MOTION FOR DEFAULT FOR FAILURE TO APPEAR, JUDGMENT AND ORDER FOR WEEKLY PAYMENTS

JD-CV-49 Rev. 8-99
P.B. §§ 17-23, et seq.

STATE OF CONNECTICUT
SUPERIOR COURT
www.jud.ct.gov

COURT USE ONLY
AA

INSTRUCTIONS TO PLAINTIFF/PLAINTIFF'S ATTORNEY
Complete this Motion and an Affidavit of Debt (JD-CV-52) and send original of each to the Clerk's Office and one copy of each to all defendants. Complete section I of the Notice of Judgment and Order for Weekly Payments (JD-CV-50) and file in duplicate with the Clerk's Office.

RETURN DATE

DOCKET NO.

TO: The Superior Court

☐ Judicial District ☐ Housing Session ☐ G.A. No. ____

ADDRESS OF COURT *(No., street, town and zip code)*

NAME OF CASE *(Plaintiff v. Defendant)*

NAME(S) OF ALL DEFENDANT(S) AGAINST WHOM MOTION IS FILED

MOTION FOR DEFAULT FOR FAILURE TO APPEAR, JUDGMENT AND ORDER FOR WEEKLY PAYMENTS

In the above entitled action, the Plaintiff(s) respectfully represent(s) that the Defendant(s) named above has (have) failed to file an appearance within two days after the return date. The Plaintiff(s) therefore request(s) that a default be entered against the Defendant(s) for failure to appear and that the Court enter judgment after default in favor of the Plaintiff(s) in accordance with the Affidavit of Debt attached. *("X" one of the following)*

The Plaintiff(s) also request(s) that an order for ☐ NOMINAL ☐ REASONABLE $ _____ weekly payments be entered.

NAME OF PERSON SIGNING MOTION

ADDRESS

SIGNED
X

☐ PLAINTIFF
☐ ATTORNEY FOR PLAINTIFF(S)

DATE SIGNED

MILITARY SERVICE AFFIDAVIT

The undersigned, being duly sworn, deposes and says that : *("X" one of the following)*

☐ the undersigned is unable to determine whether or not the Defendant(s) in this action are in the military or naval service of the United States.

☐ no Defendant in this action is in the military or naval service of the United States, and that, to the personal knowledge of the undersigned *(state facts showing defendant is not in such service):*

SIGNED *(Affiant)*

PRINT NAME AND, IF APPLICABLE, TITLE, OF AFFIANT

DATE SIGNED

Subscribed and sworn to before me:

SIGNED *(Comm. of Sup. Court/Notary)*

DATE SIGNED

PLAINTIFF'S BILL OF COSTS

Complaint Fee..... $
Entry Fee..... $
Sheriff's Fee..... $
Proceedings Before Trial..... $
_____.... $

TOTAL..... $

CERTIFICATION OF SERVICE

This is to certify that copies of the above Motion, Miltary Service Affidavit, Affidavit of Debt, and Plaintiff's Bill of Costs were delivered/mailed via U.S. Mail, postage prepaid on *(date):*_____
to the following Defendants: (Enter name(s) and address(es) of Defendant(s)).

SIGNED
X

☐ PLAINTIFF
☐ ATTORNEY FOR PLAINTIFF(S)

DATE SIGNED

FOR COURT USE ONLY

PRINT RESET