HS Law Corp.
Otavio Haverroth Silva, SBN#343486
P.O. Box 90487
San Diego, CA 92169
(510) 241-9336

Non-Detained

UNITED STATES DEPARTMENT OF JUSTICE
EXECUTIVE OFFICE FOR IMMIGRATION REVIEW
IMMIGRATION COURT
900 Market Street, Suite 504
Philadelphia, PA 19107

In the Matter of	)	
Andrey Cabral de Lima	)	**File No. A 216-914-876**
In Removal Proceedings	)	

Immigration Judge: Fox, Melissa

Next Hearing Date: September 8, 2026, at 8:00 AM.

RESPONDENT'S APPLICATION FOR ASYLUM AND FOR WITHHOLDING OF REMOVAL – FORM I-589

Application for Asylum and for Withholding of Removal

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-589
OMB No. 1615-0067
Expires 09/30/2027

START HERE - Type or print in black ink. See the instructions for information about eligibility and how to complete and file this application. There is no filing fee for this application.

NOTE: ☒ Check this box if you also want to apply for withholding of removal under the Convention Against Torture.

Part A.I. Information About You

1. Alien Registration Number(s) (A-Number) *(if any)*	**2.** U.S. Social Security Number *(if any)*	**3.** USCIS Online Account Number *(if any)*
216 914 876	N/A	N/A

4. Complete Last Name	**5.** First Name	**6.** Middle Name
CABRAL DE LIMA	Andrey	N/A

7. What other names have you used *(include maiden name and aliases)?*
N/A

8. Residence in the U.S. *(where you physically reside)*

Street Number and Name	Apt. Number
3225 Unruh Ave	N/A

City	State	Zip Code	Telephone Number
Philadelphia	PA	19149	(856) 4951707

(**NOTE:** *You must be residing in the United States to submit this form.*)

9. Mailing Address in the U.S. *(if different than the address in Item Number 8)*

In Care Of *(if applicable):*	Telephone Number
Otavio Haverroth Silva	(510) 2419336

Street Number and Name	Apt. Number
PO Box 90487	N/A

City	State	Zip Code
San Diego	CA	92169

10. Sex ☒ Male ☐ Female

11. Marital Status: ☐ Single ☒ Married ☐ Divorced ☐ Widowed

12. Date of Birth *(mm/dd/yyyy)*	**13.** City and Country of Birth
11/25/2004	Palmeiras dos Índios, Brazil

14. Present Nationality *(Citizenship)*	**15.** Nationality at Birth	**16.** Race, Ethnic, or Tribal Group	**17.** Religion
Brazilian	Brazilian	Latino	Catholic

18. *Check the box, a through c, that applies:* **a.** ☐ I have never been in Immigration Court proceedings.

b. ☒ I am now in Immigration Court proceedings. **c.** ☐ I am **not** now in Immigration Court proceedings, but I have been in the past.

19. *Complete 19 a through c.*

a. When did you last leave your country? *(mm/dd/yyyy)* 06/19/2021 **b.** What is your current I-94 Number, if any? N/A

c. List each entry into the U.S. beginning with your most recent entry. *List date (mm/dd/yyyy), place, and your status for each entry. (Attach additional sheets as needed.)*

Date	06/21/2021	Place	San Ysidro, CA	Status	EWI	Date Status Expires	N/A
Date	N/A	Place	N/A	Status	N/A		
Date	N/A	Place	N/A	Status	N/A		

20. What country issued your last passport or travel document?	**21.** Passport Number YF496503	**22.** Expiration Date *(mm/dd/yyyy)*
Brazil	Travel Document Number N/A	06/04/2036

23. What is your native language *(include dialect, if applicable)?*	**24.** Are you fluent in English?	**25.** What other languages do you speak fluently?
Portuguese	☐ Yes ☒ No	N/A

Part A.II. Information About Your Spouse and Children

For EOIR use only.	For USCIS use only.	Action:	Decision:
		Interview Date:	Approval Date:
		Asylum Officer ID No.:	Denial Date:
			Referral Date:

Your spouse ☐ I am not married. (Skip to **Your Children** below.)

