

Wells Justice

Court

(Assigned by Clerk's Office)

Interpreter Needed: ☐ No ☐ Yes

Language:

Plaintiff(s) (name/address/phone):

Defendant(s) (name/address/phone):

E-mail Address:

E-mail Address:

Attorney (name/address/phone):

Attorney (name/address/phone):

Law Firm/Bar#

Law Firm/Bar#	
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E-mail Address:

E-mail Address:

Civil Case Filing Types

<p>Real Property</p> <p><input type="checkbox"/> Landlord/Tenant (Summary Eviction)</p> <p><input type="checkbox"/> Unlawful Detainer Complaint (Writs of Restitution)</p> <p><input type="checkbox"/> Other Real Property</p>	<p>Torts</p> <p><input type="checkbox"/> Negligence</p> <p><input type="checkbox"/> Auto</p> <p><input type="checkbox"/> Premises Liability</p> <p><input type="checkbox"/> Other Negligence</p> <p>Other Torts</p> <p><input type="checkbox"/> Intentional Misconduct</p> <p><input type="checkbox"/> Other Torts</p>	<p>Protection Orders</p> <p><input type="checkbox"/> Request for Dom. Viol. Protective Order</p> <p><input type="checkbox"/> Request for Protection Order (Non-DV)</p> <p><input type="checkbox"/> Sexual Assault Related</p> <p><input type="checkbox"/> Request for High Risk Protective Order</p>
<p>Contract Case</p> <p>Seller Plaintiff (Debt Collection)</p> <p><input type="checkbox"/> Credit Card Collection</p> <p><input type="checkbox"/> Payday Loan Collection</p> <p><input type="checkbox"/> Debt Collection Agency</p> <p><input type="checkbox"/> Other Debt Collection</p> <p>Other Contract Case</p> <p><input type="checkbox"/> Contract Buyer Plaintiff</p> <p><input type="checkbox"/> Other Contract Case</p>	<p>Other Civil Filings</p> <p>Other Civil Filing</p> <p><input type="checkbox"/> Contested Liens Case</p> <p><input type="checkbox"/> District Court Order to Seal Records</p> <p><input type="checkbox"/> Petition to Seal Records</p> <p><input type="checkbox"/> Other Civil Matters</p>	<p>Protection Order- Extension Request</p> <p><input type="checkbox"/> Request for Extended Dom. Viol. Protective Order</p> <p><input type="checkbox"/> Request for Extended Protective Order (Non-DV)</p> <p><input type="checkbox"/> Request for Extended High Risk Protective Order</p>

Date _____

Signature of initiating party or representative