

Center Township Small Claims Court of Marion County, Indiana
300 E. Fall Creek Parkway North Drive, Suite 130
Indianapolis, IN 46205
(317) 920-4530 (317) 920-4534 fax
www.centergov.org/small-claims-court

SERVICE REQUESTED:

- PERSONAL
COPY
CERTIFIED MAIL

Plaintiff: Name, Address and Telephone Number

vs.

Cause No.: 49K01- -SC-

Defendant(s): Name, Address and Telephone Number

The plaintiff complains of the defendant and says: That on ... the plaintiff rented to the Defendant the premises located at ... in Marion County, Indiana at a rent of \$ ... per week/month and that on ... said tenancy expired by the terms thereof for the reason: DESTRUCTION OF PROPERTY; CRIMINAL ACTIVITY; and/or DISTRUBING THE NEIGHBORS. That ever since said date of ... the plaintiff has been entitled to the possession of said premises. That the Defendant unlawfully holds over and detains possession of said premises from the plaintiff to his/her damages in the sum of \$ ...

Current date:

Plaintiff/Plaintiff's Attorney

TO ANY CONSTABLE OF THIS TOWNSHIP: You are hereby commanded to summon the above-defendant(s) to appear before me in court on: ... at ... o'clock ... M.

EMERGENCY HRG GRANTED / EMERGENCY HRG DENIED

CONSTABLE'S RETURN OF SERVICE OF NOTICE OF CLAIM

I certify that I have served this Notice of Claim on

- 1) By reading a claim to the Defendant,
2) By leaving a copy of the Notice of Claim at ... which is dwelling place, or usual place of abode of ... and by mailing a copy of the Notice of Claim to Defendant at such address.
3) Other Service Remarks:

NOTICE TO ALL PARTIES:

- The nature of the Plaintiff's Claim against you and demand made is stated above.
- You may represent yourself or hire an attorney.
- In court, on the date and time set above, you will be asked to admit or deny the claim. If you deny the claim, a trial date shall be set t this admit or deny hearing.
- If the Defendant does not wish to dispute the claim of the Plaintiff, he/she may appear to agree to a judgment and for the purpose of allowing the court to establish a method by which the judgment shall be paid.
- If the Defendant cannot appear at the time and place set for the admit/deny hearing, he/she shall write the Court at the above-address requesting a trial setting at a future date.
- If the Defendant fails to appear in Court at the time set for a hearing, a default judgment may be entered against the Defendant.
- The Plaintiff waives a trial by jury by filing his/her claim in the Small Claims Court.
- The Defendant waives trial by jury also unless he/she requests a jury trial no fewer than ten (10) days after the receipt of the notice of claim.
- Once a request for a trial by jury is granted, a transfer fee for transfer to Superior Court must be paid within ten (10) calendar days. If the fee is not paid, waiver of jury trial occurs. Once a request is made and fee paid, request cannot be withdrawn without consent of the other party.
- The Defendant may within ten (10) days of service of the summons file a change of venue of this matter. Proper venue is determined by the court in the following order:
1. In an action upon a debt or account, venue is in the township where any defendant has consented to venue in a writing signed by the Defendant.
2. Venue is in the township where a transaction or occurrence giving rise to any part of the claim took place.
3. Venue is in the township (in a county of the Small Claims Court) where the greater percentage of individual defendant (s) included in the complaint resides, or if there is no such greater percentage, the place where any individual defendant so named resides, owns real estate, or rents an apartment or real estate or where the principal office or place of business of any defendant is located.
4. Venue is in the township where the claim was filed if there no other township in the country in which the small claims court sits in which required venue lies.

Claims between landlord and tenants shall be in the township where the real estate is located.

## AFFAIDAVIT IN SUPPORT OF REQUEST FOR EMERGENCY POSSESSION

I, \_\_\_\_\_ DO SOLEMNLY SWEAR, OR AFFIRM.

UNDER THE PENALTIES OF PERJURY THAT THE FOLLOWING IS TRUE TO THE BEST OF MY KNOWLEDGE.

(Below please give all the circumstances which make you conclude that an emergency exists)

Date \_\_\_\_\_ Signature: \_\_\_\_\_

STATE OF INDIANA )  
 )  
COUNTY OF MARION )

Center Township of Marion County  
Small Claims Court  
300 E. Fall Creek Pkwy N. Dr. #130  
Indianapolis, Indiana 46205  
(317) 920-4530

CAUSE NO.: 49K01-\_\_\_\_\_ SC-\_\_\_\_\_

\_\_\_\_\_  
Plaintiff )  
 )  
 )  
vs )  
 )  
 )  
\_\_\_\_\_  
Defendant )

**APPEARANCE BY SELF-REPRESENTED PERSON IN CIVIL CASE**

1. My name is \_\_\_\_\_ and I am  
     Initiating (filing) \_\_\_\_\_;  
     Responding (answering or defending) \_\_\_\_\_; or  
     Intervening \_\_\_\_\_  
 in this case and am representing myself.
2. Contact information for receiving legal service of documents and case information is required by Court Rules: (**NOTE:** if you are the initiating party and this case, or a related case, involves a protection from abuse order, a workplace violence restraining order, or a no-contact order, you must provide an address for the purpose of legal service of documents but that address should not be one that exposes the whereabouts of a petitioner)  
     Address: \_\_\_\_\_  
     Email: \_\_\_\_\_  
     Phone: \_\_\_\_\_  
     Fax: \_\_\_\_\_

OR, if in related case, you have used the Attorney General Confidential address, you may check the section below:

\_\_\_\_\_ Attorney General Confidential Address (contact the Attorney General at 1-800-321-1907 or email address at [confidential@atg.state.in.us](mailto:confidential@atg.state.in.us)).

3. I will accept service by:
  - a. FAX at the following number: \_\_\_\_\_
  - b. Email at the following address: \_\_\_\_\_
  - c. Address of: \_\_\_\_\_

\_\_\_\_\_  
Self-Represented Party

**AFFIDAVIT OF DEBT**

Comes now Affiant, and states:

I \_\_\_\_\_ am the  
 Plaintiff (Name of Affiant)  
OR  
 designated full-time employee of \_\_\_\_\_ (Plaintiff).  
(Name of Plaintiff)

I am of adult age and am fully authorized by Plaintiff to make the following representations. I am familiar with the record keeping practices of Plaintiff. The following representations are true according to documents kept in the normal course of Plaintiff's business and/or my personal knowledge:

Plaintiff:  
 is the original owner of this debt, and evidence of the debt, as required in Rules 2(B)(4)(a) and (b), is attached as one or more Exhibits to this Affidavit.

has obtained this debt from \_\_\_\_\_ and the original owner of this debt was \_\_\_\_\_. Evidence of this debt, as required in Rule 2(B)(4)(c), is attached as one or more Exhibits to this Affidavit.

The Defendant \_\_\_\_\_ (Name of Defendant), has an unpaid balance of \$ \_\_\_\_\_ on account \_\_\_\_\_ (last 4 digits of number or id only).

That amount is due and owing to Plaintiff. This account was opened on \_\_\_\_\_.  
The last payment from Defendant was received on \_\_\_\_\_ in the amount of \$ \_\_\_\_\_.

The type of account is:  
 Credit card account (i.e. Visa, MasterCard, Department Store, etc.)  
List the name of the Company/Store issuing credit card: \_\_\_\_\_  
 Account for utilities (i.e. telephone, electric, sewer, etc.)  
 Medical bill account (i.e. doctor, dentist, hospital, etc.)  
 Account for services (i.e. attorney fees, mechanic fees, etc.)  
 Judgment issued by a court (a copy of the judgment is required to be attached)  
 Other: (Please explain)

This account balance includes:  
 Late fees in the amount of \$ \_\_\_\_\_ as of \_\_\_\_\_ (Month, Day, Year).  
 Other (Explain \_\_\_\_\_)  
 Interest at a rate of \_\_\_\_\_% beginning on \_\_\_\_\_ (Month, Day, Year).

Plaintiff:  
 is seeking attorney's fees and additional evidence will be presented to the court 3 prior to entry of judgment on attorney's fees.  
OR  
 is not seeking attorney's fees.

Plaintiff believes that defendant is not a minor or an incompetent individual.

If the Defendant is an individual, Plaintiff states and declares that:  
 Defendant is not on active military service. Plaintiff's statement that Defendant is not on active military service is based upon the following facts:

OR  
 Plaintiff is unable to determine whether or not Defendant is not on active military service.

("Active military service" includes fulltime duty in the military (including the National Guard and reserves) and, for members of the National Guard, service under a call to active service authorized by the President or Secretary of Defense. For further information, see the definition of "military service" in the Servicemembers Civil Relief Act, as amended, 50 U.S.C.A. Appx. § 521.)

I swear or affirm under the penalties of perjury that the foregoing representations are true.

Dated: \_\_\_\_\_ Signature of Affiant: \_\_\_\_\_  
(A COPY OF THIS DOCUMENT MUST BE INCLUDED IN THE COURT'S FILE)