1. Alien Registration Number (A-Number) *(if any)*	2. Passport/ID Card Number *(if any)*	3. Date of Birth *(mm/dd/yyyy)*	4. U.S. Social Security Number *(if any)*
N/A	A04034551	03/10/2004	173827307
5. Complete Last Name	**6.** First Name	**7.** Middle Name	**8.** Other names used *(include maiden name and aliases)*
Medina Carneiro	Sabrina	N/A	N/A
9. Date of Marriage *(mm/dd/yyyy)*	**10.** Place of Marriage	**11.** City and Country of Birth	
12/7/2025	Pennsylvania, U.S	Pennsylvania, U.S	
12. Nationality *(Citizenship)*	**13.** Race, Ethnic, or Tribal Group	**14.** Sex	
American	White	☐ Male ☒ Female	

15. Is this person in the U.S.?

☒ Yes *(Complete Blocks 16 to 24.)* ☐ No *(Specify location):*

16. Place of last entry into the U.S.	17. Date of last entry into the U.S. *(mm/dd/yyyy)*	18. I-94 Number *(if any)*	19. Status when last admitted *(Visa type, if any)*
N/A	N/A	N/A	N/A
20. What is your spouse's current status?	**21.** What is the expiration date of his/her authorized stay, if any? *(mm/dd/yyyy)*	**22.** Is your spouse in Immigration Court proceedings?	**23.** If previously in the U.S., date of previous arrival *(mm/dd/yyyy)*
U.S. Citizen	N/A	☐ Yes ☒ No	N/A

24. If in the U.S., is your spouse to be included in this application? *(Check the appropriate box.)*

☐ Yes

☒ No

Your Children. List **all** of your children, regardless of age, location, or marital status.

☒ I do not have any children. *(Skip to Part A.III., Information about your background.)*

☐ I have children. Total number of children: _____.

(**NOTE:** *Use Form I-589 Supplement A or attach additional sheets of paper and documentation if you have more than four children.)*

1. Alien Registration Number (A-Number) *(if any)*	2. Passport/ID Card Number *(if any)*	3. Marital Status *(Married, Single, Divorced, Widowed)*	4. U.S. Social Security Number *(if any)*
N/A	N/A	N/A	N/A
5. Complete Last Name	**6.** First Name	**7.** Middle Name	**8.** Date of Birth *(mm/dd/yyyy)*
N/A	N/A	N/A	N/A
9. City and Country of Birth	**10.** Nationality *(Citizenship)*	**11.** Race, Ethnic, or Tribal Group	**12.** Sex
N/A	N/A	N/A	☐ Male ☐ Female

13. Is this child in the U.S. ? ☐ Yes *(Complete Blocks 14 to 21.)* ☐ No *(Specify location)*: N/A

14. Place of last entry into the U.S.	15. Date of last entry into the U.S. *(mm/dd/yyyy)*	16. I-94 Number *(If any)*	17. Status when last admitted *(Visa type, if any)*
N/A	N/A	N/A	N/A
18. What is your child's current status?	**19.** What is the expiration date of his/her authorized stay, if any? *(mm/dd/yyyy)*	**20.** Is your child in Immigration Court proceedings?	
N/A	N/A	☐ Yes ☐ No	

21. If in the U.S., is this child to be included in this application? *(Check the appropriate box.)*

☐ Yes

☐ No

Part A.II. Information About Your Spouse and Children (continued)

1. Alien Registration Number (A-Number) *(if any)* N/A	**2.** Passport/ID Card Number *(if any)* N/A	**3.** Marital Status *(Married, Single, Divorced, Widowed)* N/A	**4.** U.S. Social Security Number *(if any)* N/A
5. Complete Last Name N/A	**6.** First Name N/A	**7.** Middle Name N/A	**8.** Date of Birth *(mm/dd/yyyy)* N/A
9. City and Country of Birth N/A	**10.** Nationality *(Citizenship)* N/A	**11.** Race, Ethnic, or Tribal Group N/A	**12.** Sex ☐ Male ☐ Female

13. Is this child in the U.S. ? ☐ Yes *(Complete Blocks 14 to 21.)* ☐ No *(Specify location)*: N/A

14. Place of last entry into the U.S. N/A	**15.** Date of last entry into the U.S. *(mm/dd/yyyy)* N/A	**16.** I-94 Number *(If any)* N/A	**17.** Status when last admitted *(Visa type, if any)* N/A

18. What is your child's current status? N/A	**19.** What is the expiration date of his/her authorized stay, if any? *(mm/dd/yyyy)* N/A	**20.** Is your child in Immigration Court proceedings? ☐ Yes ☐ No

21. If in the U.S., is this child to be included in this application? *(Check the appropriate box.)*

☐ Yes

☐ No

1. Alien Registration Number (A-Number) *(if any)* N/A	**2.** Passport/ID Card Number *(if any)* N/A	**3.** Marital Status *(Married, Single, Divorced, Widowed)* N/A	**4.** U.S. Social Security Number *(if any)* N/A
5. Complete Last Name N/A	**6.** First Name N/A	**7.** Middle Name N/A	**8.** Date of Birth *(mm/dd/yyyy)* N/A
9. City and Country of Birth N/A	**10.** Nationality *(Citizenship)* N/A	**11.** Race, Ethnic, or Tribal Group N/A	**12.** Sex ☐ Male ☐ Female

13. Is this child in the U.S. ? ☐ Yes *(Complete Blocks 14 to 21.)* ☐ No *(Specify location)*: N/A

14. Place of last entry into the U.S. N/A	**15.** Date of last entry into the U.S. *(mm/dd/yyyy)* N/A	**16.** I-94 Number *(If any)* N/A	**17.** Status when last admitted *(Visa type, if any)* N/A

18. What is your child's current status? N/A	**19.** What is the expiration date of his/her authorized stay, if any? *(mm/dd/yyyy)* N/A	**20.** Is your child in Immigration Court proceedings? ☐ Yes ☐ No

21. If in the U.S., is this child to be included in this application? *(Check the appropriate box.)*

☐ Yes

☐ No

1. Alien Registration Number (A-Number) *(if any)* N/A	**2.** Passport/ID Card Number *(if any)* N/A	**3.** Marital Status *(Married, Single, Divorced, Widowed)* N/A	**4.** U.S. Social Security Number *(if any)* N/A
5. Complete Last Name N/A	**6.** First Name N/A	**7.** Middle Name N/A	**8.** Date of Birth *(mm/dd/yyyy)* N/A
9. City and Country of Birth N/A	**10.** Nationality *(Citizenship)* N/A	**11.** Race, Ethnic, or Tribal Group N/A	**12.** Sex ☐ Male ☐ Female

13. Is this child in the U.S. ? ☐ Yes *(Complete Blocks 14 to 21.)* ☐ No *(Specify location)*: N/A

14. Place of last entry into the U.S. N/A	**15.** Date of last entry into the U.S. *(mm/dd/yyyy)* N/A	**16.** I-94 Number *(If any)* N/A	**17.** Status when last admitted *(Visa type, if any)* N/A

18. What is your child's current status? N/A	**19.** What is the expiration date of his/her authorized stay, if any? *(mm/dd/yyyy)* N/A	**20.** Is your child in Immigration Court proceedings? ☐ Yes ☐ No

21. If in the U.S., is this child to be included in this application? *(Check the appropriate box.)*

☐ Yes

☐ No

Part A.III. Information About Your Background

1. List your last address where you lived before coming to the United States. If this is not the country where you fear persecution, also list the last address in the country where you fear persecution. *(List Address, City/Town, Department, Province, or State and Country.)*
*(***NOTE:** *Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)*

Number and Street *(Provide if available)*	City/Town	Department, Province, or State	Country	Dates From *(Mo/Yr)*	To *(Mo/Yr)*
Geraldo Vieira, n. 9	São Geraldo do Baixio	Minas Gerais	Brazil	07/2005	06/2021
N/A	N/A	N/A	N/A	N/A	N/A

2. Provide the following information about your residences during the past 5 years. List your present address first.
*(***NOTE:** *Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)*

Number and Street	City/Town	Department, Province, or State	Country	Dates From *(Mo/Yr)*	To *(Mo/Yr)*
3225 Unruh Ave	Philadelphia	Pennsylvania	United States	10/2021	PRESENT
51 Sandstone Ln	Willingboro	New Jersey	United States	06/2021	10/2021
Geraldo Vieira, n. 9	São Geraldo do Baixio	Minas Gerais	Brazil	07/2005	06/2021
N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A

3. Provide the following information about your education, beginning with the most recent school that you attended.
*(***NOTE:** *Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)*

Name of School	Type of School	Location *(Address)*	Attended From *(Mo/Yr)*	To *(Mo/Yr)*
Escola Estadual de São Geraldo do Baixio	High School	Rua Santa Luzia, 231, São Geraldo do Baixio, Minas Gerais, Brazil	02/2021	06/2021
Escola Estadual de São Geraldo do Baixio	Elementary School	Rua Santa Luzia, 231, São Geraldo do Baixio, Minas Gerais, Brazil	02/2017	12/2020
Escola Municipal Tereza Barbosa	Elementary School	Rua Santa Luzia, 393, São Geraldo do Baixio, Minas Gerais, Brazil	02/2012	12/2016
N/A	N/A	N/A	N/A	N/A

4. Provide the following information about your employment during the past 5 years. List your present employment first.
*(***NOTE:** *Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)*

Name and Address of Employer	Your Occupation	Dates From *(Mo/Yr)*	To *(Mo/Yr)*
Self-employed – Various addresses,Philadelphia,PA	Carpenter	11/2021	PRESENT
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A

5. Provide the following information about your parents and siblings (brothers and sisters). Check the box if the person is deceased.
(**NOTE**: *Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)*

