

APPLICATION FOR CIVIL CLAIM

Horicon Town Court
6604 State Rt. 8
Brant Lkae, NY 12815

Fee: \$10.00(up to \$1,000)
\$15.00(\$1,000-\$3,000)

Date of application _____

PLAINTIFF
(Party initiating Action)

_____ Name

_____ Address

_____ Home Phone Work Phone

DEFENDANT (Against).....

_____ Name

_____ Address

_____ Home Phone Work Phone

Brief description of damages: _____

Total amount of damages _____ (\$3,000 maximum)

_____ Signature of Applicant