

APPLICATION TO FILE SMALL/COMMERCIAL CLAIM

County of: _____ City of _____

FILING FEE PAYMENT TYPES: Money Order, Certified Bank Check, or Cash Only - No Personal or Business Checks Accepted!

Table with 3 columns: Type of Claim, Filing Fee, and (Check One). Rows include SMALL CLAIM, COMMERCIAL CLAIM, CONSUMER CREDIT TRANSACTION, and COUNTERCLAIM.

PLAINTIFF: (NAME & ADDRESS)

Print Name _____
D B.A. _____
Street _____
City/State/Zip Code _____
Daytime Phone # _____

CO-PLAINTIFF: (NAME & ADDRESS)

Print Name _____
D B.A. _____
Street _____
City/State/Zip Code _____
Daytime Phone # _____

DEFENDANT- (NAME & ADDRESS)

Print Name _____
D B.A. _____
Street _____
City/State/Zip Code _____
Daytime Phone # _____

SECOND DEFENDANT: (NAME & ADDRESS)

Print Name _____
D B.A. _____
Street _____
City/State/Zip Code _____
Daytime Phone # _____

Amount of Claim: \$ _____ (Do not include filing fees) Date of Loss= _ DD _ yyyy _____

Nature of Claim : _____

This section MUST be completed and notarized for a Consumer Credit Transaction or Commercial Claim:

I hereby certify, based upon information and belief, that no more than five (5) actions or proceedings (including the instant action or proceeding) have been initiated in the courts of this state during the present calendar month.

Claimant's Signature

Notary/Clerk's Signature

This section MUST be completed and notarized for a Consumer Credit Transaction: I hereby certify that I have mailed a Demand Letter by ordinary first class mail to the party complained against, no less than ten (10) days and no more than one hundred eighty (180) days before I commenced this action.

Claimant's Signature

Notary/Clerk's Signature

Note: The Commercial Claims Part will not allow your action to proceed if this certification is not properly and completely made.