INSTRUCTIONS FOR FILING SMALL CLAIMS ACTION IN THE VILLAGE OF ELMSFORD COURT

Small Claims Applications Must Comply with the Following Guidelines:

- 1. You must be suing an individual (not as a corporate entity)
- 2. Action cannot exceed \$3,000
- 3. THE PARTY YOU WISH TO SUE must reside OR have a place of business in the Village of Elmsford. The defendant must have a physical address to which mail can be mailed/served within the jurisdiction of this Court. Please refer to the Assessor's Office (914 989-1520 or https://www.greenburghny.com/168/Assessors-Office) to confirm that the party you wish to sue has an address within the Court's jurisdiction (you will need a street address to confirm jurisdiction with the Assessor, not merely the name of the party you wish to sue.)
- 4. Filing Fee payable by:
 - Cash (exact amount only no change is made)
 - Money Order or Cashier's Bank Check payable to The Village of Elmsford Court
 - NO PERSONAL OR BUSINESS CHECKS
 - For claims up to \$1,000, a \$10 filing fee is due
 - For claims between \$1,001 and \$3,000, a \$15 filing fee is due

Adjournment Procedure

5. Defendant (person you are suing) is entitled to the first adjournment up on notice to the Plaintiff (you)

ELMSFORD VILLAGE COURT

APPLICATION FOR SMALL CLAIMS COURT ACTION

Filing Days: Monday, Tuesday, Thursday, 9 a.m. – 3 p.m. (except summer hours: 9 a.m. – 2 p.m.) APPLICATION MUST BE SUBMITTED ALONG WITH FILING FEE AS DETAILED ON INSTRUCTION PAGE

Plaintiff Information (Person filing the suit)	
Last Name, First Name	Address
	Town, State, & Zip Code
	Phone Number (Mobile Number Preferred)
	Check One:
Defendant Information (Person you wish to sue)	
	1
Last Name, First Name	Address
	Town, State, & Zip Code
	Phone Number (Mobile Number Preferred)
	Check One: ☐ Mobile ☐ Home ☐ Work
Why are you suing?	
	e.g., auto accident damages, rental security deposit not returned, services t your entry to no more than 140 characters. You may elaborate on your he Village Justice in open court.
What date did this money become due to you?	
What is the total amount owed to you? \$_	
	Plaintiff), certify that the information I entered above is accurate and ve a meritorious claim. I further certify that I have not sought relief
	Date:
o be completed by Court Personnel ONLY:	
Date Filed:	Initials of Clerk Accepting Filing: