

**MOTION FOR JUDGMENT FOR POSSESSION FOR FAILURE TO PLEAD**

JD-HM-10 Rev. 3-20  
C.G.S. § 47a-26a,  
P.B. § 17-30

STATE OF CONNECTICUT  
**SUPERIOR COURT**  
www.jud.ct.gov



COURT USE ONLY

MFDPJPS



**Instructions to Plaintiff (Landlord)**

- 1. File this motion with the clerk.
- 2. Mail or deliver a copy of this motion to all appearing defendants or their attorney(s), if applicable.

<input type="checkbox"/> Judicial District	At: _____	Docket number
<input type="checkbox"/> Housing Session		
Address of court (Number, street, and town)		

Name of case

**Motion**

The defendant(s) listed below has not filed a pleading within the required time period. If the defendant(s) does not file a pleading within three (3) days after this motion is filed with the clerk, the plaintiff(s) asks that judgment for possession of the premises be entered for the plaintiff(s).

Name(s) of applicable defendant(s)

Signed (Plaintiff/Plaintiff's attorney)	Print or type name of person signing	Date signed
▶		

**Certification**

I certify that a copy of this document was or will immediately be mailed or delivered electronically or non-electronically or in hand on \_\_\_\_\_ (date) to all attorneys and self-represented parties of record, and that written consent for electronic delivery was received from all attorneys and self-represented parties receiving electronic delivery.

(If necessary, attach additional sheets with names, addresses and methods of delivery.)

Name and address of first attorney or party	<input type="checkbox"/> Hand delivered <input type="checkbox"/> Mailed <input type="checkbox"/> Electronically delivered
Name and address of second attorney or party	<input type="checkbox"/> Hand delivered <input type="checkbox"/> Mailed <input type="checkbox"/> Electronically delivered
Name and address of third attorney or party	<input type="checkbox"/> Hand delivered <input type="checkbox"/> Mailed <input type="checkbox"/> Electronically delivered
Name and address of fourth attorney or party	<input type="checkbox"/> Hand delivered <input type="checkbox"/> Mailed <input type="checkbox"/> Electronically delivered

Signed (Plaintiff/Plaintiff's attorney)	Print or type name of person signing	Date signed
▶		
Mailing address (Number, street, town, state and zip code)		Telephone number

**ADA NOTICE**

The Judicial Branch of the State of Connecticut complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation in accordance with the ADA, contact a court clerk or an ADA contact person listed at [www.jud.ct.gov/ADA](http://www.jud.ct.gov/ADA).