

# Justice Court Town of Newstead

DENNIS R. FREEMAN  
Town Justice

SUSAN P. REINECKE  
Town Justice



NEWSTEAD TOWN HALL  
Post Office Box 227  
5 Clarence Center Road • Akron, NY 14001  
Phone 716-542-4575  
Fax 716-542-5824

**RE: Small Claim Application**

**Dear Sir/Madam:**

**Enclosed you will find the Small Claim Application form. This form must be filled out completely to start a small claim action in our court. The defendant must live, work, have a place for doing business, or own property you are/were renting in Akron/Newstead.**

**The limit to request for a claim is \$3,000.00. You can request the court fees to be included with the total amount. Payment should be made by certified check or money order.**

**Please enclose the fee as follows:**

**\$10.00 for claims up to \$1,000.00.**

**\$15.00 for claims \$1,001.00 up to \$3,000.00.**

**Please make sure all information is complete and accurate. Be sure to include your payment with the application. Once the Court has received your application and payment, we will notify both parties by mail of the scheduled Court date.**

**If you have any questions or concerns, please contact our office.**

**Newstead Town Court**

# Newstead Town Court Small Claim Application

**A Small Claim action shall be commenced by a plaintiff, or someone authorized to do so on his/her behalf, paying the filing fee and the cost of sending notice of claim to the Defendant as provided in the Uniform Justice Court Act, Article 18, Chapter 177 and by supplying the Clerk of the Court with the following information:**

\_\_\_\_\_  
**Your name: (Plaintiff)**

\_\_\_\_\_  
**Party you are suing: (Defendant)**

\_\_\_\_\_  
**Street Address**

\_\_\_\_\_  
**Street Address/Work Address**

\_\_\_\_\_  
**City, State, & Zip Code**

\_\_\_\_\_  
**City, State, & Zip Code**

\_\_\_\_\_  
**Telephone/Cell Phone**

\_\_\_\_\_  
**Telephone/Cell Phone**

**Briefly explain your reason to sue, including the Incident date.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Dollar amount requested:** \_\_\_\_\_ **Court fees:** \_\_\_\_\_ **Total:** \_\_\_\_\_

**I certify that the above information is true to the best of my knowledge.**

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_