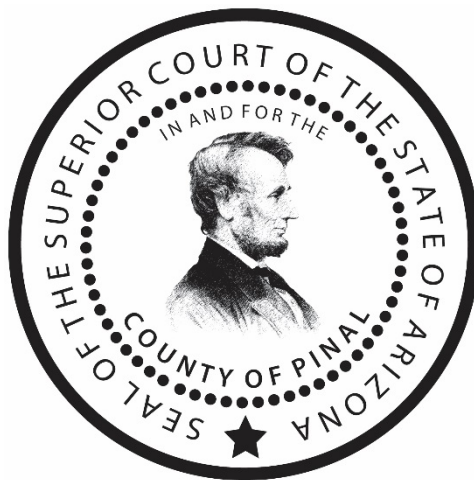


# CIVIL COMPLAINT



## PINAL COUNTY

### FORMS

Provided as a Public Service by  
Rebecca Padilla  
Clerk of the Superior Court

**In the Superior Court of the State of Arizona  
In and For the County of \_\_\_\_\_**

Case Number \_\_\_\_\_

**CIVIL COVER SHEET- NEW FILING ONLY**  
(Please Type or Print)

Plaintiff's Attorney \_\_\_\_\_

Attorney Bar Number \_\_\_\_\_

Plaintiff's Name(s): (List all)

Plaintiff's Address:

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

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

(List additional plaintiffs on page two and/or attach a separate sheet).

Defendant's Name(s): (List All) \_\_\_\_\_

(List additional defendants on page two and/or attach a separate sheet)

**RULE 26.2 DISCOVERY TIER OR MONETARY RELIEF CLAIMED:**

**IMPORTANT: Any case category that has an asterisk (\*) MUST have a dollar amount claimed or Tier selected.** State the monetary amount in controversy or place an "X" next to the discovery tier to which the pleadings allege the case would belong under Rule 26.2.

Amount Claimed \$ \_\_\_\_\_       Tier 1       Tier 2       Tier 3

**NATURE OF ACTION**

Place an "X" next to the **one** case category that most accurately describes your primary case. **Any case category that has an asterisk (\*) MUST have a dollar amount claimed or Tier selected as indicated above.**

**TORT MOTOR VEHICLE:**

- Non-Death/Personal Injury\*
- Property Damage\*
- Wrongful Death\*

Other (Specify) \_\_\_\_\_ \*

**MEDICAL MALPRACTICE:**

- Physician M.D.\*       Hospital\*
- Physician D.O.\*       Other\*

**TORT NON-MOTOR VEHICLE:**

- Negligence\*
- Product Liability – Asbestos\*
- Product Liability – Tobacco\*
- Product Liability – Toxic/Other\*
- Intentional Tort\*
- Property Damage\*
- Legal Malpractice\*
- Malpractice – Other professional\*
- Premises Liability\*
- Slander/Libel/Defamation\*

**CONTRACTS:**

- Account (Open or Stated)\*
- Promissory Note\*
- Foreclosure\*

- Buyer-Plaintiff\*
- Fraud\*
- Other Contract (e.g., Breach of Contract)\*
- Excess Proceeds – Sale\*
- Construction Defects (Residential/Commercial)\*
  - Six to Nineteen Structures\*
  - Twenty or More Structures\*
- Credit Card Debt (Maricopa County Filings Only)\*

**OTHER CIVIL CASE TYPES:**

- Eminent Domain/Condemnation\*
- Eviction Actions (Forcible and Special Detainers)\*
- Change of Name
- Transcript of Judgment
- Foreign Judgment
- Quiet Title\*
- Forfeiture\*
- Election Challenge
- NCC – Employer Sanction Action (A.R.S. §23-212)
- Injunction against Workplace Harassment
- Injunction against Harassment
- Civil Penalty
- Water Rights (Not General Stream Adjudication)\*
- Real Property\*
- Special Action against Lower Courts  
(See lower court appeal cover sheet in Maricopa)
- Immigration Enforcement Challenge (A.R.S. §§1-501, 1-502, 11-1051)

**UNCLASSIFIED CIVIL:**

- Administrative Review  
(See lower court appeal cover sheet in Maricopa)
- Tax Appeal  
(All other tax matters must be filed in the AZ Tax Court)
- Declaratory Judgment
- Habeas Corpus
- Landlord Tenant Dispute – Other\*
- Declaration of Factual Innocence (A.R.S. §12-771)
- Declaration of Factual Improper Party Status
- Vulnerable Adult (A.R.S. §46-451)\*
- Tribal Judgment
- Structured Settlement (A.R.S. §12-2901)
- Attorney Conservatorships (State Bar)
- Unauthorized Practice of Law (State Bar)
- Out-of-State Deposition for Foreign Jurisdiction
- Secure Attendance of Prisoner
- Assurance of Discontinuance
- In-State Deposition for Foreign Jurisdiction
- Eminent Domain – Light Rail Only\*
- Interpleader – Automobile Only\*
- Delayed Birth Certificate (A.R.S. §36-333.03)
- Employment Dispute – Discrimination\*
- Employment Dispute – Other\*
- Verified Rule 45.2 Petition
- Other (Specify)\* \_\_\_\_\_

**EMERGENCY ORDER SOUGHT:**

- Temporary Restraining Order
- Employer Sanction
- Provisional Remedy
- Other (Specify) \_\_\_\_\_
- OSC
- Election Challenge

**COMMERCIAL COURT (Maricopa County Only)**

This case is eligible for the commercial court under Rule 8.1, and plaintiff requests assignment of this case to the commercial court. More information on the commercial court, including the most recent forms, are available on the court’s website at <https://www.superiorcourt.maricopa.gov/commercial-court/>.

Additional Plaintiff(s)

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Additional Defendant(s)

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Person Filing: \_\_\_\_\_  
Address (if not protected): \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Representing [ ] Self or [ ] Attorney for \_\_\_\_\_  
Lawyer's Bar Number: \_\_\_\_\_

FOR CLERK'S USE ONLY

**SUPERIOR COURT OF ARIZONA**  
**IN \_\_\_\_\_ COUNTY**

\_\_\_\_\_  
**Name of Plaintiff**

**Case Number:** \_\_\_\_\_

**Title: CIVIL COMPLAINT**

\_\_\_\_\_  
**Name of Defendant**

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

Plaintiff hereby submits this complaint against Defendant(s) and alleges the following:

**JURISDICTION and VENUE**

1. The Superior Court in \_\_\_\_\_ County has the legal authority to hear and decide this case because: *(Check all boxes that are true.)*
  - The value of this case exceeds \$10,000 dollars.
  - Replevin or other nonmonetary remedy will take place in \_\_\_\_\_ County.
  - The Plaintiff resides in \_\_\_\_\_ County.
  - The Defendant resides in \_\_\_\_\_ County.
  - The Defendant does business in \_\_\_\_\_ County.
  - The events, actions, or debts subject of this Complaint occurred in \_\_\_\_\_ County.

Other reason: \_\_\_\_\_  
\_\_\_\_\_

**DISCOVERY TIER**

2. Pursuant to Arizona Rules of Civil Procedure, Rule 26.2 (c) (3), the Court should assign my case to the following tier based on the amount of damages I request.

Tier 1 = Actions claiming \$50,000 or less in damages.

Tier 2 = Actions claiming more than \$50,000 and less than \$300,000 in damages,

OR Actions claiming nonmonetary relief.

Tier 3 = Actions claiming \$300,000 or more in damages.

**PARTIES**

3. The Plaintiff in this case is:

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

4. The Defendant in this case is:

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

**STATEMENT OF FACTS AND BREACH**

5.

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

6.

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7.

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8.

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9.

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10.

