

INSTRUCTIONS: THIS AFFIRMATION MUST BE USED FOR SERVICE OF INITIATING PAPERS (A SUMMONS AND COMPLAINT, SUMMONS WITH NOTICE, NOTICE OF PETITION AND PETITION, OR ORDER TO SHOW CAUSE AND PETITION). SERVER MUST SIGN AND PRINT NAME AND USE BLACK INK ONLY. FILL IN THE NAMES OF THE PARTIES AND COMPLETE THE BLANK SPACES PRINTED IN BOLD TYPE.

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF

-----X

[FILL IN NAME(S)]

Plaintiff(s)/Petitioner(s)

-against-

Index Number

/_____
[INSERT INDEX NUMBER]

AFFIRMATION OF SERVICE
OF INITIATING PAPERS

[FILL IN NAME(S)]

Defendant(s)/Respondent(s)

-----X

STATE OF NEW YORK
COUNTY OF _____ ss.: [FILL IN COUNTY WHERE AFFIRMATION WAS SIGNED]

I, _____ [NAME OF PERSON WHO
SERVED PAPERS], Affirm _____, depose and say: I am over 18 years of age and am not a
party to this case. I reside at _____ [SERVER'S
ADDRESS]. On _____, 202__ [DATE OF SERVICE], at _____ A.M./P.M. [TIME OF DAY],
I served the attached papers, namely the _____ [IDENTIFY
THE PAPERS SERVED] on _____ [INSERT NAME OF PARTY
SERVED], a Defendant/Respondent [CIRCLE ONE] in this case. The address of the place where the
papers were served is _____ [STATE
LOCATION WHERE PAPERS WERE SERVED].

I served the papers in the manner indicated below **[CHECK OFF THE APPROPRIATE BOX]:**

1) ☐ INDIVIDUAL by delivering a true copy of each to the defendant personally; I knew the person served to be the person named in those papers. **[FILL OUT DESCRIPTION BELOW.]**

2) ☐ CORPORATION _____, a domestic corporation, by delivering a true copy of each to _____ **[IDENTIFY PERSON SERVED]**, who is _____ **[IDENTIFY THE INDIVIDUAL TO WHOM THE PAPERS WERE DELIVERED AND HIS/HER JOB TITLE]**; I knew the corporation to be that listed in the papers served and I knew the title of the person named above and that he/she was authorized to accept service.

3) ☐ SUBSTITUTED SERVICE by delivering a true copy of each to _____ **[INSERT NAME OF PERSON]**, a person of suitable age and discretion, at the actual place of business, dwelling house, or usual place of abode in the state, and mailing, as indicated below.

☐ SUBSTITUTED SERVICE by affixing a true copy to the door at _____
_____ which is the defendant _____.

I made prior attempts to serve at this location on the following dates and times:

_____.

MAILING I also enclosed a copy of the above papers in a postpaid (already had the stamps
(USE on it), sealed envelope properly addressed to defendant at defendant's last
WITH 3) known residence or actual place of business, located at
_____ [ADDRESS], and I deposited the
envelope in a post office depository under the exclusive care and custody of the
United States Postal Service within New York State.

PERCEPTION - **Perception** of the individual I served had the following
characteristics: (Use with 1, 2 or 3)

___ Gender ___ Hair Color _____ Race
___ 21-34 yrs. ___ 35-50 yrs. ___ 51-61 yrs. ___ Over 61
___ 120-150 lbs. ___ 151-181 lbs. ___ Over 182 lbs.

- ☐ MILITARY SERVICE I asked the person to whom I spoke whether the
defendant was in active service in the military of the United States or New York
State in any capacity and I was told that he/she was not. Defendant did not wear
a military uniform. I state upon information and belief that the defendant is not in
the military service of the United States or New York State. The bases for my
belief are the conversations and observations described above.

Dated: _____

I, _____ (Print or Type Name), affirm this ___ day of _____, _____,
under penalties of perjury, under the laws of New York, which may include a fine or
imprisonment, that the foregoing is true, and I understand that this document may be filed in an
action or proceeding in a court of law.

Server's Signature