

NOTICE: This is a public document, which means the document as submitted will be available to the public upon request. Therefore, do not enter personal identifiers on it, such as Social Security number, driver's license number, vehicle plate number, insurance policy number, active financial account number, or active credit card number.

Filing Attorney Information or Pro Se Litigant:

Name _____

NJ Attorney ID Number _____

Address _____

Telephone Number _____

Plaintiff's Name

Street Address Check if new address/phone number

Town, State, Zip Code

Telephone Number

vs.

Defendant's Name

Street Address

Town, State, Zip Code

Telephone Number

**Superior Court of New Jersey
Law Division: Special Civil Part**

County
Docket Number: DC- _____

**Civil Action
Answer**

Defendant denies owing the debt to the Plaintiff. Check the appropriate statement(s) below which set forth why you claim you do not owe money to the plaintiff or owe less than the Plaintiff is claiming.

- The bill has been paid.
- The dollar amount claimed by the plaintiff(s) is incorrect.
- The claim or the amount of the claim is unfair. (*Must explain below*)
- The goods or services were not received.
- The goods or services received were defective.
- I/We did not order the goods or services.
- I am a victim of identity theft or mistaken identity.
- The time has passed for plaintiff to sue on this debt.
- This debt has been discharged in bankruptcy.
- A lawsuit was previously filed and the claim has been resolved. (*Must explain below*)
- Defendant is in the military on active duty.
- Plaintiff did not file this lawsuit in the proper place. (*Must explain below*)
- Other – Set forth any other reasons why you believe money is not owed to the plaintiff(s). (You may attach more sheets if you need to.)

- Trial by jury requested; an extra \$100 cash, check or money order is submitted.
- Trial by jury requested; and I have submitted an application for a waiver of the \$100.00 fee.

At the trial, Defendant requests:

An interpreter Yes No Indicate Language _____
 An accommodation for a disability Yes No Requested accommodation _____

Certification

I certify, to the best of my knowledge:

Must check one

- that the above matter is not the subject of any other court action or arbitration proceeding now pending or contemplated, or
- that the following actions or arbitration proceedings are pending or contemplated

AND

Must check one

- that no other parties should be joined in this action; or
- that the following persons or entities should be joined in this action

I certify that confidential personal identifiers have been redacted from documents now submitted to the court and will be redacted from all documents submitted in the future in accordance with *Rule 1:38-7(b)*.

I further certify that this answer was served by me upon all existing parties.

Dated

Defendant's Signature

Defendant's Name - Typed or Printed

- Demand for Production of Documents Pursuant to R. 4:18-2.** By checking this box, demand is made for production of all documents or papers referred to in the pleading for which this answer is provided, within 5 days of this demand.