

**Civil Court of the City of New York**

County of \_\_\_\_\_

Index Number \_\_\_\_\_

**SELF REPRESENTED  
WRITTEN ANSWER  
AND VERIFICATION**

Plaintiff(s),  
-against-

Defendant(s),

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
*Plaintiff/Attorney for Plaintiff*

**WRITTEN ANSWER**

I \_\_\_\_\_, am the Defendant in this action. As my answer to the allegation(s) made in the Complaint, I offer the following:

1. \_\_\_\_\_ General Denial (*I deny the allegations in the complaint*)

2. \_\_\_\_\_

3. Counterclaim: \$ \_\_\_\_\_ Reason: \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Defendant in Person

\_\_\_\_\_  
Defendant's Address

\_\_\_\_\_  
Defendant's Telephone No.

\_\_\_\_\_  
City, State, Zip Code

**VERIFICATION**

State of New York, County of \_\_\_\_\_ ss.:

\_\_\_\_\_, being duly sworn, deposes and says: I am the Defendant in this proceeding. I have read the Written Answer and know the contents to be true from my own knowledge, except as to those matters stated on information and belief, and as to those matters I believe them to be true.

\_\_\_\_\_  
Defendant

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

Notary Public/Court Employee and Title  
CIV-GP-58e Self Represented Written Answer 12-08

FREE CIVIL COURT FORM

No fee may be charged to fill in this form.

Form can be found at: <http://www.nycourts.gov/courts/nyc/civil/forms.shtml>.

For Court Use Only

Initial Calendar Date: \_\_\_\_\_

Both Sides Notified: \_\_\_\_\_