

**AFFIDAVIT OF ATTORNEY SEEKING  
PERMISSION TO APPEAR PRO HAC VICE**

JD-CL-143 Rev. 4-23  
P.B. 2-16

STATE OF CONNECTICUT  
JUDICIAL BRANCH  
**SUPERIOR COURT**  
www.jud.ct.gov



**Instructions**

Complete Affidavit and deliver to Connecticut attorney making application on your behalf.

**Court Information:**

Judicial district	Address of court
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**If Application is for a Court Case:**

Name of case	Docket number
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**If Application is for a proceeding before a State or Municipal Agency, Commission, Board, or Tribunal:**

Name of out-of-state attorney	
<b>In Re Pro Hac Vice Application</b>	
Name of agency, commission, board or tribunal	Case number

**Affidavit:**

I, \_\_\_\_\_, being duly sworn, do depose and say:

I am over the age of 18 and believe in the duties and obligations of an oath.

I make this Affidavit in support of an Application to appear *pro hac vice* before (*name of court, agency, commission, board, or tribunal*) \_\_\_\_\_

for a proceeding regarding (*client name*) \_\_\_\_\_

I have a law office located at (*include firm name, business address, telephone number and e-mail, if applicable*):

I am a member in good standing of the bar(s) of: \_\_\_\_\_

I certify that:  There is no grievance pending against me in any jurisdiction, nor have I ever been reprimanded, suspended, placed on inactive status, disbarred or otherwise disciplined, nor have I ever resigned from the practice of law in any jurisdiction.

There is a grievance pending against me, or I have been disciplined as follows (*explain*):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I have paid the Client Security Fund Fee due for June of \_\_\_\_\_, the calendar year in which the application is made.

I hereby designate the Chief Clerk for the Judicial District of \_\_\_\_\_ as my agent upon whom process and service of notice may be served.

I agree to register with the Statewide Grievance Committee in accordance with the provisions of Chapter 2 of the Connecticut Rules of Practice while appearing in the matter in this State and for two years after the completion of the matter in which I have appeared *pro hac vice* and will notify the Statewide Grievance Committee of the expiration of the two year period.

I have appeared \_\_\_\_\_ times *pro hac vice* in the superior court or in any other proceedings in the State of Connecticut since I first appeared *pro hac vice* in this state; the case names and docket numbers of those proceedings are:

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I have previously been assigned Juris Number \_\_\_\_\_ as a *pro hac vice* attorney in Connecticut.

I understand that, unless excused by the judicial authority, Connecticut Attorney \_\_\_\_\_, who submitted the Application on my behalf, must be present at all proceedings, including depositions in a proceeding, and must sign all pleadings, briefs and other papers filed with the court, agency, commission, board, or tribunal named above, and assume full responsibility for them and for the conduct of the cause or proceeding and of this Affiant.

Good Cause exists to permit me to represent the client named in this Affidavit in the proceeding before the above named court, agency, commission, board, or tribunal.

*(Describe the facts or circumstances affecting the personal or financial welfare of the client that establish "good cause"):*

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Signed ( <i>Out-of-State Attorney/Affiant</i> )	Print name	Date signed
Subscribed and sworn to before me:	Signed ( <i>Commissioner of Superior Court/Notary Public</i> )	Date signed

**ADA 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 the Centralized ADA Office at **860-706-5310** or go to: [www.jud.ct.gov/ADA/](http://www.jud.ct.gov/ADA/)