

**MOTION FOR DEFAULT FOR FAILURE TO APPEAR AND JUDGMENT FOR POSSESSION**

JD-HM-9 Rev. 5-19  
C.G.S. § 47a-26  
P.B. §§ 17-20, 17-21, 17-30

**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).

STATE OF CONNECTICUT  
**SUPERIOR COURT**  
[www.jud.ct.gov](http://www.jud.ct.gov)



COURT USE ONLY

MFDAJPS



**Instructions to plaintiff (landlord)**

1. One motion may be used for multiple defendants.
2. File this motion with the clerk. Mail or deliver a copy of this motion to all defendants or their attorney(s), if applicable.
3. Before this motion may be granted, the notice to quit with the completed return of service must be filed with the clerk.

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

**Motion for Default for Failure to Appear and Judgment for Possession**

The plaintiff (*landlord*) asks that judgment for possession of the premises be entered for the plaintiff (*landlord*) because the defendant(s) (*tenant(s) and/or occupant(s)*) listed below have failed to file an appearance.

Name(s) of applicable defendant(s) \_\_\_\_\_

Signed ( <i>Plaintiff/Plaintiff's attorney</i> )	Date signed
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**Military Service Affidavit - select all that apply**

The following defendant(s) is (are) in military service of the United States: \_\_\_\_\_

The following defendant(s) in this action is (are) not in military service of the United States.  
**(State facts showing defendant(s) is (are) not in such service and include source of knowledge of these facts):**

I cannot determine whether or not the following defendant(s) in this action is (are) in military service of the United States.  
**(State the reasonable efforts made in coming to this conclusion. Also, if the defendant(s) is (are) identified by alias (e.g. John Doe or Jane Doe), state the reasonable efforts made to determine his/her/their identity):**

Signed ( <i>Signature of plaintiff/affiant</i> )	Print or type name and title of person signing	Date signed
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Subscribed and sworn to before me on:	Signed ( <i>Assistant Clerk, Notary, Commissioner of the Superior Court</i> )
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**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 to all parties who have not appeared in this matter 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 ( <i>Signature of filer</i> )	Print or type name of person signing	Date signed
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Mailing address (Number, street, town, state and zip code)	Telephone number
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