



# **Yuma County Justice Court Precinct Two**

**1358 E. Liberty St. / PO Box 7650 Somerton, AZ Ph (928) 314-5100**

# **CIVIL ANSWER**

## CIVIL CHECKLIST FOR DEFENDANT

The following checklist may assist you in processing your case. You may check off each action as it occurs and enter dates of completed or future actions.

[ ] If you object to the venue (the precinct in which the Complaint was filed), you must file a request to transfer the venue of the lawsuit to the correct precinct. This must be done no later than 10 days after you have filed your Answer and must include an affidavit stating the reasons for your request. See JCRCF 133(c).

[ ] Answer filed and filing fee paid on \_\_\_\_\_ (date)  
Within 20 calendar days of the date you were served / 30 calendar days if served out-of-state.  
If you fail to file an Answer, the Plaintiff may obtain a default judgment against you.

[ ] Provided other parties with a Disclosure Statement on \_\_\_\_\_ (date)  
(40 calendar days after filing of Answer)

[ ] Counterclaim filed, and copy mailed to the Plaintiff on \_\_\_\_\_ (date)  
If you intend to file a Counterclaim you must do so at the same time the Answer is filed. You must use the proper form and mail a copy to the Plaintiff.

[ ] Plaintiff's time to file an Answer to Counterclaim expires on \_\_\_\_\_ (date)  
(20 calendar days after service)

### **If no Answer to Counterclaim is received:**

[ ] Application for Entry of Default filed with court and copy mailed to all parties in the case on \_\_\_\_\_ (date).

[ ] Request and Affidavit for Entry of Default Judgment filed with court and copy mailed to all parties in the case on \_\_\_\_\_ (date).

## NOTICE TO ALL PARTIES:

**Default:** If the time to answer passes and the Defendant fails to answer the Complaint or if the time to answer a Counterclaim passes and the Plaintiff fails to answer the Counterclaim, you may get information and forms from the court or its website for obtaining a default judgment, or at <http://www.azcourts.gov/efilinginformation> or <http://www.azcourts.gov/selfservicecenter>.

**Dismissal:** Plaintiff may dismiss the Complaint at any time before the Defendant files an Answer by filing a Notice of Voluntary Dismissal. Once the Defendant has filed an Answer, both parties must stipulate (agree in writing) to a dismissal.

**If set by the court, a Pre-trial Conference is scheduled for \_\_\_\_\_.** You are required to exchange with the opposing party the Disclosure Statement (copies of exhibits, list of witnesses, law supporting your claim, or defense etc.) known or available concerning this matter.

**Trial scheduled for \_\_\_\_\_.** Bring all evidence, exhibits and witnesses you need to present your case or establish your defense to a Counterclaim. Provide additional copies for all parties and the court.

**Notice of Address Change:** All parties are required to inform the court of a current address in writing to ensure that the party can receive all notices mailed from the court.

**Collecting the Judgment:** If you are not able to make arrangements to collect your judgment, you may seek a Writ of Execution, a Writ of Garnishment, or an Order for Supplemental Proceedings (debtor's examination). You may ask the court clerk for the necessary forms.

**REQUEST FOR REASONABLE ACCOMMODATION FOR PERSONS WITH DISABILITIES OR REQUEST FOR AN INTERPRETER MUST BE MADE TO THE COURT AS SOON AS POSSIBLE BEFORE A COURT PROCEEDING.**

Person Filing: \_\_\_\_\_  
Address (if not protected): \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Representing ☐ Self or ☐ Lawyer for \_\_\_\_\_  
Lawyer's Bar Number: \_\_\_\_\_

For Clerk's Use Only

**YUMA JUSTICE COURT PRECINCT TWO**  
**1358 E. Liberty St. / PO Box 7650 Somerton, AZ 85349**  
**Ph: (928) 314-5100**

Case Number: \_\_\_\_\_

**ANSWER (CIVIL)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
( ) \_\_\_\_\_  
\_\_\_\_\_

vs.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
( ) \_\_\_\_\_  
\_\_\_\_\_

Plaintiff(s) Name / Address / Phone /  
Email

Defendant(s) Name / Address / Phone /  
Email

1. The following named Defendant(s) answer(s) the Complaint as follows: \_\_\_\_\_  
\_\_\_\_\_
2. I ☐ admit ☐ deny that this court has jurisdiction over this matter. (If denied, state reason why.)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. I admit the following portion(s) of Plaintiff's Complaint: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. I deny the following portion(s) of Plaintiff's Complaint: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Case Number: \_\_\_\_\_

5. I do not have enough knowledge to admit or deny the following portion(s) of Plaintiff's Complaint:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. I am asking the court to deny Plaintiff's claim. The Plaintiff is not entitled to judgment because:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. ☐ I am also asking for reimbursement of my court costs and/or attorneys' fees.

