HS Law Corp.
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Non-detained

UNITED STATES DEPARTMENT OF JUSTICE
EXECUTIVE OFFICE FOR IMMIGRATION REVIEW
IMMIGRATION COURT
401 W Peachtree St, Ste 2600
Atlanta, GA 30308

In the Matter of	)	
Ecio Alves Taveira	)	**File No. A. 245-945–877**
In Removal Proceedings	)	

Immigration Judge: N/A

Next Hearing: N/A

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.

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)*
245945877	481-77-7225	N/A

4. Complete Last Name	**5.** First Name	**6.** Middle Name
ALVES TAVEIRA	Ecio	N/A

7. What other names have you used *(include maiden name and aliases)?*
Ecio Alves Taveira

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

Street Number and Name	Apt. Number
3219 Windcliff Dr	3202

City	State	Zip Code	Telephone Number
Marietta	GA	30067	(650) 445-9406

(**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	California	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
09/09/1959	Inhumas, Brazil

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

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)* 03/20/2024 **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 04/01/2024	Place Tecate 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 GF363110	**22.** Expiration Date *(mm/dd/yyyy)*
Brazil	Travel Document Number GF363110	10/12/2032

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: Interview Date, if applicable: _____ Asylum Officer ID No.: _____	Decision: Approval Date: _____ 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)*
245946033	GF363109	08/09/1967	N/A
5. Complete Last Name	**6.** First Name	**7.** Middle Name	**8.** Other names used *(include maiden name and aliases)*
CABRAL TAVEIRA	Kacia Divina	N/A	Kacia Divina Cabral
9. Date of Marriage *(mm/dd/yyyy)*	**10.** Place of Marriage	**11.** City and Country of Birth	
07/15/1994	Inhumas	Inhumas, Brazil	
12. Nationality *(Citizenship)*	**13.** Race, Ethnic, or Tribal Group	**14.** Sex	
Brazilian	Latina	☐ 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)*
Tecate CA	04/01/2024	N/A	EWI
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)*
No legal status	10/12/2032	☒ 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: 2.

(**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)*
242325668	GC720404	Married	877-78-1202
5. Complete Last Name	**6.** First Name	**7.** Middle Name	**8.** Date of Birth *(mm/dd/yyyy)*
CABRAL TAVEIRA ALMEIDA	Andreza	N/A	06/29/1997
9. City and Country of Birth	**10.** Nationality *(Citizenship)*	**11.** Race, Ethnic, or Tribal Group	**12.** Sex
Goiania, Brazil	Brazilian	White	☐ Male ☒ Female

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

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)*
Miami, FL	10/15/2021	678696700A2	B2
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?	
Asylum Applicant	04/14/2022	☐ 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)*	2. Passport/ID Card Number *(if any)*	3. Marital Status *(Married, Single, Divorced, Widowed)*	4. U.S. Social Security Number *(if any)*
245946122	GF363108	Single	N/A
5. Complete Last Name	**6.** First Name	**7.** Middle Name	**8.** Date of Birth *(mm/dd/yyyy)*
CABRAL TAVEIRA	Matheus	N/A	03/07/2002
9. City and Country of Birth	**10.** Nationality *(Citizenship)*	**11.** Race, Ethnic, or Tribal Group	**12.** Sex
Goiania, Brazil	Brazilian	White	☒ Male ☐ Female

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

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)*
Tecate, CA	04/01/2024	N/A	EWI

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?
No legal status	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
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)*: _____

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
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)*: _____

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.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)*
Rua 11, Q. 20 Lt. 18	Caldas Novas	Goias	Brazil	12/2023	03/2024
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)*
3219 Windcliff Dr apt 3202	Marietta	Georgia	USA	04/2026	Present
205 Old County Road	Belmont	California	USA	04/2024	04/2026
Rua 11, Q. 20 Lt. 18	Caldas Novas	Goias	Brazil	12/2023	03/2024
Rua Coronel Joao Batista, 76	Caldas Novas	Goias	Brazil	04/2022	12/2023
Rua Ceres, Q. 105 Lt. 20	Goiania	Goias	Brazil	02/2013	04/2022

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)*
Centro de Treinamento	High School	Vila Heitor, Inhumas, Brazil	02/1973	12/1977
Centro Educ Euripedes Barsanulfo	Elementary School	R S Jorge Sahium, Inhumas, Brazil	02/1968	12/1972
N/A	N/A	N/A	N/A	N/A
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)*
Apex Operations Group LLC, Marietta GA, 30064, USA	Driver	05/2026	Present
Nelci's Kitchen, 1080 Carolan Ave, Burlingame CA, 94010, USA	Kitchen Assistant	06/2024	11/2025
Superm. Fácil Atacarejo, Av. D, Rodovia GO 139, Caldas Novas, Brazil	Produce Clerk	11/2023	04/2024

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 Maria Batista Taveira	Inhumas, Brazil	☒ Deceased
Father Neftali Alves Taveira	Inhumas, Brazil	☒ Deceased
Sibling Almir Alves Taveira	Inhumas, Brazil	☐ Deceased Goiania - Brazil
Sibling Vilma Alves Taveira	Inhumas, Brazil	☐ Deceased Goiania - Brazil
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.

USCIS may adjudicate your application without conducting an interview and without issuing a request for evidence. Your application and any supporting evidence that you provide now may be your only opportunity to meet your burden of proof to establish eligibility for asylum before USCIS.

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.

