

Order Extending Defendant's Time to _____ (Form 18)

Order Extending Defendant's Time to

- [1. Index No. & Year]** Insert Index Number & the year it was purchased
- [2. Fill in name(s)]** Fill in the Plaintiff name
- [3. Fill in name(s)]** Fill in the Defendant name
- [4. Insert Relief Sought]** Insert the type of document you need more time to answer. For example: an extension of time to answer or move with respect to the papers received from plaintiff
- [5. Your name(s)]** Your name
- [6. Date the Affidavit notarized]** Insert the date that you signed the affidavit before a notary public
- [7. Your name(s)]** Your name

Affidavit in Support

- [8. Index No. & Year]** Insert Index Number & the year it was purchased
- [9. Fill in name(s)]** Fill in the Plaintiff name
- [10. Fill in name(s)]** Fill in the Defendant name
- [11. Your name(s)]** Your name
- [12. Circle One]** Circle your party status, plaintiff or defendant
- [13. Describe what you are asking the Court to do]** Describe your request.
- [14. Explain your reasons. Attach additional pages if necessary]** Describe all facts, events, actions and decisions.
- [15. Check that a prior application has been made only if you are seeking the same relief again]** This item requires that you check a box, either that you are asking for new relief or that you have previously asked for the same relief.
- [16. What Court, when, who made the application, the result of the application, attach a copies of the application and explain why you are making another application.]** If you are asking for the same relief, state why.
- [17. Sign your name before a notary public]** Signature
- [18. Print Your Name]** Print your Name
- [19. Affidavit must be notarized.]** Sign affidavit before a notary public

Litigation Back (Last page of entire packet)

- [20. Index No. & Year]** Insert Index Number & the year it was purchased
- [21. Fill in name(s)]** Fill in the Plaintiff name
- [22. Fill in name(s)]** Fill in the Defendant name
- [23. Insert name(s) of papers submitted]** Put the Names of all of the papers
- [24. YOUR SIGNATURE]** Signature
- [25. PRINT YOUR NAME]** Your name
- [26. YOUR ADDRESS]** Your address
- [27. CITY, STATE ZIP CODE]** City State and Zip Code
- [28. YOUR PHONE NUMBER]** Your telephone Number