Full Name	City/Town and Country of Birth	Current Location
Mother Arlete Cabral Teixeira	Ouro Branco, Brazil	☐ Deceased Philadelphia, United States
Father José Paixão de Lima	Lagoa do Ouro, Brazil	☐ Deceased Ouro Branco, Brazil
Sibling Marcelo Cabral de Lima	Águas Belas, Brazil	☐ Deceased Philadelphia, United States
Sibling N/A	N/A	☐ Deceased N/A
Sibling N/A	N/A	☐ Deceased N/A
Sibling N/A	N/A	☐ Deceased N/A

Part B. Information About Your Application

(**NOTE:** *Use Form I-589 Supplement B, or attach additional sheets of paper as needed to complete your responses to the questions contained in Part B.)*

When answering the following questions about your asylum or other protection claim (withholding of removal under 241(b)(3) of the INA or withholding of removal under the Convention Against Torture), you must provide a detailed and specific account of the basis of your claim to asylum or other protection. To the best of your ability, provide specific dates, places, and descriptions about each event or action described. You must attach documents evidencing the general conditions in the country from which you are seeking asylum or other protection and the specific facts on which you are relying to support your claim. If this documentation is unavailable or you are not providing this documentation with your application, explain why in your responses to the following questions.

Refer to Instructions, Part 1: Filing Instructions, Section II, "Basis of Eligibility," Parts A - D, Section V, Completing the Form," Part B, and Section VII, "Additional Evidence That You Should Submit," for more information on completing this section of the form.

1. Why are you applying for asylum or withholding of removal under section 241(b)(3) of the INA, or for withholding of removal under the Convention Against Torture? Check the appropriate box(es) below and then provide detailed answers to questions A and B below.

I am seeking asylum or withholding of removal based on:

- ☐ Race
- ☒ Political opinion
- ☐ Religion
- ☒ Membership in a particular social group
- ☐ Nationality
- ☒ Torture Convention

A. Have you, your family, or close friends or colleagues ever experienced harm or mistreatment or threats in the past by anyone?

☐ No ☒ Yes

If "Yes," explain in detail:

1. What happened;
2. When the harm or mistreatment or threats occurred;
3. Who caused the harm or mistreatment or threats; and
4. Why you believe the harm or mistreatment or threats occurred.

When I was approximately 15 years old, in September 2020, I was persuaded to join a criminal organization involved in drug trafficking, led by a man known as "Zeca," in São Geraldo do Baixio, Minas Gerais, Brazil. I believe that this criminal group is connected to the Primeiro Comando da Capital (PCC), one of the largest criminal organizations in Brazil, with transnational influence. I grew up in a family that faced serious financial difficulties, and at that time, I was looking for a way to earn money and help with household expenses. Because of my age and the vulnerable situation in which I found myself, I was influenced by promises of money and protection made by people associated with the group. I was never formally initiated into the organization and never held any leadership position.My involvement lasted until approximately mid-February 2021, when I decided to leave the criminal organization. I made this decision because I began to reject its criminal activities, including drug trafficking, violence, and the way its members treated people. I no longer wanted to contribute to those activities, obey the group's orders, or have any involvement with its members.After that, the leader of the organization and the other members began making repeated death threats against me and my family. They also frequently followed me when I left school. On one of those occasions, they followed me to my home while making death threats, and one of them kept a firearm visibly displayed at his waist. I believed the threats were real and that they were capable of carrying them out because they carried firearms, were known to use violence, knew where I lived, and had the means to find me and my family anywhere in Brazil.The threats continued until early June 2021, when my family and I fled Minas Gerais. I believe that I was, and continue to be, targeted by these threats because I refused to continue cooperating with the group and because my departure was viewed as an act of disobedience and betrayal. Within the practices and code of conduct of these organizations, such behavior is commonly punished with extreme violence, including death. Further details are included in my declaration.

B. Do you fear harm or mistreatment if you return to your home country?

☐ No ☒ Yes

If "Yes," explain in detail:

1. What harm or mistreatment you fear;
2. Who you believe would harm or mistreat you; and
3. Why you believe you would or could be harmed or mistreated.

I fear that I will suffer serious harm or be killed if I return to Brazil. I was threatened by people associated with the criminal group, who made it clear that they would harm or kill me because I decided to sever my ties with the organization. I also fear that they may attack or kill my wife or other members of my family in retaliation or as a way to target me. I am permanently regarded as a traitor because I left the group without its members' authorization. Under the rules of these criminal groups, leaving the organization without permission is considered betrayal, and betrayal is punishable by death. I believe that the group is connected to the Primeiro Comando da Capital (PCC), a criminal organization that operates throughout Brazil. For this reason, I fear that its members may use criminal contacts and resources to locate, harm, or kill me, regardless of where I live in the country. Unfortunately, the Brazilian government is unable or unwilling to protect me and my family. Further details are included in my declaration.

Part B. Information About Your Application (continued)

2. Have you or your family members ever been accused, charged, arrested, detained, interrogated, convicted and sentenced, or imprisoned in any country other than the United States (including for an immigration law violation)?