My family and I were persecuted because we removed my son, Matheus Cabral Taveira, from one of Brazil's largest criminal organizations,the Comando Vermelho (CV), for opposing their criminal operations. Although I was never involved in crime, we faced continuous threats after we had Matheus hospitalized for his drug use and encouraged him to abandon the group and distance himself from its criminal activities. After deciding to leave the faction, my son was considered a traitor and sentenced to death by the CV - a punishment that extended to his family members for standing by him. They targeted me and my wife demanding his whereabouts, extorting us to pay his debts with the faction, and threatening to torture or kill us all. Despite relocating to other cities, they found us. I will provide a detailed statement before my Individual Hearing.

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'm afraid of being tortured, extorted, beaten, threatened, or killed because of my son's past involvement with Comando Vermelho (CV), one of the largest and most dangerous criminal organizations in Brazil, and my role in his decision to abandon it. Unfortunately, Brazil is not a safe place for me, as the CV's influence extends nationwide. From the moment my son left the organization, the group sentenced him to death, and I fear they will carry out this threat if we return. Returning would expose us to ongoing persecution, violence and even death. I will provide a detailed statement before my Individual Hearing.

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.

My son Matheus Cabral Taveira was arrested for possession of drugs for personal use in 2020. Since the amount was minimal, he didn't face any criminal charges and was immediately released. At the time, he was an addict, and the addiction kept him further dependent on the Comando Vermelho. I then decided to have him addmited for addiction treatment at a rehabilitation clinic, with the intent of distancing him from the faction and its criminal activities. After his treatment was completed, he made the decision to abandon the organization and has since led an honest life, away from crime. I will provide a detailed statement before my Individual Hearing.

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.

My son Matheus Cabral Taveira was a member of the criminal organization Comando Vermelho (CV). I was never involved with this criminal organization and, as soon as I discovered my son's involvement, I sought relentlessly to remove him from it, encouraging him to abandon the group. However, due to his past involvement, my family has been continuously threatened by members of this criminal organization. I will provide a detailed statement before my Individual Hearing.

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.

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.

Yes, I'm afraid to go back to Brazil because the Comando Vermelho's influence is so pervasive throughout the country that even going to the police is not an option. There are laws and rules that must be followed within the faction and, if they are not complied with, the person faces the appropriate punishments, which include psychological or physical torture, extortion, threats, and even death. When my son decided to leave the organization, he was sentenced to the maximum penalty: death, and I fear they will fulfill this threat if we return. The organization eliminates entire families to prevent any risk of exposing their activities and returning would put us all in extreme danger. I will provide a detailed statement before my Individual Hearing.

Part C. Additional Information About Your Application

You should ensure that your explanations are complete and detailed. An asylum officer may adjudicate your application without conducting an interview or requesting additional evidence.

(**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 wife, Kacia Divina Cabral Taveira, filed an application for asylum based on persecution and threats related to the same circumstances described in this application. I was included as a derivative beneficiary in her application. Her asylum application remains pending. My son, Matheus Cabral Taveira, has also filed a separate application for asylum based on related threats and persecution, which also remains pending. I am now filing this Form I-589 individually as a principal applicant. I will provide a detailed statement before my Individual Hearing.

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.

Yes, I traveled to Colombia, El Salvador, Guatemala, and Mexico before arriving in the United States on April 1, 2023. We did not seek asylum in these countries because we did not feel safe and the protection offered was insufficient. I sought asylum in the United States to escape ongoing persecution and to find a place where I could live without fear for my safety and well-being. Here, we finally feel safe. I will provide a detailed statement before my Individual Hearing.

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.

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).)

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. Your written explanation may be your only opportunity to have an asylum officer consider your reason(s). If you are scheduled for an asylum interview or a hearing with an immigration judge, 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 was included as a derivative beneficiary on my wife Kácia Divina Cabral Taveira's Form I-589, which was filed on March 28, 2025, within one year of my last arrival in the United States on April 1, 2024. Because I was already included as a derivative beneficiary in her timely filed asylum application, I did not file a separate Form I-589 during my first year in the United States. I am now filing this Form I-589 in my own name as a principal applicant. I will provide a detailed statement before my Individual Hearing.

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 on April 1, 2023, through the southern border, my family and I were detained by Immigration Officers for two days. This occurred as part of the immigration process, driven by our urgent need to seek safety and refuge. Our only purpose in coming to the United States was to escape the severe threats and persecution we faced in Brazil. We have not committed any other offenses in the United States. I will provide a detailed statement before my Individual Hearing.

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, and even if USCIS does not conduct an interview on the application. 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.

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

(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.)*

➡ [_____] _____

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	California	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 if 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
245945877	
Applicant's Name	Applicant's Signature
Ecio N/A ALVES TAVEIRA	

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
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)*:			
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
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)*:			
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
245945877	
Applicant's Name	Applicant's Signature
Ecio N/A ALVES TAVEIRA	

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

Part **A.III**

Question **4**

G.A.P Martins/ Baruc Servicos Terceirizados ME, Rod. Br 153, km 5.5, Galpao 3, Goiania, Brazil, from 01/08/2019, to 31/07/2023

Ecio Alves Taveira **File No. A. 245-945–877**

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 401 W. Peachtree Street, NW, Suite 2850 Atlanta, GA 30308	US Immigration and Customs Enforcement US Department of Homeland Security Office of the Principal Legal Advisor 401 W. Peachtree Street, NW, Suite 2850 Atlanta, GA 30308

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 Haverroth Silva
SBN#343486
P.O. Box 90487
San Diego, CA 92169
Counsel for Respondents