

NO: \_\_\_\_\_

LOUISIANA COURT OF APPEAL, FOURTH CIRCUIT  
WRIT APPLICATION INTAKE FORM

To be completed by counsel filing writ application

TITLE:

\_\_\_\_\_

VS.

\_\_\_\_\_

**EXPEDITED CONSIDERATION/STAY ORDER:**

Is there a hearing or trial date? YES NO (check one) If  
yes, when is the hearing/trial date? \_\_\_\_\_ (mm/dd/yyyy)

Are you seeking expedited consideration and/or a stay order? YES NO (check one)

Are you simultaneously filing this pleading in the La. Supreme Court? YES NO  
(check one)

Present status of this case: PRE-TRIAL TRIAL IN PROGRESS POST-TRIAL  
(check one)

Type of proceeding: JURY TRIAL BENCH TRIAL

**LEAD COUNSEL INFORMATION**

APPLICANT/RELATOR

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Bar Roll: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

RESPONDENT

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Bar Roll: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

Was relief applied for in the trial court? YES NO (check one)  
Who was the applicant? PLAINTIFF DEFENDANT OTHER (check one)  
Was a stay requested in the trial court? YES NO (check one)  
If so: DENIED GRANTED (check one and if so, specify duration of stay) \_\_\_\_\_  
Trial court's ruling: \_\_\_\_\_

Has there previously been any other filings (appeals or writ applications) in this Court in this matter? YES NO  
(check one and, if so, specify): \_\_\_\_\_

**PENDING CASE INFORMATION**

Are there any appeals or applications for supervisory review related to the present matter currently pending before this  
Court? YES NO (check one)

If so, please indicate the title, case number, and date of original filing and whether such pending matters will impact the  
current filing or will the current filing impact any of the pending  
matters: \_\_\_\_\_

**DISTRICT, ADMINISTRATIVE, OR OTHER COURT INFORMATION**

Parish and Judicial District or Tribunal Court: \_\_\_\_\_ Docket No. \_\_\_\_\_  
Judge, Commissioner, or Hearing Officer: \_\_\_\_\_ Section/Division: \_\_\_\_\_  
Date of Ruling or Judgment: \_\_\_\_\_

Present Case Status: Pre-Trial Trial in Progress Jury Trial Bench Trial Post-Trial (check one)

**COUNSEL'S VERIFICATION**

I, undersigned counsel, certify that the above information and all of the information contained in this application is true and correct to  
the best of my knowledge and that all relevant pleadings, and rulings, as required by Uniform Rules 4-2, 4-3, 4-4, and 4-5 of the  
Courts of Appeal are attached to this filing. I further certify that a copy of this application has been mailed or delivered to the  
respondent judge and to all other counsel and unrepresented parties required by Local Rule 18. I understand that failure to comply  
with Uniform Rules 4-2, 4-3, 4-4, and 4-5 of the Courts of Appeal and Local Rule 18 may result in the dismissal or denial of my  
application. I SHALL IMMEDIATELY NOTIFY THE COURT IF THE NEED FOR EXPEDITED CONSIDERATION CHANGES  
DUE TO SETTLEMENT, CONTINUANCE, OR ANY OTHER CIRCUMSTANCE. FAILURE TO NOTIFY THE COURT MAY  
SUBJECT ME TO PUNISHMENT FOR CONTEMPT OF THE AUTHORITY OF THE COURT.

DATE (mm/dd/yyyy) PRINT NAME SIGNATURE AND BAR ROLL NO.