☒ No ☐ Yes

If "Yes," explain the circumstances and reasons for the action.

N/A

3.A. Have you or your family members ever belonged to or been associated with any organizations or groups in your home country, such as, but not limited to, a political party, student group, labor union, religious organization, military or paramilitary group, civil patrol, guerrilla organization, ethnic group, human rights group, or the press or media?

☐ No ☒ Yes

If "Yes," describe for each person the level of participation, any leadership or other positions held, and the length of time you or your family members were involved in each organization or activity.

Between September 2020 and mid-February 2021, when I was between 15 and 16 years old, I was involved with a criminal organization in the city of São Geraldo do Baixio, Minas Gerais, Brazil. I assisted with the transportation and delivery of drugs, always following the orders of the organization's members. I never held any leadership role, occupied any position of authority, or participated in any decision-making. My involvement lasted approximately five months, until I decided to leave the organization. I made this decision because I began to reject drug trafficking, violence, and the control the group exercised over me and other people. The members used fear and violence to force people to obey their orders. When I decided to leave, I made it clear that I disagreed with what they were doing and that I would no longer follow their orders. They viewed my decision as an act of disobedience and betrayal. As a result, they began treating me as an enemy and threatening me and my family. Further details are included in my declaration.

3.B. Do you or your family members continue to participate in any way in these organizations or groups?

☒ No ☐ Yes

If "Yes," describe for each person your or your family members' current level of participation, any leadership or other positions currently held, and the length of time you or your family members have been involved in each organization or group.

In February 2021, my mother discovered my involvement with the criminal group and intervened to remove me from that situation. Because I was still a teenager, she helped me understand the seriousness of the risks to which I was exposing myself. I no longer accepted drug trafficking, violence, threats, or the way the group's members controlled and treated people. I also no longer wanted to obey their orders or assist with their criminal activities. For these reasons, I decided to sever all ties with the group and reject any further participation in its criminal activities. Since then, I have not participated in, maintained contact with, or held any role in that group or any similar organization. I have dedicated myself to building an honest and peaceful life for myself and my family. Further details are included in my declaration.

4. Are you afraid of being subjected to torture in your home country or any other country to which you may be returned?

☐ No ☒ Yes

If "Yes," explain why you are afraid and describe the nature of torture you fear, by whom, and why it would be inflicted.

I fear being tortured and killed by members of the criminal group with which I was involved if I return to Brazil. The group uses extreme violence to punish those it considers traitors. Based on the time I spent in that environment and what I heard and learned about how the group operates, I know that people considered traitors are subjected to brutal beatings, physical assaults, and other forms of violent punishment before being killed.I am permanently considered a traitor because I left the group without authorization and refused to continue assisting with its criminal activities. I believe that, if I return to Brazil, I will be subjected to this type of treatment in retaliation for leaving the group and for my continued refusal to submit to it.I also fear that my wife or other members of my family may be harmed or killed as a way to pressure me or retaliate against me. I believe that the Brazilian authorities are unable or unwilling to protect me or my family from this harm. Further details are included in my declaration.

Part C. Additional Information About Your Application

(**NOTE:** *Use Form I-589 Supplement B, or attach additional sheets of paper as needed to complete your responses to the questions contained in Part C.*)

1. Have you, your spouse, your child(ren), your parents or your siblings ever applied to the U.S. Government for refugee status, asylum, or withholding of removal?

☐ No ☒ Yes

If "Yes," explain the decision and what happened to any status you, your spouse, your child(ren), your parents, or your siblings received as a result of that decision. Indicate whether or not you were included in a parent or spouse's application. If so, include your parent or spouse's A-number in your response. If you have been denied asylum by an immigration judge or the Board of Immigration Appeals, describe any change(s) in conditions in your country or your own personal circumstances since the date of the denial that may affect your eligibility for asylum.

My mother, Arlete Cabral Teixeira (A-Number 216-914-875), also has an Application for Asylum and for Withholding of Removal pending before this Immigration Court. My father, Jose Paixao de Lima (A-Number 216-914-874), and I were included as derivative beneficiaries on her application. That application remains pending before this Immigration Court, and no decision has been issued to date. My parents' proceedings remain consolidated before this Court. My case was severed and now proceeds independently before this Immigration Court. Further details are included in my declaration.

2.A. After leaving the country from which you are claiming asylum, did you or your spouse or child(ren) who are now in the United States travel through or reside in any other country before entering the United States?

☐ No ☒ Yes

2.B. Have you, your spouse, your child(ren), or other family members, such as your parents or siblings, ever applied for or received any lawful status in any country other than the one from which you are now claiming asylum?

☒ No ☐ Yes

If "Yes" to either or both questions (2A and/or 2B), provide for each person the following: the name of each country and the length of stay, the person's status while there, the reasons for leaving, whether or not the person is entitled to return for lawful residence purposes, and whether the person applied for refugee status or for asylum while there, and if not, why he or she did not do so.

Before entering the United States on June 21, 2021, my family and I spent approximately two days in Mexico. At the time, I was only 16 years old and was entirely dependent on my parents. They did not seek protection in Mexico because they did not believe our family would be safe in that country due to the violence committed by cartels and other groups involved in drug trafficking. Based on what we knew, criminal organizations exercised significant influence in Mexico, and we feared that local groups might have connections to Brazilian organized crime, including the Primeiro Comando da Capital (PCC). We did not have any lawful immigration status while we were in Mexico, and we do not have the right to return to that country for purposes of lawful residence. Further details are included in my declaration.

3. Have you, your spouse or your child(ren) ever ordered, incited, assisted or otherwise participated in causing harm or suffering to any person because of his or her race, religion, nationality, membership in a particular social group or belief in a particular political opinion?

☒ No ☐ Yes

If "Yes," describe in detail each such incident and your own, your spouse's, or your child(ren)'s involvement.

N/A

Part C. Additional Information About Your Application (continued)

4. After you left the country where you were harmed or fear harm, did you return to that country?

☒ No ☐ Yes

If "Yes," describe in detail the circumstances of your visit(s) (for example, the date(s) of the trip(s), the purpose(s) of the trip(s), and the length of time you remained in that country for the visit(s).)

N/A

5. Are you filing this application more than 1 year after your last arrival in the United States?

☐ No ☒ Yes

If "Yes," explain why you did not file within the first year after you arrived. You must be prepared to explain at your interview or hearing why you did not file your asylum application within the first year after you arrived. For guidance in answering this question, see Instructions, Part 1: Filing Instructions, Section V. "Completing the Form," Part C.

I entered the United States on June 21, 2021, when I was 16 years old. At that time, I spoke only Portuguese, had limited education, and was entirely dependent on my parents. Because I was a minor, they were responsible for handling the documents and making decisions regarding our immigration proceedings. My parents did not understand that there was a one-year deadline to file an asylum application, and I did not have the knowledge or ability to handle the process on my own. My family also faced financial difficulties, changes of residence, and a lack of legal guidance.In 2023, a removal order was entered against me after I failed to appear at a hearing that I did not know I was required to attend. Once we obtained legal assistance and learned about the order, my proceedings were reopened and once again proceeded together with my parents' cases. On November 19, 2025, my mother filed her Application for Asylum and for Withholding of Removal and included me as a derivative. Because our proceedings were still being handled together, I remained included in her application and did not file a separate Form I-589 at that time. Later, my personal and immigration circumstances changed, and my case was severed from my parents' proceedings. With the assistance of counsel, I began preparing my individual application and am filing it without further delay.I respectfully request that the delay be excused based on the circumstances explained above. Further details are included in my attached declaration.

6. Have you or any member of your family included in the application ever committed any crime and/or been arrested, charged, convicted, or sentenced for any crimes in the United States (including for an immigration law violation)?

☐ No ☒ Yes

If "Yes," for each instance, specify in your response: what occurred and the circumstances, dates, length of sentence received, location, the duration of the detention or imprisonment, reason(s) for the detention or conviction, any formal charges that were lodged against you or your relatives included in your application, and the reason(s) for release. Attach documents referring to these incidents, if they are available, or an explanation of why documents are not available.

Upon entering the United States near San Ysidro, California, on June 21, 2021, my family and I presented ourselves to Border Patrol agents. We were detained by immigration authorities for immigration processing. At the time, I was 16 years old and accompanied by my parents. I was charged as removable under section 212(a)(6)(A)(i) of the Immigration and Nationality Act. I remained in custody for approximately three days and was released with my parents on our own recognizance. My detention was solely related to my immigration status. I have never committed any crime in the United States. My purpose in entering the United States was to escape the serious threats and persecution I had suffered in Brazil and to seek protection. Further details are included in my declaration.

Part D. Your Signature

I certify, under penalty of perjury under the laws of the United States of America, that this application and the evidence submitted with it are all true and correct. Title 18, United States Code, Section 1546(a), provides in part: Whoever knowingly makes under oath, or as permitted under penalty of perjury under Section 1746 of Title 28, United States Code, knowingly subscribes as true, any false statement with respect to a material fact in any application, affidavit, or other document required by the immigration laws or regulations prescribed thereunder, or knowingly presents any such application, affidavit, or other document containing any such false statement or which fails to contain any reasonable basis in law or fact - shall be fined in accordance with this title or imprisoned for up to 25 years. I certify that I am physically present in the United States or seeking admission at a Port of Entry when I execute this application. I authorize the release of any information from my immigration record that U.S. Citizenship and Immigration Services (USCIS) needs to determine eligibility for the benefit I am seeking.

