JUSTICE OF THE PEACE COURT OF THE STATE OF DELAWARE IN AND FOR NEW CASTLE COUNTY COURT NO.

URT ADDRESS:		C	CIVIL ACTION NO:	
PLAINTIFF (s)		VS.	DEFENDANT (S)	
	DEFENI	DANT'S ANSWER	TO THE COMPLAINT	
Check all t	that are appropriate:			
A	I admit that I owe the debt or claim in the Complaint and <u>DO NOT</u> want a trial. (This means that you agree to a judgment being entered against you for the amount claimed plus interest and costs. Any money owed should be paid directly to the Plaintiff. You will be giving up your right to a trial and will not have a right to appeal your decision to admit this debt or claim.)			
В	I WANT A TRIAL.			
C	<u>DEBT ACTIONS ONLY</u> : In addition to a trial, I request that the Plaintiff provide me with a more detailed statement of the claim (Bill of Particulars).			
	ourt, at its discretion, may when possible. Please indic		e resolution options by which hearings can be heard cess to the following:	
	Internet w/car Email (list em	mera (computer or Sm nail address below)	artphone)	
DATED: _		_		
(Signature of Defendant)		(Defendant's A	ddress/Phone No.)	
		(Defendant's E	mail Address)	
(Defendant's Attorney, if any)		(Attorney's Address/Phone No.)		
		(Attorney's En	nail Address)	

If you are a corporation (or other artificial entity or public body):

- This Answer MUST be signed by an attorney or person designated by a Certificate of Representation (Form 50) for the corporation or entity prior to the filing of this Answer.
- Only an attorney or a person designated in a Form 50 may represent you in JP court.
- YOU MAY OBTAIN A FORM 50 and further information from the Court's website at https://courts.delaware.gov/jpcourt. (Click on Form 50) or, you may obtain a Form 50 from your nearest JP Civil Court.

Mail this completed form (Answer) to the Justice of the Peace Court at the address above as soon as possible. This signed document must be received by the Court within 15 days after the date you received it or a default judgment may be entered against you.