

NOTICE OF TRIAL OR INQUEST

Calendar No. (if any)

: For use of clerk

Index No.

:

CIVIL COURT OF THE CITY OF NEW YORK
COUNTY OF

:

.....

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:

.....

Trial by jury demanded

of all issues

of issues specified below

or attached hereto

Trial without jury

-against- Plaintiff(s)

Filed by attorney(s) for

Date summons served

Date service completed

Date issue joined

Nature of Action or Special Proceeding

Tort:

Motor Vehicle Negligence

Medical Malpractice

Other tort

Contract

Other (not itemized above)
(specify)

Defendant(s) :
.....

Special Preference claimed under

Indicate if this action is brought
as a class action

on the ground that

Amount demanded \$
Other relief

Insurance carrier(s), if known:

Attorney(s) for Plaintiff(s)

Attorney(s) for Defendant(s)

Office and P.O. Address

Office and P.O. Address

Telephone No.:

Telephone No.:

Note: The clerk will not accept this Note of Issue unless accompanied by a Certificate of Readiness.

CERTIFICATE OF READINESS FOR TRIAL

(Items 1-5 must be checked)

	Complete	Waived	Not Required
1. All pleadings served	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Bill of Particulars served	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Physical examinations completed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Medical reports exchanged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Discovery proceedings now known to be necessary completed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. There are no outstanding requests for discovery.			
7. There has been a reasonable opportunity to complete the foregoing proceedings.			
8. The case is ready for trial.			

Dated:

(Attorney must sign above and type name below)

Attorney(s) for:

Office and Post Office Address

Telephone No.: