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| --- | --- |
| County Court \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County, ColoradoCourt Address:Plaintiff(s):v.Defendant(s):Any and all other occupants |  COURT USE ONLY |
| Attorney or Party Without Attorney (Name and Address): Phone Number: E-mail:FAX Number: Atty. Reg. #: | Case Number:Division Courtroom |
| COMPLAINT IN REMOVAL OF UNAUTHORIZED PERSON(S) |

**The Plaintiff(s), named above, state(s) and allege(s) as follows:**

1. Plaintiff(s) is/are the owner(s) or authorized agent(s) of premises in the City of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, State of Colorado as follows:

|  |
| --- |
| Street Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Subdivision: | Lot | Block |

1. An unauthorized person or persons have entered and are remaining unlawfully on the premises.
2. A Verified Motion for Order to Remove Unauthorized Person(s) has been filed with the court.

**Wherefore**, Plaintiff(s) request(s) requests that the court hold a hearing within one court day and that the court enter a Temporary Mandatory Injunction and issue a Writ of Restitution ordering that the person or persons currently occupying the residential premises be removed from the premises and ordered not to return to the premises for a period of fourteen days.

 By checking this box, I am acknowledging I am filling in the blanks and not changing anything else on the form.

 By checking this box, I am acknowledging that I have made a change to the original content of this form.

**SIGNATURE**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Plaintiff(s) / Plaintiff(s) Attorney Signature Plaintiff(s) Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Plaintiff(s) Telephone Number