

CIVIL FORMS

1. Justice Court Civil Case Information Sheet
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JUSTICE COURT CIVIL CASE INFORMATION SHEET (4/13)

CAUSE NUMBER (FOR CLERK USE ONLY): _____

STYLED _____

(e.g., John Smith v. All American Insurance Co; In re Mary Ann Jones; In the Matter of the Estate of George Jackson)

A civil case information sheet must be completed and submitted when an original petition is filed to initiate a new suit. The information should be the best available at the time of filing. This sheet, required by Rule of Civil Procedure 502, is intended to collect information that will be used for statistical purposes only. It neither replaces nor supplements the filings or service of pleading or other documents as required by law or rule. The sheet does not constitute a discovery request, response, or supplementation, and it is not admissible at trial.

1. Contact information for person completing case information sheet	Name of parties in case
<p>Name: _____ Telephone: _____</p> <p>Address: _____ Fax: _____</p> <p>City/State/Zip: _____ State Bar No: _____</p> <p>Email: _____</p> <p>Signature: _____</p>	<p>Plaintiff(s): _____</p> <p>_____</p> <p>Defendant(s): _____</p> <p>_____</p> <p>_____</p> <p>[Attach additional page as necessary to list all parties]</p>
<p>2. Indicate case type, or identify the most important issue in the case (select only 1)</p>	
<p><input type="checkbox"/> Debt Claim: A debt claim case is a lawsuit brought to recover a debt by an assignee of a claim, a debt collector or collection agency, a financial institution, or a person or entity primarily engaged in the business of lending money at interest. The claim can be for no more than \$10,000, excluding statutory interest and court costs but including attorney fees, if any.</p>	<p><input type="checkbox"/> Eviction: An eviction case is a lawsuit brought to recover possession of real property, often by a landlord against a tenant. A claim for rent may be joined with an eviction case if the amount of rent due and unpaid is not more than \$10,000, excluding statutory interest and court costs but including attorney fees, if any.</p>
<p><input type="checkbox"/> Repair and Remedy: A repair and remedy case is a lawsuit filed by a residential tenant under Chapter 92, Subchapter B of the Texas Property Code to enforce the landlord's duty to repair or remedy a condition materially affecting the physical health or safety of an ordinary tenant. The relief sought can be for no more than \$10,000, excluding statutory interest and court costs but including attorney fees, if any.</p>	<p><input type="checkbox"/> Small Claims: A small claims case is a lawsuit brought for the recovery of money damages, civil penalties, personal property, or other relief allowed by law. The claim can be for no more than \$10,000, excluding statutory interest and court costs but including attorney fees, if any.</p>

PETITION: SMALL CLAIMS CASE

CASE NO. (court use only) _____

In the Justice Court, Precinct 4, FALLS County, Texas

PLAINTIFF _____

VS.

DEFENDANT(S): _____

Defendant(s) address: _____

COMPLAINT: The basis for the claim which entitles the plaintiff to seek relief against the defendant is:

RELIEF: Plaintiff seeks damages in the amount of \$ _____, and/or return of personal property as described as follows (be specific): _____, which has a value of \$ _____.

Additionally, plaintiff seeks the following: _____

SERVICE OF CITATION: Service is requested on defendants by personal service at home or work or by alternative service as allowed by the Texas Justice Court Rules of Court. Other addresses where the defendant(s) may be served are:

If you wish to give your consent for the answer and any other motions or pleadings to be sent to your email address, please check this box, and provide your valid email address: _____

Petitioner's Printed Name

Signature of Plaintiff or Attorney

DEFENDANT(S) INFORMATION (if known):

Address of Plaintiff's Attorney, if any, or Plaintiff if none

DATE OF BIRTH: _____

City State Zip

*LAST 3 NUMBERS OF DRIVER LICENSE: _____

*LAST 3 NUMBERS OF SOCIAL SECURITY: _____

DEFENDANT'S PHONE NUMBER: _____

Phone & Fax No. of Plaintiff's Attorney, if any, or Plaintiff if none

PETITION: DEBT CLAIM CASE

CASE NO. (court use only) _____

In the Justice Court, Precinct 4 , FALLS County, Texas

PLAINTIFF _____

VS.

DEFENDANT(S): _____

Defendant(s) address: _____

COMPLAINT: The basis for the claim which entitles the plaintiff to seek relief against the defendant is:

RELIEF: Plaintiff seeks damages in the amount of \$_____.

SERVICE OF CITATION: Service is requested on defendants by personal service at home or work or by alternative service as allowed by the Rules of Practice in Justice Courts. Other addresses where the defendant(s) may be served are:

ADDITIONAL INFORMATION (CASE BASED ON CREDIT CARD, REVOLVING ACCOUNT, OR OPEN ACCOUNT):

Account/Credit Card Name: _____ Account Number (may be masked): _____

Date of Issue/Origination: _____ Date of Charge-Off/Breach: _____ Amount Owed \$_____ as of _____

ADDITIONAL INFORMATION (CASE BASED ON PROMISSORY NOTE OR OTHER PROMISE TO PAY PERSONAL OR BUSINESS LOAN):

Date/Amount of Original Loan: _____, \$_____ Repayment Accelerated? _____ Date Final Payment Due: _____

Amount Due on Final Payment Date \$_____ Amount Due \$_____ as of _____

ONGOING INTEREST: Plaintiff does, or does not seek ongoing interest. If so, this interest is based on the following contractual/statutory reason: _____ and should be at _____%. \$_____ of interest was due as of _____.

ASSIGNMENT OF CLAIM: Plaintiff was, or was not assigned or otherwise transferred this claim. If so, the original claimant/creditor was _____, subsequent holders were _____ and the date the case was assigned/transferred to plaintiff was _____.

If you wish to give your consent for the answer and any other motions or pleadings to be sent to your email address, please check this box, and provide your valid email address: _____

Petitioner's Printed Name

Signature of Plaintiff or Attorney

DEFENDANT(S) INFORMATION (if known):
DATE OF BIRTH: _____

Address of Plaintiff's Attorney, if any, or Plaintiff if none

*LAST 3 NUMBERS OF DRIVER LICENSE: _____
*LAST 3 NUMBERS OF SOCIAL SECURITY: _____

City State Zip

DEFENDANT'S PHONE NUMBER: _____

Phone & Fax No. of Plaintiff's Attorney, if any, or Plaintiff if none
Debt Claim Petition. 7/2013

PETITION: EVICTION CASE

CASE NO. (court use only) _____

With suit for Rent

COURT DATE: _____

In the Justice Court, Precinct 4, FALLS County, Texas

PLAINTIFF _____

(Landlord/Property Name)

VS.

DEFENDANT(S): _____

Rental Subsidy (if any) \$ _____

Tenant's Portion \$ _____

TOTAL MONTHLY RENT \$ _____

COMPLAINT: Plaintiff (Landlord) hereby complains of the defendant(s) named above for eviction of plaintiff's premises (including storerooms and parking areas) located in the above precinct. Address of the property is:

Street Address Unit No. (if any) City State Zip

1. SERVICE OF CITATION: Service is requested on defendants by personal service at home or work or by alternative service as allowed by the Texas Justice Court Rules of Court. Other addresses where the defendant(s) may be served are:

2. UNPAID RENT AS GROUNDS FOR EVICTION: Defendant(s) failed to pay rent for the following time period(s): _____ TOTAL DELINQUENT RENT AS OF DATE OF FILING IS: \$ _____

Plaintiff reserves the right to orally amend the amount at trial to include rent due from the date of filing through the date of trial.

3. OTHER GROUNDS FOR EVICTION/LEASE VIOLATIONS: Lease Violations (if other than non-paid rent - list lease violations)

4. HOLDOVER AS GROUNDS FOR EVICTION: Defendant(s) are unlawfully holding over since they failed to vacate at the end of the rental term or renewal of extension period, which was the _____ day of _____, 20____.

5. NOTICE TO VACATE: Plaintiff has given defendant(s) a written notice to vacate (according to Chapter 24.005 of the Texas Property Code) and demand for possession. Such notice was delivered on the _____ day of _____ and delivered by this method:

6. ATTORNEY'S FEES: Plaintiff will be or will NOT be seeking applicable attorney's fees. Attorney's name, address, and phone & fax numbers are: _____

7. BOND FOR POSSESSION: If Plaintiff has filed a bond for possession, plaintiff requests (1) that the amount of plaintiff's bond and defendant's counter bond be set, (2) that plaintiff's bond be approved by the Court, and (3) that proper notices as required by the Texas Justice Court Rules are given to Defendant(s).

REQUEST FOR JUDGMENT: Plaintiff prays that defendant(s) be served with citation and that plaintiff have judgment against defendant(s) for: possession of premises, including removal of defendants and defendants' possessions from the premises, unpaid rent IF set forth above, attorney's fees, court costs, and interest on the above sums at the rate stated in the rental contract, or if not so stated, at the statutory rate for judgments under Civil Statutes Article 5069-1.05.

I give my consent for the answer and any other motions or pleadings to be sent to my email address which is: _____

Petitioner's Printed Name

Signature of Plaintiff (Landlord/Property Owner) or Agent

DEFENDANT(S) INFORMATION (if known):

Address of Plaintiff (Landlord/Property Owner) or Agent

DATE OF BIRTH: _____

City State Zip

*LAST 3 NUMBERS OF DRIVER LICENSE: _____

*LAST 3 NUMBERS OF SOCIAL SECURITY: _____

DEFENDANT'S PHONE NUMBER: _____

Phone & Fax No. of Plaintiff (Landlord/Property Owner) or agent

Sworn to and subscribed before me this _____ day of _____, 20____.

Tenant: _____

V. _____

Landlord: _____

In the Justice Court
Precinct _____ Place _____
County, Texas

PETITION FOR RELIEF UNDER SECTION 92.0563 OF THE TEXAS PROPERTY CODE

1. **COMPLAINT:** Tenant files this petition against the above-named Landlord pursuant to Section 92.0563 of the Texas Property Code because there is a condition in Tenant's residential rental property that would materially affect the health or safety of an ordinary tenant.
Information Regarding Residential Rental Property:

Street Address _____ Unit No. (if any) _____ City _____ County _____ State _____ Zip _____

Landlord's Contact Information (to the extent known):

Business Street Address _____ Unit No. (if any) _____ City _____ County _____ State _____ Zip _____ Phone Number _____

2. **SERVICE OF CITATION:** Check the box next to each statement that is true.

- Tenant received in writing Landlord's name and business street address.
- Tenant received in writing the name and business street address of Landlord's management company.
- The name of Landlord's management company is _____. To Tenant's knowledge, this is the management company's contact information:

Business Street Address _____ Unit No. (if any) _____ City _____ County _____ State _____ Zip _____ Phone Number _____

- The name of Landlord's on-premise manager is _____. To Tenant's knowledge, this is the on-premise manager's contact information:

Business Street Address _____ Unit No. (if any) _____ City _____ County _____ State _____ Zip _____ Phone Number _____

- The name of Landlord's rent collector serving the residential rental property is _____. To Tenant's knowledge, this is the rent collector's contact information:

Business Street Address _____ Unit No. (if any) _____ City _____ County _____ State _____ Zip _____ Phone Number _____

3. **LEASE AND NOTICE:** Check the box next to each statement that is true.

- The lease is oral. The lease is in writing. The lease requires the notice to repair or remedy a condition to be in writing.
 - Tenant gave written notice to repair or remedy the condition on _____. The written notice to repair or remedy the condition was sent by certified mail, return receipt requested, or registered mail on _____.
 - Tenant gave oral notice to repair or remedy the condition on _____.
- Name of person(s) to whom notice was given: _____
Place where notice was given: _____

4. **RENT:** At the time Tenant gave notice to repair or remedy the condition, Tenant's rent was: current (no rent owed), not current but Tenant offered to pay the rent owed and Landlord did not accept it, or not current and Tenant did not offer to pay the rent owed. Tenant's rent is due on the _____ day of the month week _____ (specify any other rent-payment period). The rent is \$ _____ per month week _____ (specify any other rent-payment period). Tenant's rent (check one): is not subsidized by the government is subsidized by the government as follows, if known: \$ _____ paid by the government, and \$ _____ paid by Tenant.

5. **PROPERTY CONDITION:** Describe the property condition materially affecting the physical health or safety of an ordinary tenant that Tenant seeks to have repaired or remedied: _____

6. **RELIEF REQUESTED:** Tenant requests the following relief: a court order to repair or remedy the condition, a court order reducing Tenant's rent (in the amount of \$ _____ to begin on _____), actual damages in the amount of \$ _____, a civil penalty of one month's rent plus \$500, attorney's fees, and court costs. Tenant states that the total relief requested does not exceed \$10,000, excluding interest and court costs but including attorney's fees.

Tenant Signature: _____

Date: _____

Street address _____ Unit No. (if any) _____

Phone Number _____

City _____ State _____ Zip _____

FORM 127 – SERVICEMEMBER’S CIVIL RELIEF ACT

DOCKET NO. _____

CASE NO. _____

**AFFIDAVIT
50 USC Sec. 520**

Plaintiff being duly sworn on oath deposes* and says that defendant(s) is (are)

(CHECK ONE)

- not in the military
- not on active duty in the military and/or
- not in a foreign country on military service
- on active military duty and/or is subject to the Servicemembers Civil Relief Act of 2003
- has waived his/her rights under the Servicemembers Civil Act of 2003
- military status is unknown at this time

PLAINTIFF

(Select the applicable title under the signature for the jurat below)

Subscribed and sworn to before me no this the _____ day of _____, 20__.