WARNING: **Applicants who are in the United States unlawfully are subject to removal if their asylum or withholding claims are not granted by an asylum officer or an immigration judge. Any information provided in completing this application may be used as a basis for the institution of, or as evidence in, removal proceedings even if the application is later withdrawn. Applicants determined to have knowingly made a frivolous application for asylum will be permanently ineligible for any benefits under the Immigration and Nationality Act. You may not avoid a frivolous finding simply because someone advised you to provide false information in your asylum application. If filing with USCIS, unexcused failure to appear for an appointment to provide biometrics (such as fingerprints) and your biographical information within the time allowed may result in an asylum officer dismissing your asylum application or referring it to an immigration judge. Failure without good cause to provide DHS with biometrics or other biographical information while in removal proceedings may result in your application being found abandoned by the immigration judge. See sections 208(d)(5)(A) and 208(d)(6) of the INA and 8 CFR sections 208.10, 1208.10, 208.20, 1003.47(d) and 1208.20.**

Print your complete name.	Write your name in your native alphabet.
Andrey Cabral de Lima	**N/A**

Did your spouse, parent, or child(ren) assist you in completing this application? ☒ No ☐ Yes *(If "Yes," list the name and relationship.)*

N/A	**N/A**	**N/A**	**N/A**
(Name)	*(Relationship)*	*(Name)*	*(Relationship)*

Did someone other than your spouse, parent, or child(ren) prepare this application? ☐ No ☒ Yes *(If "Yes,"complete Part E.)*

Asylum applicants may be represented by counsel. Have you been provided with a list of persons who may be available to assist you, at little or no cost, with your asylum claim? ☐ No ☐ Yes

Signature of Applicant *(The person in Part. A.I.)*

➡ [_____] **07/24/2026**

Sign your name so it all appears within the brackets — Date (mm/dd/yyyy)

Part E. Declaration of Person Preparing Form, if Other Than Applicant, Spouse, Parent, or Child

I declare that I have prepared this application at the request of the person named in Part D, that the responses provided are based on all information of which I have knowledge, or which was provided to me by the applicant, and that the completed application was read to the applicant in his or her native language or a language he or she understands for verification before he or she signed the application in my presence. I am aware that the knowing placement of false information on the Form I-589 may also subject me to civil penalties under 8 U.S.C. 1324c and/or criminal penalties under 18 U.S.C. 1546(a).

Signature of Preparer	Print Complete Name of Preparer
	Otavio Haverroth Silva

Daytime Telephone Number	Address of Preparer: Street Number and Name
(**510**) **2419336**	**PO Box 90487**

Apt. Number	City	State	Zip Code
N/A	**San Diego**	**CA**	**92169**

To be completed by an attorney or accredited representative (if any).	☐ **Select this box if Form G-28 is attached.**	**Attorney State Bar Number** (if applicable)	**Attorney or Accredited Representative USCIS Online Account Number** (if any)
		343486	**0 0 7 4 9 2 6 2 5 4 3 8**

Part F. To Be Completed at Asylum Interview, if Applicable

NOTE: *You will be asked to complete this part when you appear for examination before an asylum officer of the Department of Homeland Security, U.S. Citizenship and Immigration Services (USCIS).*

I swear (affirm) that I know the contents of this application that I am signing, including the attached documents and supplements, that they are ☐ all true or ☐ not all true to the best of my knowledge and that correction(s) numbered ____ to ____ were made by me or at my request. Furthermore, I am aware that if I am determined to have knowingly made a frivolous application for asylum I will be permanently ineligible for any benefits under the Immigration and Nationality Act, and that I may not avoid a frivolous finding simply because someone advised me to provide false information in my asylum application.

Signed and sworn to before me by the above named applicant on:

Signature of Applicant	Date *(mm/dd/yyyy)*
Write Your Name in Your Native Alphabet	Signature of Asylum Officer

Part G. To Be Completed at Removal Hearing, if Applicable

NOTE: *You will be asked to complete this Part when you appear before an immigration judge of the U.S. Department of Justice, Executive Office for Immigration Review (EOIR), for a hearing.*

I swear (affirm) that I know the contents of this application that I am signing, including the attached documents and supplements, that they are ☐ all true or ☐ not all true to the best of my knowledge and that correction(s) numbered _____ to _____ were made by me or at my request. Furthermore, I am aware that if I am determined to have knowingly made a frivolous application for asylum I will be permanently ineligible for any benefits under the Immigration and Nationality Act, and that I may not avoid a frivolous finding simply because someone advised me to provide false information in my asylum application.

