APPLICATION TO FILE SMALL CLAIM / COMMERCIAL CLAIM

CITY COURT OF:	<u>Binghamton</u>	COUNTY OF:	<u>Broome</u>	Index No.:		
					t Cards accepted at the Civil Window ND EVIDENCE WITH THIS APPLICATIO	
Type of Claim: • Small Claim			Filing Fee: \$15.00 – Claim of \$1,000 or less			(Check One
(Individual suing Ind	ividual or Company)	OR				-
			\$20.00 – Claim of \$1,001 to \$5,000			
• Commercial Claim			\$25.00 + \$8.00 postage* (postage Per defendant)			
(Company suing Co	ompany or Individual)				
	Court Forms: Certif					
Required	when filing: Copy o	f the Demand let	tter sent to Def	endant		
• Consumer Trans	action_		\$25.00 + \$8.00	postage* (postage	e Per defendant)	
(Company suing Indi						
Required	Court Forms: Certif	icate of Authorit	y, Certification	on Filing Limits, &	Certification of Demand	Letter Sent
• Counterclaim			\$5.00 + \$0.64 postage			
Name of	Claimant(s):					
include all nece						
	Email:					
	ling Address:					
(Commercial claim,						
-	ffice Address)					
	e Number(s):					
agains						
	Defendant(s):					
include all ned	cessary parties					
	Email:					
	Address:					
Home/Business/Place						
MUST BE WITHIN BRO						
(Except when filing	•					
(If a business – pr						
name & name of i						
	ntes/manages)					
Phoi	ne Number(s):					
Amount of Claim \$.		(DO NOT inclu	ude filing fee)	Date:	
ture of Claim (include	a short summary	of information -	· You may use k	back of sheet):		
SIGNATURE(S) O	F PERSON(S) FILIN	NG CLAIM:				