8. I state under penalty of perjury that the foregoing is true and correct.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Defendant(s) Signature

\_\_\_\_\_  
Defendant(s) Title

Please inform court staff if interpreter services are required.

☐ YES. I need interpreter services. Language: \_\_\_\_\_

**I CERTIFY** that a copy of this document will be provided by:

☐ hand-delivery ☐ first-class mail ☐ electronic means on \_\_\_\_\_  
to \_\_\_\_\_

☐ hand-delivery ☐ first-class mail ☐ electronic means on \_\_\_\_\_  
to \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Defendant(s) Signature

\_\_\_\_\_  
Defendant(s) Title

Person Filing: \_\_\_\_\_  
Address (if not protected): \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Representing ☐ Self or ☐ Lawyer for \_\_\_\_\_  
Lawyer's Bar Number: \_\_\_\_\_

For Clerk's Use Only

**YUMA JUSTICE COURT PRECINCT TWO**  
**1358 E. Liberty St. / PO Box 7650 Somerton, AZ 85349**  
**Ph: (928) 314-5100**

Case Number: \_\_\_\_\_

**COUNTERCLAIM (CIVIL)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
( ) \_\_\_\_\_  
\_\_\_\_\_

vs.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
( ) \_\_\_\_\_  
\_\_\_\_\_

Plaintiff(s) Name / Address / Phone /  
Email

Defendant(s) Name / Address / Phone /  
Email

1. The following named Defendant(s): \_\_\_\_\_ having  
filed an Answer to Plaintiff's Complaint, now counterclaim(s) against the following named Plaintiff(s) \_\_\_\_\_  
\_\_\_\_\_ as follows.
2. If this claim is for recovery on an assigned debt, the original owner of the debt is: \_\_\_\_\_  
\_\_\_\_\_
3. This court has jurisdiction over this matter. If the amount requested exceeds the jurisdictional limit of the  
justice court, the case will be transferred to the Superior Court.
4. Venue in this precinct is proper because:  
☐ The Defendant resides in this precinct, or  
☐ A.R.S. § 22-202 permits me to file a lawsuit in this venue.
5. The Plaintiff(s) owe the Defendant(s) because: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(State the facts in support of your claim. You may attach an additional page to your complaint, if necessary.)

6. ☐ **The amount I am requesting can be calculated with certainty.** I am asking the court to award me judgment against Plaintiff(s) in the sum of \$ \_\_\_\_\_.

**OR**

- ☐ **The amount I am requesting cannot be calculated with certainty.** I am asking the court to award me judgment against the Plaintiff(s) in the approximate sum of \$ \_\_\_\_\_.

Describe the damages: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. I am also asking for reimbursement of the following:

|                                                 |                 |
|-------------------------------------------------|-----------------|
| <input type="checkbox"/> Attorney's fees        | \$ _____        |
| <input type="checkbox"/> Pre-judgment interest  | \$ _____        |
| <input type="checkbox"/> Post-judgment interest | \$ _____        |
| <input type="checkbox"/> Court costs            | \$ _____        |
| <input type="checkbox"/> Other (specify): _____ | \$ _____        |
| <b>Total:</b>                                   | <b>\$ _____</b> |

8. I state under penalty of perjury that the foregoing is true and correct.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Defendant(s) Signature

\_\_\_\_\_  
Defendant(s) Title

**TO THE PLAINTIFF(S): You have 20 days to respond to this Counterclaim by filing a written Answer. If you fail to do so, a default judgment may be entered against you for the relief sought by the party filing the Counterclaim.**

Please inform court staff if interpreter services are required.

☐ YES, I need interpreter services. Language: \_\_\_\_\_

**I CERTIFY** that a copy of this document will be provided on \_\_\_\_\_ by:

☐ hand-delivery ☐ first-class mail ☐ electronic means

\_\_\_\_\_  
Date

\_\_\_\_\_  
Defendant(s) Signature

\_\_\_\_\_  
Defendant(s) Title