

NOTICE: This is a public document, which means the document as submitted will be available to the public upon request. Therefore, do not enter personal identifiers on it, such as Social Security number, driver's license number, vehicle plate number, insurance policy number, active financial account number, active credit card number, or military status.

Plaintiff or Filing Attorney Information:

Name _____
NJ Attorney ID Number _____
Address _____

Email _____
Telephone Number _____

Superior Court of New Jersey
Law Division, Special Civil Part
_____ **County**

_____ ext. _____

_____ Plaintiff(s)
versus

_____ Defendant (s)

Docket Number: LT - _____
(to be provided by the court)

Civil Action
SUMMONS
LANDLORD TENANT

Defendant Information:

Name: _____
Address: _____

Email _____
Phone: _____

_____ Nonpayment
_____ Other (Holdover/For Cause)
_____ Commercial
_____ Residential

NOTICE TO TENANT: The purpose of the attached complaint is to permanently remove you and your belongings from the premises. If you want the court to hear your side of the case, you must appear in court on this date and time:

_____ at _____ a.m. / p.m., or the court may rule against you. **REPORT TO:**

You may contact the Office of the Special Civil Part at _____ ext. _____ regarding your case. Please go to njcourts.gov for general information on landlord tenant actions.

If you cannot afford to pay for a lawyer, free legal advice may be available by contacting Legal Services at _____. If you can afford to pay a lawyer but do not know one, you may call the Lawyer Referral Services of your local county Bar Association at _____.

You may be eligible for housing assistance. To determine your eligibility, you must immediately contact the welfare agency in your county at _____, telephone number _____.

If you need an interpreter or an accommodation for a disability, you must notify the court immediately.

AVISO AL INQUILINO: El propósito de la denuncia adjunta es para desalojarlo/a a usted y sacar sus pertenencias del lugar. Si desea que el tribunal escuche su versión de la causa, debe de comparecer en el tribunal en este día y a esta hora:

_____ a las _____ a.m. / p.m., o el tribunal puede fallar en su contra.

REPÓRTESE A:

Se puede comunicar con la Oficina de la Parte Civil Especial al _____ ext. _____ con respecto a su causa. Para obtener información en general acerca de demandas entre propietarios e inquilinos, vaya a njcourts.gov.

Si usted no tiene dinero para pagar a un abogado, es posible que pueda recibir consejos legales gratuitos si se comunica con Servicios Legales al _____. Si tiene dinero para pagar a un abogado pero no conoce ninguno, puede llamar a Servicios de Recomendación de Abogados del Colegio de Abogados de su Condado al _____.

Es posible que usted cumpla los requisitos para asistencia de vivienda. Para comprobar si es así, comuníquese inmediatamente con la oficina de asistencia pública de su Condado en _____ al número de teléfono _____

Si necesita un intérprete o arreglo especial para un impedimento físico, debe notificárselo inmediatamente al tribunal.

Date: _____

Clerk of the Superior Court

COURT OFFICER'S RETURN OF SERVICE (FOR COURT USE ONLY)

Docket Number: _____ Date: _____ Time: _____
WM ___ WF ___ BM ___ BF ___ OTHER _____ HT ___ WT ___ AGE ___ MUSTACHE ___
BEARD ___ GLASSES ___
NAME: _____ RELATIONSHIP: _____

Efforts Made to Personally Serve

Description of Premises if Posted

I hereby certify the above to be true and accurate: _____
Special Civil Part Officer