

EATON MUNICIPAL COURT, EATON OHIO

CASE NO. _____

YOUR NAME _____

ADDRESS _____

CITY, STATE, ZIP CODE _____ PLAINTIFF

COMPLAINT FOR EVICTION AND MONEY

VS.

THEIR NAME _____

ADDRESS _____ APT # _____

CITY, STATE, ZIP CODE _____ DEFENDANT

FIRST CLAIM

1. Plaintiff(s) state that they are the owner(s) of the premises. The address that the tenant is to be evicted from is: _____ apt.# _____ Preble County, Ohio.
2. Defendant(s) entered said premises as a tenant of the plaintiff, and have either entered into an unlawful and forcible entry and detention, or an unlawful and forcible detention after a peaceable or lawful entry of the described premises. (If a written lease was signed, attach a copy.)
3. Plaintiff served the defendant with a notice in writing to leave the premises. (attach a copy of the notice)
4. The date on the notice when the tenants were told to leave was: _____

SECOND CLAIM

1. Plaintiff reiterates and reaffirms all the allegations in the first claim. The tenant(s) owe rent in the amount of \$ _____ which includes all rent up to and including the current rental period.
2. Plaintiff is entitled to \$ _____ per day (divide 1 month's rent by 30 to get amount) as damages for use and occupancy of the premises until the date of judgment, this being the reasonable value for the use of said premises.

THIRD CLAIM

1. Plaintiff reiterates and reaffirms all of the allegations in both the first and second claims.
2. Plaintiff may be entitled to money for damages beyond "normal wear and tear", in addition to late charges and utilities, in an amount not to exceed \$ _____ (you must make an estimate on this amount)

WHEREFORE, PLAINTIFF DEMANDS:

- (a) Restitution and recovery of said premises.
- (b) Judgment for back rent in the amount of \$ _____ (See line 1 on second claim).
- (c) \$ _____ per day until date of judgment for use and occupancy of said premises (See line 2 on second claim).
- (d) Damages, late charges, and utilities not to exceed \$ _____ (See line 2 on third claim), and costs.

SIGNATURE

NAME (PLEASE PRINT)

ADDRESS

CITY, STATE, ZIP CODE

TELEPHONE NUMBER