

Case No.: _____

Plaintiff

vs

Defendant(s)



In the Justice Court

Precinct 6

Denton County, TX

PETITION SMALL CLAIMS CASE

DEFENDANT(S) ADDRESS: _____

Check one:

- an individual, address in section above is correct.,
- a proprietorship, partnership or a corporation, (A Registered Agent must be served): *Registered Agent*

Physical Address: Street, City, State and ZIP

Daytime Phone No.

COMPLAINT: The basis for the claim which entitles the plaintiff to seek relief against the defendant is:

RELIEF: Plaintiff seeks damages in the amount of \$ _____, and/or return of personal property as described as follows:
(be specific) _____

which has a value of \$ _____.

Additionally, plaintiff seeks the following: _____

SERVICE OF CITATION: Service is requested on defendants by personal service at home or work or by alternative service as allowed by the Texas Justice Court rules of Court. Other addresses where the defendant(s) may be served are:

I give my consent for the answer and any other motions or pleadings to be sent to my email address which is:

Petitioner's Printed Name

Signature of Plaintiff or Attorney

DEFENDANT(S) INFORMATION (if known):

DATE OF BIRTH: _____

LAST 3 NUMBERS OF DRIVER LICENSE: _____

LAST 3 NUMBERS OF SOCIAL SECURITY: _____

PHONE NUMBER: _____

Street Address of Plaintiff's Attorney, if any, or Plaintiff if none

City

State

Zip

Phone & Fax No. of Plaintiff's Attorney, if any, or Plaintiff if none

Subscribed and sworn to before me this _____ day of _____, 20_____.

CLERK OF THE COURT -or- NOTARY PUBLIC

PLAINTIFF'S REQUEST FOR SERVICE OF PROCESS

The undersigned Plaintiff requests that service of its Cause No. _____ be served on the Defendant(s) named below by *either* the Constable, the Clerk of the Court (via Certified Mail, Restricted Delivery, or private process server as checked below. Plaintiff is responsible for accurately providing all information requested below and assuring itself that service of process has subsequently been accomplished. *[Confirmed by Plaintiff's signature below.]*

NOTE: A SEPARATE REQUEST FOR SERVICE OF PROCESS FORM WILL BE REQUIRED FOR EACH DEFENDANT.

Defendant(s): _____

Constable Service Information

County: _____ Precinct: _____

Constable: _____

Constable's Street Address: _____

City, State, Zip: _____

Service fee: _____

Certified Mail Restricted Delivery Information (*)

(addressed to Defendant(s) or Registered Agent, as applicable)

Addressee's Name: _____

Addressee's Street Address: _____

City, State, Zip: _____

Private Process Server

Citations to be served by a Private Process Server must be picked up at the court.

Name: _____

Phone: _____

Texas Certification #: _____

STATEMENT OF PLAINTIFF'S RESPONSIBILITY: I am aware that I am responsible for following-up with the Court to determine whether service of process has been accomplished. It is possible that the Defendant may not be located or readily subject to service for some reason, and (*)**Certified Mail with Restricted Delivery is often returned to the Court by the U.S. Postal Service without sufficient proof that the specific, named Defendant received the Certified Mail.** The result of improper, or failure of service in these events will lead to the complete halt or other substantial delay in the progress of my suit, and can lead to the incurrence of additional service costs or the possibility of dismissal of my Case.

DATE

PLAINTIFF'S SIGNATURE

