

**AFFIDAVIT OF NONCOMPLIANCE
WITH STIPULATION**

JD-HM-22 Rev. 7-19
P.B. § 17-53

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

COURT USE ONLY

AFFNWS



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.

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

Name of case _____

Date of judgment or court order	<input type="checkbox"/> Use and occupancy	Amount due: _____	Payment date(s) _____
	<input type="checkbox"/> Arrearage	Amount due: _____	Payment date(s) _____

The undersigned hereby deposes and states the following:

1. I am over the age of eighteen years and I believe in the obligation of an oath.
2. I am the person ordered to receive the above-mentioned payment(s); or, I am familiar with the accounting/financial books and records of the entity ordered to receive the above-mentioned payments, and I have personal knowledge of the matters stated herein and the facts set forth are true and accurate to the best of my knowledge and belief.
3. On the above-mentioned date of judgment or court order, the defendant was ordered to pay use and occupancy and/or arrearage in the amount shown above, on or before the payment date(s) indicated.
4. To date, payment has not been received.
5. I therefore request that a Summary Process (Eviction) Execution for Possession issue.

Signed (Affiant) ▶	Print or type name and title of person signing	Date signed
Subscribed and sworn to before me:	On (date)	Signed (Assistant Clerk, Notary, Commissioner of the Superior Court)

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 (Signature of filer) ▶	Print or type name of person signing	Date signed
Mailing address (Number, street, town, state and zip code)		Telephone number

<p align="center">Notice To Defendant</p> <p>A Summary Process Execution will issue on the third business day after the filing of this affidavit with the court. If you object to the execution issuing, you must file an objection before the issuance of the execution with the clerk at the court address indicated above.</p>	FOR COURT USE ONLY
	File Date