

Submit this application with your **original Verified Complaint** (keep a copy for yourself - you will need it when you receive the *summons*) and **filing fee** and **SASE**. Illegible or incomplete forms will be returned.

**PLAINTIFF INFORMATION**

Provide your true legal name, including your DBA if you have one. If you are not 18 years old, your parent or guardian may make this application for you. If the claim is based on an auto accident, the claim must be *Owner* against *Owner*. A corporation must be represented by an attorney.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Provide your complete street address. A PO Box may be used **in addition to** your street address.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Provide your telephone number: \_\_\_\_\_

**DEFENDANT INFORMATION**

Provide the full legal name of the party you are suing. Indicate whether you are suing this party as a person or a business.

- If you are suing a child under 18 years old, you must also name the child’s parent or guardian, and indicate if the child is younger or older than 14 years old.
- If you are suing a business, indicate whether it is a corporation, a partnership, or an individual with a business certificate or DBA. This information can be obtained in the County Clerk’s Office or the NYS Department of State. An incorrect name may result in a judgment which cannot be executed.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Provide defendant’s complete street address. A PO Box may be used **in addition to** your street address. You may not be able to get a judgment for a defendant outside of our geographic jurisdiction.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Provide the *basis of the venue* (the reason for filing in this court):

Defendant resides in the District       Plaintiff resides in the District       \_\_\_\_\_

By my signature below, I certify that: I do not have an attorney; I am over 18 years of age; and I request that the Clerk of the Court issue a Summons on my behalf. I have enclosed my original Verified Complaint, the \$45.00 filing fee payable to CLERK OF THE COURT, and a stamped, self-addressed envelope. I understand the Summons, if approved, will be mailed to me. I understand illegible or incomplete forms will be returned to me.

DATE: \_\_\_\_\_

\_\_\_\_\_  
*signature*

TYPE or PRINT in BLACK INK ONLY

STATE OF NEW YORK, COUNTY OF SUFFOLK  
DISTRICT COURT - \_\_\_\_\_ DISTRICT

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VERIFIED COMPLAINT

\_\_\_\_\_  
*Plaintiff*

-against-

\_\_\_\_\_  
*Defendant*

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Index No. \_\_\_\_\_

TO THE DISTRICT COURT OF THE STATE OF NEW YORK, COUNTY OF SUFFOLK

The complaint of the Plaintiff, *yourname* \_\_\_\_\_, respectfully shows

and alleges as follows:

*You must include information about the claim or cause of action, with allegations and material facts to support the demand. Include plain and concise statements in consecutively numbered paragraphs, particularizing transactions and occurrences you intend to be prove and separately state each cause of action. Attach copies of any documents on 8½ x 11 inch paper necessary.*

1. The Plaintiff, *your name* \_\_\_\_\_, is a resident of the State of \_\_\_\_\_, and resides at *your address* \_\_\_\_\_.

2. The Defendant, *defendant's name* \_\_\_\_\_, and resides / has a place of business at *defendant's address* \_\_\_\_\_.

3. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



WHEREFORE, Plaintiff demands judgment as follows: *state your damages for each cause of action.*

\_\_\_ On the *first second etc* \_\_\_\_\_ cause of action, judgment in favor of Plaintiff and against Defendant in the sum of \$ \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

plus interest from *date* \_\_\_\_\_, statutory costs and disbursements, together with any other relief the Court finds to be just and proper.

DATE: \_\_\_\_\_ *sign your name* \_\_\_\_\_  
*print your name* \_\_\_\_\_  
*address* \_\_\_\_\_  
\_\_\_\_\_  
*telephone* \_\_\_\_\_

I am *your name* \_\_\_\_\_, the Plaintiff in the above-entitled action. I have read the foregoing complaint and know the contents thereof. The same are true to my knowledge, except as to those matters which are alleged on information and belief, and as to them the I believe them to be true.

DATE: \_\_\_\_\_ *signature* \_\_\_\_\_

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

\_\_\_\_\_  
Court Clerk / Notary Public, State of New York