NOTARY / CLERK

- Notary Public in and for the State of Texas
- Clerk of the Justice Court

SEAL

***Penalty for making or using false affidavit – a person who makes or uses an affidavit knowing it to be false, shall be fined as provided in Title 18, United States Code, or imprisoned for not more than one year or both.**

CAUSE NO. _____

EX PARTE

(Name of Petitioner)

§ IN THE JUSTICE COURT
§
§ PRECINCT NO. 4
§
§ FALLS COUNTY, TEXAS

PETITION FOR OCCUPATIONAL LICENSE

I, _____ *(Name of Petitioner)*, seek an occupational license from this court based on the information provided below. *(You must swear that the information you provide in this petition is true and correct. Failure to provide true and accurate information may result in criminal penalties.)*

Section 1. General Information.

You must complete all applicable sections.

My name is: _____

My date of birth is: _____

I am a resident of _____ County, Texas.

My home address is: _____

My mailing address (if different than above) is: _____

My Texas driver's license number is: _____

- I am employed, and my occupation is _____

- I am the primary caretaker of _____ children less than 16 years of age.
- I have been ordered by a magistrate to install an ignition interlock device on my vehicle, and/or not to operate any vehicle which is not equipped with an ignition interlock device.
- I have not been ordered by a magistrate to install an ignition interlock device on my vehicle, and/or not to operate any vehicle which is not equipped with an ignition interlock device.
- I have a commercial driver's license.
- I do not have a commercial driver's license.

Section 2. Reason(s) for Driver's License Suspension.

You must complete all applicable sections.

- My driver's license has been suspended as the result of an arrest for an intoxication-related offense in _____ County, because:
- A peace officer requested a sample of my breath or blood and I refused;
or
- I provided a sample of my breath or blood, and the sample contained an alcohol concentration greater than 0.08.

My driver's license has been automatically suspended as the result of a conviction for Driving While Intoxicated (DWI) in a County or District Court.

My driver's license has been suspended as the result of a conviction for a criminal offense in a justice or municipal court. *Please provide information regarding this offense, including the name of the court in which you were convicted, the cause number, and the type of offense, below.*

My driver's license has been suspended as the result of a physical or mental disability.

My driver's license has been suspended as the result of a conviction for Racing on a Highway.

My driver's license has been suspended because a court found that I am a "habitual violator of traffic laws."

My driver's license has been suspended because a court ordered me to attend a Driver Education Program and suspended my license for 365 days.

My driver's license has been suspended for another reason, described below:

Section 3. Essential Need.

You must complete all applicable sections.

(Note: In order to obtain an occupational license, you must demonstrate an essential need to operate a motor vehicle. The Texas Transportation Code defines "essential need" as the "need of a person for the operation of a motor vehicle: (A) in the performance of an occupation or trade or for transportation to and from the place at which the person practices the person's occupation or trade; (B) for transportation to and from an educational facility in which the person is enrolled; or (C) in the performance of essential household duties." In order to demonstrate an essential need to operate a motor vehicle, you may attach additional documentation, such as a letter from your employer. If you attach additional documentation, be sure to check the appropriate box in Section 5 of this petition.)

- I am seeking this occupational license in order to *(check all that apply)*:
 - Travel to and from my place of work;
 - Perform the duties of my job;
 - Travel to and from school; or
 - Perform essential household duties.

In the space below, provide an address and description for any destination you seek to travel to using an occupational license.

In the space below, fully describe all public transportation options within one mile of any destination described above, including your home, place of work, school, or place where you perform essential household duties. Public transportation options may include bus service, rail service, rural automobile service, ride-sharing services, etc.

I am the only member of my household who owns, leases, or has access to a motor vehicle.

A member of my household other than me owns, leases, or has access to a motor vehicle. *(Please describe this person's weekly schedule below.)*

I own a bicycle or other means of non-motorized conveyance, described below.

My work or school schedule is the same every week: I work or attend school during the following hours on the following days of the week *(check all that apply)*:

Monday: from _____ to _____

Tuesday: from _____ to _____

Wednesday: from _____ to _____

Thursday: from _____ to _____

Friday: from _____ to _____

Saturday: from _____ to _____

Sunday: from _____ to _____

- My work or school schedule varies from week to week. *(If you check this box, provide a general description of your work or school schedule below, including the total number of hours you work or attend school each week, days of the week on which you never work or attend school, days of the week on which you always work or attend school, and the earliest time your work or school day begins and the latest time your work or school day ends.)*

- My job duties include automobile travel. My employer requires me to travel by automobile to perform the following tasks:

I perform the following essential household duties:

In order to perform the essential household duties described above, I must travel by automobile during the following hours on the following days of the week (*check all that apply*):

Monday: from _____ to _____

Tuesday: from _____ to _____

Wednesday: from _____ to _____

Thursday: from _____ to _____

Friday: from _____ to _____

Saturday: from _____ to _____

Sunday: from _____ to _____

In order to:

Travel to school;

Travel to my place of work;

Perform my job duties; or

Travel to the place I perform essential household duties;

I must travel by automobile to or through the following Texas counties (*please fully describe all counties and routes traveled*):

Section 4. Suspension History

You must complete all applicable sections.

