis/ITL/Patitionaria John Doe Nos. 1-25  NATURE OF ACTION OR PROCEEDING Check only one box and specify where indicated.  Defendantis/Ifrespondents  OMARICANA  INSURANCE  INSURANCE OF ACTION OR PROCEEDING Check only one box and specify where indicated.  INSURANCE OF COMPARISON. INSURANCE  INSURANCE OF ACTION OR PROCEEDING Check only one box and specify where indicated.  INSURANCE OF ACTION OR PROCEEDING Check only one box and specify where indicated.  INSURANCE OF ACTION OR PROCEEDING Check only one box and specify where indicated.  INSURANCE OF ACTION OR PROCEEDING Check only one box and specify where indicated.  INSURANCE OF ACTION OR PROCEEDING Check only one box and specify where indicated.  INSURANCE OF ACTION OR PROCEEDING Check only one box and specify where indicated.  INSURANCE OF ACTION OR PROCEEDING Check only one box and specify where indicated.  INSURANCE OF ACTION OR PROCEEDING Check only one box and specify where indicated.  INSURANCE OF ACTION OR PROCEEDING Check only one box and specify where indicated.  INSURANCE OF ACTION OR PROCEEDING Check only one box and specify where indicated.  INSURANCE OF ACTION OR PROCEEDING Check only one box and specify where indicated.  INSURANCE OF ACTION OR PROCEEDING Check only one box and specify where indicated.  INSURANCE OF ACTION OR PROCEEDING ON BOX ADDINOUNT (INSURANCE) Check on the Action of the PRACE OF ACTION OR PROCEEDING ON BOX ADDINOUNT (INSURANCE) Condemental (percify): Section on the four proceeding of the PRACE OF ACTION OR PROCEEDING ON BOX ADDINOUNT (INSURANCE) Condemental particle specify): Section of the PRACE OF ACTION OR PROCEEDING ON BOX ADDINOUNT (INSURANCE) Check Proceeding Specify): Section on the Proceeding Specify: Section on the Proc	(1	SUPREME COURT, COUN	TY OF	, , , ,
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Other Tort (specify):  OTHER MATTERS  SPECIAL PROCEEDINGS  Certificate of Incorporation/Dissolution [see NOTE in COMMERCIAL section]  CPLR Article 75 – Arbitration [see NOTE in COMMERCIAL section]  CPLR Article 75 – Arbitration [see NOTE in COMMERCIAL section]  CPLR Article 78 – Proceeding against a Body or Officer  Election Law  Extreme Risk Protection Order  MHL Article 9.60 – Kendra's Law  MHL Article 9.10 – Sex Offender Confinement (specify):  Other Mental Hygiene (specify):  Other Mental Hygiene (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 with notice been filed?  Has a summons and complaint or summons with notice been served?  Is this action/proceeding being filed post-judgment?  NATURE OF JUDICIAL INTERVENTION  Check one box only and enter additional information where indicated.  Infant's Compromise  Extreme Risk Protection Order Application  Note of Resu/Certificate of Readiness  Notice of Medical, Dental or Podiatric Malpractice  Date Issue Joined:  Return Date:  Order to Show Cause  Reilef Requested:  Return Date:  Poor Person Application  Request for Preliminary Conference  Residential Mortgage Foreclosure Settlement Conference  Writ of Habeas Corpus			-IX	
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se Title		Index/Case Number	and attach the RJI ADD Court	Judge (if assigned)	Relationship to ins	tant case	
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		s required, complete	and attach the RJI ADD				
<ul><li>Parties</li><li>Epullist parties in same order as listed in the</li></ul>		Attorneys and Unrep		me, firm name, address, phone an	d For each defendan	Insurance Carrie t, For each defenda	
caption and indicate roles (e.g., plaintiff, defendant, 3 <sup>rd</sup> party plaintiff, etc.)		email. For unrepresented parties, provide party's address, phone and email.		indicate if issue had been joined.	indicate insurance carrier, if applica		
Name: Role(s):	Rachel Pouyafar	Rishi Bhandari, Mar rb@mandelbhanda		Street, New York, NY 10005	OYES •NO		
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	4321	618		Rish	i Bhandari		
Attorney Registration Number				Print Name			