

IN THE MAGISTRATE COURT OF HALL COUNTY
STATE OF GEORGIA

Your First and Last Name

Plaintiff
123 Main St
Street Address
Atlanta, GA 30305
City, State, Zip Phone

v.

Case No. Assigned by court (leave blank)

Insurance Company Name
Defendant
456 Market St
Street Address
Atlanta, GA 30305
City, State, Zip Phone

STATEMENT OF CLAIM

The above-named Defendant is is (are) subject to the jurisdiction of this Court.

Defendant is indebted to the Plaintiff in the amount of \$ Diminished Value Amount + Appraisal Expenses (\$950) + \$5000 in Bad faith according to OCGA 33-4-6 + Court costs + Other expenses (if you have any) + any additional monies the court

The Plaintiff's claim against the Defendant is based on the following: finds suitable and appropriate.

The insurance company is inadequately compensating me for the loss in value my vehicle sufered due to an accident date [_____]

My insurance claim number is [_____]. They are also acting in bad faith.

Wherefore, Plaintiff demands Judgment against the Defendant for the sum of \$ Total From Above plus costs.

VERIFICATION

Georgia, _____ County
_____ being first duly sworn on oath, says the foregoing is a just and true statement of the amount owing by Defendant to Plaintiff, exclusive of all setoffs and just grounds of defense.

Sworn to and subscribed before me,
this _____ day of _____, 2014

Notary Public (or Attesting Official)

Plaintiff (or Agent)

NOTICE AND SUMMONS

To _____

Defendant/Home Address

or
c/o _____

Business Address

For Assistance & Further Information
Call (770) 531-6912, Ext. 1

You are hereby notified that _____ has made a claim and is requesting judgment against you in the sum of _____ Dollars (\$ _____), as shown by the foregoing statement. The Court will hold a hearing upon this claim in the Magistrate Courtroom, 2nd Floor, Hall County Courthouse, 225 Green Street, Gainesville, Georgia at a time to be set after your answer is filed. YOU ARE REQUIRED TO FILE OR PRESENT TO THE CLERK OF SAID COURT AN ANSWER TO THIS CLAIM WITHIN 30 DAYS AFTER SERVICE OF THIS CLAIM UPON YOU. IF YOU DO NOT ANSWER, JUDGMENT WILL BE ENTERED AGAINST YOU. YOUR ANSWER MAY BE FILED IN WRITING OR MAY BE GIVEN ORALLY TO THE JUDGE IN PERSON OR TO THE CLERK. You are required to be present at the hearing in order to avoid a judgment by default against you. If you have witnesses, books, receipts or other writings bearing on this claim, you should bring them with you at the time of hearing. If you wish to have witnesses summoned, see the Court at once for assistance. If you have any claim against the Plaintiff, you should notify the Court at once. If you admit the claim, but desire additional time to pay, you must still answer and come to the hearing in person and state the circumstances to the Court. You may come with or without an attorney.

Clerk/Deputy Clerk