My driver's license has previously been suspended for:

- A second or subsequent conviction for Driving While Intoxicated (Section 49.04, Penal Code); Intoxication Assault (Section 49.07, Penal Code), or Intoxication Manslaughter (Section 49.08, Penal Code), committed within five years of a previous conviction for Driving While Intoxicated (Section 49.04, Penal Code); Intoxication Assault (Section 49.07, Penal Code), or Intoxication Manslaughter (Section 49.08, Penal Code).

In the past five years, my license has been suspended for:

- A refusal to submit to the taking of a breath or blood specimen following an arrest for an offense prohibiting the operation of a motor vehicle or an offense prohibiting the operation of a watercraft while intoxicated, under the influence of alcohol, or under the influence of a controlled substance.
- An analysis of a breath or blood specimen showing an alcohol concentration of .08 or above, following an arrest for an offense prohibiting the operation of a motor vehicle or watercraft while intoxicated.
- A conviction for Driving While Intoxicated (Section 49.04, Penal Code); Intoxication Assault (Section 49.07, Penal Code), or Intoxication Manslaughter (Section 49.08, Penal Code).
- A conviction for an offense other than Driving While Intoxicated (Section 49.04, Penal Code); Intoxication Assault (Section 49.07, Penal Code), or Intoxication Manslaughter (Section 49.08, Penal Code) prohibiting the operation of a motor vehicle or watercraft while intoxicated, under the influence of alcohol, or under the influence of a controlled substance.

Section 5. Additional Documents.

You must complete all applicable sections.

- I have obtained evidence of financial responsibility, which is attached to my petition. *(Note: You may not be issued an occupational license unless you obtain evidence of financial responsibility.)*

- I have attached a certified copy of my driving record to this petition. (*Note: the court cannot grant your petition without reviewing your driving record.*)
- I have attached documents which demonstrate my essential need to operate a motor vehicle.
- I have attached other documents, which are described below:

PRAYER

WHEREFORE, PREMISES CONSIDERED, Petitioner prays that this Honorable Court grant this Petition for Occupational License, and to send a copy of its order granting petitioner's occupational license to the Department of Public Safety of Texas.

Petitioner's Signature

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS ___ DAY OF _____, 20____.

Notary Public or Clerk of the Justice Court

CAUSE NO. _____

(Applicant Name)

IN THE JUSTICE COURT
PRECINCT 4
FALLS COUNTY, TEXAS

APPLICATION FOR ORDER OF RETRIEVAL

The undersigned Applicant makes this *Application for an Order of Retrieval* of personal property found at the following location, which is a residence in which I am, or was previously, authorized to occupy ("Residence"):

LOCATION OF RESIDENCE: _____

Occupant is _____, who is currently occupying the residence and may be given notice of this application at the above-listed Residence or at the following address(es):

Fax: _____
Phone: _____
E-Mail Address: _____

The following is a **listing and specific description** of the items that I seek to be allowed to retrieve from the Residence
(Attach separate sheet, if necessary):

I certify that all of the following statements are true:

- 1) The Items listed in this Application are **ONLY** of the following types: medical records, medicine and medical supplies, clothing, child-care items, legal or financial documents, checks or bank or credit cards in the name of Applicant, employment records, and personal identification documents.
- 2) I will suffer personal harm and/or the personal health and safety of myself or others within my care will likely be at risk if I am unable to retrieve the items, and I have an urgent need to retrieve the items from the Residence.
- 3) I have attached a lease, sworn statement or other documentary evidence showing that I am, or was previously, authorized to occupy the Residence. I am currently unable to enter the Residence because the current occupant named above has denied me access to the Residence.
- 4) I am not the subject of an active protective order under Title 4, Family Code, a magistrate's order for emergency protection under Article 17.292, Code of Criminal Procedure, or any court order prohibiting my entry into the Residence; or otherwise prohibited by law from entering into the Residence.

APPLICANT:

(Signature)

(Date)

(Address & Phone Number)