



Instructions

- 1. Fill out all sections and file with the court.
- 2. File at least 3 days before the date of the scheduled event.

Note: If the request is granted, the court will try to schedule the event for the requested date. However, if that date is not available, it will be scheduled for the next available date.

Name of case (First-named plaintiff v. First-named defendant) <b>Desiato Sand &amp; Gravel Corporation v. Richard Cheney</b>		
Judicial District of <b>Tolland</b>	Date of request <b>09/08/2015</b>	Date of scheduled event (if applicable) <b>09/09/2015</b>
Name of Judge who scheduled the event (if applicable) <b>Bright, J.</b>	Docket number <b>TTD CV 14 - 6008845 (S)</b>	

Requested Action ("X" box(es) that apply and give reason(s) for request below)

- Status Conference on or about: \_\_\_\_\_ Date \_\_\_\_\_
- Client/adjuster to be available by phone for \_\_\_\_\_ Event \_\_\_\_\_ scheduled on \_\_\_\_\_ Date \_\_\_\_\_
- Pretrial on or about 09/09/2015 Date \_\_\_\_\_
- Party to be excused from \_\_\_\_\_ Event \_\_\_\_\_ scheduled on \_\_\_\_\_ Date \_\_\_\_\_
- Other: \_\_\_\_\_

Reason(s) for request:

The parties have reached a tentative settlement agreement. The Defendant has asked for additional time to secure funds, and the Plaintiff consents. Upon payment of funds, the Plaintiff intends to file a withdrawal.

I agree to notify my client and all counsel of record and self-represented parties whether the requested action is granted or denied, and if granted, the specific ruling of the court. I have told all counsel and self-represented parties of record that I would be asking for the requested action. All Counsel and Self-represented Parties:

- Consent
- Do not consent to the action requested above

Signed (Person making request) 	Name of attorney and juris number or self-represented party (Print or type) <b>Michael J. Bonanno; 422766</b>
------------------------------------	--

The person requesting the action is the:

Plaintiff     Defendant     Attorney for Plaintiff     Attorney for Defendant

Firm name (if applicable) <b>Tavano, McCuin &amp; Bonanno, LLC</b>	Address <b>140 Glastonbury Blvd., Glastonbury, CT 06033</b>	Telephone number (with area code) <b>860-652-8600</b>
---	--	--

I certify that a copy of the above was mailed or delivered on the date shown below to all counsel and self-represented parties of record. A sheet is attached listing the name and address of each party the copy was mailed or delivered to.

Signed (Individual Attorney of self-represented party) 	Date <b>09/08/2015</b>
--	---------------------------

Order

Request is <input type="checkbox"/> Granted <input type="checkbox"/> Denied	Signed (Judge)	Date
--	----------------	------

**NOTICE**

The Judicial Branch of the State of Connecticut complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation in accordance with the ADA, contact a court clerk or an ADA contact person listed at [www.jud.ct.gov/ADA/](http://www.jud.ct.gov/ADA/)