

NOTICE TO QUIT

\_\_\_\_\_, Indiana  
\_\_\_\_\_, 20\_\_\_\_

To \_\_\_\_\_  
(Tenant)

You are hereby notified to deliver up to me at the expiration of ten days from the time you receive this notice, the premises in \_\_\_\_\_, Wells County, Indiana, and located at \_\_\_\_\_, together with its appurtenances unless the rent due for said premises is paid within that time.

Signed \_\_\_\_\_  
(Landlord)

PROOF OF SERVICE

The undersigned certifies that on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, he did serve a true and exact copy of the above Notice of Quit on \_\_\_\_\_ (Tenant) \_\_\_\_\_ by delivering it to said persons or by delivering it to some person of proper age and discretion residing on the premises, having first made know to said person the contents of the Notice, or by affixing a copy of such Notice to a conspicuous part of said premises.

Received by: \_\_\_\_\_ Signed \_\_\_\_\_  
(Landlord)

NOTICE TO QUIT

\_\_\_\_\_, Indiana

\_\_\_\_\_, 20\_\_\_\_

To \_\_\_\_\_  
(Tenant)

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Signed \_\_\_\_\_  
(Landlord)

PROOF OF SERVICE

The undersigned certifies that on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, he did serve a true and exact copy of the above Notice of Quit on \_\_\_\_\_ (Tenant) \_\_\_\_\_ (name) by delivering it to said persons or by delivering it to some person of proper age and discretion residing on the premises, having first made know to said person the contents of the Notice, or by affixing a copy of such Notice to a conspicuous part of said premises.

Received by: \_\_\_\_\_ Signed \_\_\_\_\_  
(Landlord)

**SMALL CLAIM**

\_\_\_\_\_  
Name  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
Town or City  
Telephone No. \_\_\_\_\_

WELLS SUPERIOR COURT  
Courthouse  
Bluffton, Indiana 46714  
Telephone (260) 824-3287

Plaintiff(s),

Against

CASE NO. 90D01-\_\_\_\_\_ ~~EV~~ \_\_\_\_\_

\_\_\_\_\_  
Name  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
Town or City  
Telephone No. \_\_\_\_\_

Defendant(s),

**NOTICE OF CLAIM**

TO THE DEFENDANT(S): You have been sued by the Plaintiff whose name appears above.  
The trial date for this lawsuit is the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_, \_\_\_\_M.  
in the Wells Superior Court, Third Floor, Courthouse, Bluffton, Indiana.

The Plaintiff's claim is for:

Account or Note (Attached)  
Wages

Rent  
Other \_\_\_\_\_

A brief statement of the nature of the plaintiff's claim against you is as follows:

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

The Plaintiff demands judgment against the Defendant for \$ \_\_\_\_\_, plus interest from  
\_\_\_\_\_, 20\_\_\_\_, at the rate of \_\_\_\_\_%, and the costs of this action (\$ \_\_\_\_\_).

Dated: \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
(Attorney for) Plaintiff(s)

You may pay this claim and court costs before trial and have the case dismissed.  
If you dispute this claim you must notify the Court at least (7) days before the trial date. If you fail to notify the Court, the Plaintiff may be granted a continuance on the trial date. You should bring to the trial all documents you have concerning the claim.  
If you fail to appear in Court on the date and at the time set for trial, the Plaintiff can receive a judgment for the amount claimed, plus court costs.  
If you have any Counterclaim arising from the same transaction or occurrence which is the subject matter of the Plaintiff's claim, you may file a statement of such claim with the Court, and send a copy to the Plaintiff, at least (7) days prior to trial.  
By filing this small claim, the Plaintiff has waived the right to a trial by jury. You have ten (10) days from receipt of this notice to file an affidavit requesting a jury trial and to pay the costs for transferring the case. Your failure to do so waives your right to trial by jury.  
Once a jury trial request has been granted, it may not be withdrawn without the consent of all other parties. Within ten (10) days after the granting of a jury trial request, the requesting party shall pay to the Clerk the additional amount required by statute to transfer the claim to the Court's plenary docket; otherwise, there will be no jury trial.  
You may represent yourself in this court. You do not need to employ an attorney. You may, however, have an attorney represent you if you wish. All corporations must be represented by an attorney, if the claim exceeds \$6,000.00.  
If you do not wish to dispute the claim, you may nonetheless appear for the purpose of allowing the Court to establish a method of payment. You should, however, first contact the Plaintiff or the Plaintiff's attorney and attempt to arrange payment.  
If this lawsuit should require a trial before the Court, you will at the time of trial be required to appear with your witnesses and any documents required to prove your side of the case.  
Manuals explaining small claims procedures are available for both Plaintiff and Defendant at the office of the Clerk of Wells Superior Court.  
IF YOU CANNOT APPEAR ON THE DATE AND TIME INDICATED, CONTACT THE COURT IMMEDIATELY UPON RECEIPT OF THIS NOTICE.

STATE OF INDIANA )  
                          ) SS:  
COUNTY OF WELLS )

IN THE WELLS SUPERIOR COURT

Case Number: 90D01-\_\_\_\_\_ - EV - \_\_\_\_\_  
(To be supplied by Clerk when case is filed.)

(Caption)

APPEARANCE BY SELF-REPRESENTED PERSON IN CIVIL CASE

This Appearance Form must be filed on behalf of every party in a civil case.

1. My Name is: \_\_\_\_\_ and I am  
Initiating (filing) \_\_\_\_\_;  
Responding (answering or defending) \_\_\_\_\_; or  
Intervening \_\_\_\_\_;

in this case and am representing myself.

2. My contact information for receiving legal service of documents and case information as required by Court Rules: (NOTE: If you are the Initiating party and this case involves a protection from abuse order, a workplace violence restraining order, or a no-contact order, DO NOT answer here. Answer Question #6 instead.)

Address: \_\_\_\_\_  
\_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_

FAX: \_\_\_\_\_

3. This is a \_\_\_\_\_ case type as defined in administrative Rule 8(B)(3).  
(Clerk will supply this information.)
4. I will accept service by FAX at the above-noted number: Yes \_\_\_ No \_\_\_
5. This case involves child support issues. Yes \_\_\_ No \_\_\_ (If yes, supply social security numbers for all family members on a separately attached document filed as confidential information on light green paper. Use Form TCM-TR3.1-4.)
6. This case involves a protection from abuse order, a workplace violence restraining order, or a no-contact order. Yes \_\_\_ No \_\_\_ (If Yes, the Initiating party (petitioner) must provide an address for the purpose of legal service of documents but that address should not be one that exposes the whereabouts of a petitioner.) The following address shall be used for purposes of legal service of documents to me:

\_\_\_\_\_ The Attorney General Confidentiality program address  
(contact the Attorney General at 1-800-321-1907 or e-mail address is confidential@atg.state.in.us).

\_\_\_\_\_ Another address (provide)

7. This case involves a petition for involuntary commitment: Yes \_\_\_\_\_ No \_\_\_\_\_

8. If Yes above, provide the following regarding the individual subject to the petition for involuntary commitment:

a. Name of the individual subject to the petition for involuntary commitment:  
\_\_\_\_\_

b. State of Residence of person subject to petition: \_\_\_\_\_

c. At least one of the following pieces of identifying information:

(i) Date of Birth \_\_\_\_\_

(ii) Driver's License Number \_\_\_\_\_

State where issued \_\_\_\_\_ Expiration date \_\_\_\_\_

(iii) State ID number \_\_\_\_\_

State where issued \_\_\_\_\_ Expiration date \_\_\_\_\_

(iv) FBI number \_\_\_\_\_

(v) Indiana Department of Corrections Number \_\_\_\_\_

(vi) Social Security Number is available and is being provided in an attached confidential document

Yes \_\_\_\_\_ No \_\_\_\_\_

9. There are related cases: Yes \_\_\_\_\_ No \_\_\_\_\_ (If yes, list on continuation page.)

10. Additional information required by local rule:  
\_\_\_\_\_

\_\_\_\_\_  
Self-Represented Party

STATE OF INDIANA )  
 ) SS:  
COUNTY OF WELLS )

IN THE WELLS SUPERIOR COURT

CAUSE NO. 90D01- \_\_\_\_\_ -EV- \_\_\_\_\_

\_\_\_\_\_  
Plaintiff(s)

Vs.

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

### COMPLAINT - POSSESSION FOR NONPAYMENT OF RENT

Plaintiff complains of Defendant and says:

1. That on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, Plaintiff leased to Defendant the following described real estate located in \_\_\_\_\_ County, Indiana, to wit: (Address) \_\_\_\_\_ for which Defendant agreed to pay Plaintiff as rental the sum of \$ \_\_\_\_\_ per month/week on the \_\_\_\_ day of each month/week beginning on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.
  2. That pursuant to said agreement Defendant took possession of said premises and has since and still does occupy the same.
  3. That Defendant paid the installments of rent as they became due until the installment which became due on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_; that said installment and each installment which has become due since are wholly unpaid, except \_\_\_\_\_
  4. That on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, Plaintiff notified Defendant in writing to surrender the possession of said premises at the expiration of ten days from the time of receiving said notice, unless the rent then due should be paid within said time, as per "Exhibit A" attached.
  5. That Defendant has not paid said rent, nor delivered up the possession of said real estate to Plaintiff, but has since the expiration of said notice unlawfully held over and detained possession of said premises from Plaintiff.
- WHEREFORE, Plaintiff demands judgment for \_\_\_\_\_ dollars, for the possession of said real estate, and for all other proper relief.

Signed by: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_