

Form C-A (for Agency Cases)

UNITED STATES COURT OF APPEALS FOR THE SECOND CIRCUIT

APPLICATION FOR ENFORCEMENT

PETITION FOR REVIEW

PRE-ARGUMENT STATEMENT

SEE NOTICE ON REVERSE. PLEASE TYPE OR PRINT. ATTACH ADDITIONAL PAGES IF NECESSARY.

NAME OF AGENCY: _____

AGENCY DOCKET NO.: _____

TITLE IN FULL: _____

ORDER NUMBER: _____
APPROXIMATE NO. OF PAGES IN RECORD: _____
JURISDICTION OF COURT OF APPEALS: _____

DATE ENTERED: _____
NO. OF EXHIBITS: _____
USCA _____

HAS THIS MATTER BEEN BEFORE THIS COURT PREVIOUSLY? Yes No IF YES, STATE:

CASE NAME: _____ CITATION: _____ DOCKET NO.: _____

ATTORNEY(S) FOR PETITIONER(S): _____
NAME

ADDRESS TELEPHONE

ATTORNEYS FOR RESPONDENT(S): _____
NAME

ADDRESS TELEPHONE

APPEAL TAKEN: AS OF RIGHT BY DISCRETION (SPECIFY STATUTES UNDER WHICH APPEAL IS TAKEN): _____ USCA _____

PETITIONER/APPLICANT IS AGENCY OTHER PARTY NON-PARTY. SPECIFY STANDING: _____

FACTS UPON WHICH VENUE IS BASED: _____

NATURE OF ORDER ON WHICH REVIEW OR ENFORCEMENT IS SOUGHT:

- ADMINISTRATIVE REGULATION/RULEMAKING
- ROUTES:
 - _____ COMMUNICATIONS
 - _____ COMMERCE
 - _____ OTHER: (SPECIFY) _____
- BENEFITS REVIEW
 - _____ HEALTH & SAFETY
 - _____ IMMIGRATION
 - _____ TARIFFS
- UNFAIR LABOR PRACTICE:
 - _____ EMPLOYER
 - _____ UNION

CONCISE DESCRIPTION OF PROCEEDINGS BELOW AND ORDER TO BE REVIEWED OR ENFORCED (NOTE THOSE PARTS OF THE ORDER FROM WHICH RELIEF IS SOUGHT):

ISSUES PROPOSED TO BE RAISE ON PETITION OR APPLICATION: _____
RELIEF SOUGHT: _____

TO YOUR KNOWLEDGE, IS THERE ANY CASE NOW PENDING OR ABOUT TO BE BROUGHT BEFORE THIS COURT OR ANY OTHER COURT OR ADMINISTRATIVE AGENCY WHICH:

- (A) ARISES FROM SUBSTANTIALLY THE SAME CASE OR CONTROVERSY AS THIS APPEAL? YES NO
- (B) INVOLVES AN ISSUE SUBSTANTIALLY THE SAME, SIMILAR, OR RELATED TO AN ISSUE IN THIS APPEAL? YES NO
(IF YES, STATE WHETHER "A" OR "B" OR BOTH AND PROVIDE:

DOCKET: _____ CASE NAME: _____

COURT OR AGENCY: _____ CITATION: _____ NUMBER: _____

FOR PETITIONER OR APPLICANT:

(PRINT) NAME OF PETITIONER NAME OF COUNSEL OF RECORD TELEPHONE

DATE

SIGNATURE OF COUNSEL OF RECORD