NOTICE TO DEFENDANT
SMALL CLAIMS COURT SMALL CLAIMS FORM

State of New York

JUSTICE COURT : ROCKLAND COUNTY
TOWN OF CLARKSTOWN : SMALL CLAIMS PART No: _____

NOTICE TO DEFENDANT:

To: **(1)** _____
**(2)** _____
_____
_____

TAKE NOTICE THAT **(3)** _____ PLAINTIFF, asks judgment in this Court against you for $ **(4)**_____ together with costs, upon the following claim:

**(5)**_____
_____
_____
_____

In agreement with which the Plaintiff hereby signs and demands Judgment.

**(6)** _____
Plaintiff's Signature Address Daytime Phone No.

There will be a hearing before the court upon this claim on _____ 19_____, at _____ AM/PM in the Small Claims Part of this Court held at Justice Court, Town of Clarkstown, 20 Maple Avenue, New City, N.Y. 10956.

YOU MUST APPEAR and present your defense and/or claim at the hearing time, and place above set forth (a corporation must be represented by an attorney or any authorized officer, director or employee). IF YOU DO NOT APPEAR, JUDGMENT WILL BE ENTERED AGAINST YOU BY DEFAULT EVEN THOUGH YOU MAY HAVE A VALID DEFENSE. If your defense or counterclaim, if any, is supported by witnesses, account books, receipts or other documents, you must produce them at the hearing. The Clerk, if requested will issue subpoenas for witnesses, without fee thereof.

If you wish to present a counterclaim against the claimant, you must do so filing with the Clerk of the Court a statement containing such counterclaim within five days of receiving this notice of claim. At the time of such filing you must pay the Clerk a filing fee of $3.00 plus the cost of postage to send your counterclaim by first class mail to the claimant. If you fail to file a counterclaim within this five day period, you retain the right to file the counterclaim until the time of the hearing, but the claimant may request and obtain an adjournment of the hearing to a later date.

If you admit the claim, but desire time to pay, you must appear personally on the day set for the hearing and state to the Court your reasons for desiring time to pay.

Dated: _____, 19 _____ _____ Clerk

I have read the information on Internet or brochure **(7)** _____ (Your initials here).