

**SOUTH WEBER JUSTICE COURT, STATE OF UTAH  
DAVIS COUNTY, SMALL CLAIMS DEPARTMENT  
1600 E SOUTH WEBER DRIVE, SOUTH WEBER UT 84405  
801-479-3177**

\_\_\_\_\_, Plaintiff  
Name

\_\_\_\_\_  
Agent & Title

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, ZIP

\_\_\_\_\_  
Phone

SMALL CLAIMS AFFIDAVIT  
AND SUMMONS

\_\_\_\_\_, Defendant  
Name

Case No. \_\_\_\_\_

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Agent & Title

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, Zip

**AFFIDAVIT**

PLAINTIFF swears that the following is true:

- |     |  |          |
|-----|--|----------|
| (1) | Defendant does owe plaintiff                                 | \$ _____ |
| [ ] | plus a \$60.00 filing fee for a claim of \$2,000 or less     | \$ _____ |
| [ ] | plus a \$100.00 filing fee for a claim of \$2,000 - \$7,500  | \$ _____ |
| [ ] | plus a \$185.00 filing fee for a claim of \$7,500 - \$11,000 | \$ _____ |
|     | Plus an estimated service fee of                             | \$ _____ |
|     | For a total of   | \$ _____ |

(2) This debt arose on \_\_\_\_\_ for: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(3) Defendant resides or the claim arose within the jurisdiction of this court.

\_\_\_\_\_  
Plaintiff or Agents Signature

SUBSCRIBED and SWORN to before me on \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Clerk or Notary

**ORDER OF THE COURT**

THE STATE OF UTAH TO THE DEFENDANT: You are summoned to appear at the trial to answer the above claim:

On Date: \_\_\_\_\_ At Time: \_\_\_\_\_ At 1600 E South Weber Dr. South Weber UT 84405

If you fail to appear at the trial, judgment may be entered against you for the amount listed above

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

\_\_\_\_\_  
Clerk or Deputy

**READ INSTRUCTION ATTACHED TO THIS FORM**