

**MOTION TO OPEN JUDGMENT AFTER DEFAULT
OR NONSUIT (SUMMARY PROCESS/EViction)**

JD-HM-42 New 2-22

C.G.S. §§ 52-212, 52-212a, 52-259c; P.B. §§ 17-4, 17-43

**STATE OF CONNECTICUT
SUPERIOR COURT**

www.jud.ct.gov



For information on ADA accommodations,
contact a court clerk or go to: www.jud.ct.gov/ADA.

Court Use Only

MTOSPDF



NOTICE: This motion must be filed with the correct fee required by General Statutes section 52-259c(a).

Docket number

<input type="checkbox"/> Judicial District	<input type="checkbox"/> Housing Session	Address of Court (Number, street, town, and zip code)
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Name of case (Plaintiff vs. Defendant)

Motion

Instructions:

*If you are a tenant asking to open a default judgment, complete number 1 and number 2 below.**If you are a landlord asking to open a nonsuit, complete number 1 only.***I request that the judgment in the case named above be opened. (Additional pages may be used, if necessary.)**

1. I did not participate in the court proceeding or file papers because (Explain):

2. [For Defendant(s)/Tenant(s) Only] My defense to the eviction is (Explain why you should not be evicted):

NOTE: This motion must be sworn to by the person filing this motion or by that person's attorney.

Signed (Plaintiff/Defendant or Attorney)

Date signed

Subscribed and sworn to before me

on (Date)

Signed (Clerk, Commissioner of Superior Court, Notary Public) See NOTE above

Certification

I certify that a copy of this document was or will immediately be mailed or delivered electronically or non-electronically on (date) _____ to all attorneys and self-represented parties of record and that written consent for electronic delivery was received from all attorneys and self-represented parties of record who received or will immediately be receiving electronic delivery.

Name and address of each party and attorney that copy was or will be mailed or delivered to*

*If necessary, attach additional sheet or sheets with name and address which the copy was or will be mailed or delivered to.

Signed (Signature of filer/Connecticut Attorney)

Print or type name of person signing

Date signed



Mailing address (Number, street, town, state and zip code)

Telephone number