Signed and sworn to before me by the above named applicant on:

Signature of Applicant	Date *(mm/dd/yyyy)*
Write Your Name in Your Native Alphabet	Signature of Immigration Judge

Application for Asylum and for Withholding of Removal Supplement A

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-589
OMB No. 1615-0069
Expires 09/30/2027

A-Number *(If available)*	Date
216 914 876	07/24/2026
Applicant's Name	Applicant's Signature
Andrey Cabral de Lima	

List All of Your Children, Regardless of Age or Marital Status

*(**NOTE:** Use this form and attach additional pages and documentation as needed, if you have more than four children)*

1. Alien Registration Number (A-Number) *(if any)*	**2.** Passport/ID Card Number *(if any)*	**3.** Marital Status *(Married, Single, Divorced, Widowed)*	**4.** U.S. Social Security Number *(if any)*
N/A	N/A	N/A	N/A
5. Complete Last Name	**6.** First Name	**7.** Middle Name	**8.** Date of Birth *(mm/dd/yyyy)*
N/A	N/A	N/A	N/A
9. City and Country of Birth	**10.** Nationality *(Citizenship)*	**11.** Race, Ethnic, or Tribal Group	**12.** Sex ☐ Male ☐ Female
N/A	N/A	N/A	

13. Is this child in the U.S. ? ☐ Yes *(Complete Blocks 14 to 21.)* ☐ No *(Specify location)*: N/A

14. Place of last entry into the U.S.	**15.** Date of last entry into the U.S. *(mm/dd/yyyy)*	**16.** I-94 Number *(If any)*	**17.** Status when last admitted *(Visa type, if any)*
N/A	N/A	N/A	N/A

18. What is your child's current status?	**19.** What is the expiration date of his/her authorized stay, if any? *(mm/dd/yyyy)*	**20.** Is your child in Immigration Court proceedings?
N/A	N/A	☐ Yes ☐ No

21. If in the U.S., is this child to be included in this application? *(Check the appropriate box.)*

☐ Yes

☐ No

1. Alien Registration Number (A-Number) *(if any)*	**2.** Passport/ID Card Number *(if any)*	**3.** Marital Status *(Married, Single, Divorced, Widowed)*	**4.** U.S. Social Security Number *(if any)*
N/A	N/A	N/A	N/A
5. Complete Last Name	**6.** First Name	**7.** Middle Name	**8.** Date of Birth *(mm/dd/yyyy)*
N/A	N/A	N/A	N/A
9. City and Country of Birth	**10.** Nationality *(Citizenship)*	**11.** Race, Ethnic, or Tribal Group	**12.** Sex ☐ Male ☐ Female
N/A	N/A	N/A	

13. Is this child in the U.S. ? ☐ Yes *(Complete Blocks 14 to 21.)* ☐ No *(Specify location)*: N/A

14. Place of last entry into the U.S.	**15.** Date of last entry into the U.S. *(mm/dd/yyyy)*	**16.** I-94 Number *(If any)*	**17.** Status when last admitted *(Visa type, if any)*
N/A	N/A	N/A	N/A

18. What is your child's current status?	**19.** What is the expiration date of his/her authorized stay, if any? *(mm/dd/yyyy)*	**20.** Is your child in Immigration Court proceedings?
N/A	N/A	☐ Yes ☐ No

21. If in the U.S., is this child to be included in this application? *(Check the appropriate box.)*

☐ Yes

☐ No

Application for Asylum and for Withholding of Removal Supplement B

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-589
OMB No. 1615-0069
Expires 09/30/2027

Additional Information About Your Claim to Asylum

A-Number *(if available)*	Date
216 914 876	**07/24/2026**
Applicant's Name	Applicant's Signature
Andrey Cabral de Lima	

NOTE: *Use this as a continuation page for any additional information requested. Copy and complete as needed.*

Part **N/A**

Question **N/A**

N/A

Andrey Cabral de Lima **File No. A 216-914-876**

PROOF OF SERVICE

On this day, I, Otavio Haverroth Silva, served a copy of the following documents:

RESPONDENT'S APPLICATION FOR ASYLUM AND FOR WITHHOLDING OF REMOVAL – FORM I-589

To the following:

Office Location:	**Mailing Address:**
Office of the Principal Legal Advisor Department of Homeland Security 900 Market Street, Suite 346 Philadelphia, PA 19107	US Immigration and Customs Enforcement US Department of Homeland Security Office of the Principal Legal Advisor 900 Market Street, Suite 346 Philadelphia, PA 19107

by:

☑ Through the EOIR Courts and Appeals System (ECAS), which will automatically send service notification to both parties that a new document has been filed.

Otavio Silva (Bar N. 343486)
Attorney at Law
P.O. Box 90487
San Diego, CA 92169
Counsel for Respondent