

County Court, Denver County, Colorado 1437 Bannock Street, Room 135 Denver, Colorado 80202, 720-865-7840		▲ COURT USE ONLY ▲
Plaintiff(s): v. Defendant(s):		
Attorney or Party Without Attorney (Name and Address): <div style="display: flex; justify-content: space-between;"> <div> Phone Number: FAX Number: </div> <div> E-mail: Atty. Reg. #: </div> </div>		
		Case Number: Division Civil Courtroom
ANSWER UNDER SIMPLIFIED CIVIL PROCEDURE (including counterclaim(s) and/or cross claim(s))		

The Defendant(s) _____(name), answer(s) the complaint as follows:

FOR EVICTION CASES ONLY: The Defendant hereby notifies the Court and the Plaintiff(s) that the Defendant wishes to participate in Court Proceedings ☐in person ☐remotely via telephone or video. Defendant understands that should the Defendant choose to elect a different method of participation, the Defendant must notify the Court of their decision no less than 48 hours prior to the appearance. **If an election is not made, the Court will require personal participation by the Defendant.**

1. The amount of damages claimed to be due to the Plaintiff(s) by the complaint in this action is not due and owing for the following reasons:

OR

the Plaintiff(s) is/are not entitled to possession of the property and Defendant(s) is/are entitled to retain possession for the following reasons:

OR

the injunctive relief requested by the Plaintiff(s) should not be allowed for the following reasons:

2. ☐ (If applicable) the Defendant(s), _____, assert(s) the following counterclaim(s) or setoff(s) against the Plaintiff(s)

3. ☐ (If applicable) the Defendant(s) _____, assert(s) the following cross claim(s) against _____, named Defendant(s) (you are limited to the jurisdiction of the court):

4. If a counterclaim is asserted above, you must check one of the following statements:

- ☐ The amount of the counterclaim **does not** exceed the jurisdiction of the court (County Court filing fee required).
- ☐ The amount of the counterclaim **does** exceed the jurisdiction of the court, but I wish to limit my recovery to the jurisdiction of the court (County Court filing fee required).
- ☐ The amount of the counterclaim **does** exceed the jurisdiction of the court, and I wish the case transferred to the District Court (District Court filing fee required)

5. The Defendant(s):

- ☐ Request(s) a trial to the court.
- ☐ Request(s) a jury trial. By requesting a jury trial, the Defendant(s) understand(s) that a jury fee must be paid unless the fee is waived by the Court.

WARNING: ALL FEES ARE NON-REFUNDABLE. IN SOME CASES, A REQUEST FOR A JURY TRIAL MAY BE DENIED PURSUANT TO LAW EVEN THOUGH A JURY FEE HAS BEEN PAID.

Note: All Defendants filing this answer must sign unless the answer is signed by an attorney.

Signature of Defendant(s)

Signature of Attorney for Defendant(s) (if applicable)

Address(es) of Defendant(s):

Phone Number(s) of Defendant(s):

CERTIFICATE OF SERVICE

I certify that on _____ (date) a true and accurate copy of this *ANSWER UNDER SIMPLIFIED CIVIL PROCEDURE* was served on _____ the other party(s) or attorney(s) by:

☐ Hand Delivery ☐ E-filed ☐ Faxed to this number _____ or ☐ by placing it in the United States mail, postage pre-paid, and addressed to the following:

Defendant(s) or Attorney for Defendant(s) Signature