



**TOWN OF EAST FISHKILL
JUSTICE COURT**

330 Route 376, Hopewell Junction, NY 12533
(845) 226-4229 Fax (845) 227-5892
<http://www.eastfishkillny.gov>

SMALL CLAIMS APPLICATION TO FILE

PLAINTIFF: *(Person bringing the suit. Use proper names.)* PRINT CLEARLY.

Name: _____

Address: _____

Phone: _____

DEFENDANT: *(Person being sued. Separate filing fee and Form for each person. Use proper names.)*

Name: _____

Address: _____

Phone: _____

BRIEF DESCRIPTION OF YOUR CLAIM: _____

TOTAL AMOUNT CLAIMED: \$ _____

Signature

COURT USE ONLY

Date Filed: _____

Receipt # _____ \$ _____

Received Booklet _____

Special requests/instructions: _____

FILING FEES:
\$ 0 - \$ 1,000 = \$10.00 FEE
\$ 1,001 - \$ 3,000 (max) = \$15.00 FEE