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(If you need more space, add an attachment labeled “Statement of Facts and Breach,” and continue consecutive numbering.)

**APPLICABLE LAW SUPPORTING CLAIMS**

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( )

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Case Number: \_\_\_\_\_

( )

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( )

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( )

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( )

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(If you need more space, add an attachment labeled “Applicable Laws Supporting Claims,” and continue consecutive numbering.)

**INJURIES**

( )

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( )

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( )

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( )

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( )

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(If you need more space, add an attachment labeled “Injuries,” and continue consecutive numbering.)

**DEMAND FOR RELIEF**

**WHEREFORE**, Plaintiff demands judgment against defendant(s), and each of them (if applicable) for the following dollars, interest, costs, and expenses incurred herein, or non-monetary remedy, including reasonable attorneys' fees, and for such other and further relief as the Court may deem just and proper.

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\_\_\_\_\_

( )

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

(If you need more space, add an attachment labeled "Demand for Relief," and continue consecutive numbering.)

**Dated this** \_\_\_\_\_.  
*(Date of signature)*

\_\_\_\_\_  
*(Signature of Plaintiff or Plaintiff's Attorney)*



Person Filing: \_\_\_\_\_  
Address (if not protected): \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Representing [ ] Self or [ ] Attorney for \_\_\_\_\_  
Lawyer's Bar Number: \_\_\_\_\_

For Clerk's Use Only

**SUPERIOR COURT OF ARIZONA**  
**IN \_\_\_\_\_ COUNTY**

\_\_\_\_\_  
**Name of Plaintiff**

**Case Number:** \_\_\_\_\_

**And**

**SUMMONS**

\_\_\_\_\_  
**Name of Defendant**

**WARNING:** This is an official document from the court that affects your rights. Read this carefully. If you do not understand it, contact a lawyer for help.

**FROM THE STATE OF ARIZONA TO:** \_\_\_\_\_  
**Name of Defendant**

- 1. A lawsuit has been filed against you.** A copy of the lawsuit and other court papers are served on you with this "Summons".
- 2.** If you do not want a judgment or order taken against you without your input, you must file an "Answer" or a "Response" in writing with the court and pay the filing fee. If you do not file an "Answer" or "Response" the other party may be given the relief requested in his/her Petition or Complaint. To file your "Answer" or "Response" take, or send, the "Answer" or "Response" to the Clerk of the Superior Court.

Mail a copy of your "Response" or "Answer" to the other party at the address listed on the top of this Summons.

- 3.** If this "Summons" and the other court papers were served on you by a registered process server or

the Sheriff, within the State of Arizona, your “Response” or “Answer” must be filed within TWENTY (20) CALENDAR DAYS from the date you were served, not counting the day you were served. If this “Summons” and the other papers were served on you by a registered process server or the Sheriff outside the State of Arizona, your Response must be filed within THIRTY (30) CALENDAR DAYS from the date you were served, not counting the day you were served. Service by a registered process server or the Sheriff is complete when made. Service by Publication is complete thirty (30) days after the date of the first publication.

4. You can get a copy of the court papers filed in this case from the Petitioner at the address at the top of this paper, or from the Clerk of the Superior Court.
5. Requests for reasonable accommodation for persons with disabilities must be made to the office of the judge or commissioner assigned to the case, at least ten (10) judicial days before your scheduled court date.
6. Requests for an interpreter for persons with limited English proficiency must be made to the office of the judge or commissioner assigned to the case at least ten (10) judicial days in advance of your scheduled court date.

**SIGNED AND SEALED this date**

\_\_\_\_\_  
**CLERK OF SUPERIOR COURT**

By \_\_\_\_\_  
**Deputy Clerk**

Person Filing: \_\_\_\_\_  
Address (if not protected): \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Representing [ ] Self or [ ] Attorney for \_\_\_\_\_  
Lawyer's Bar Number: \_\_\_\_\_

For Clerk's Use Only

**SUPERIOR COURT OF ARIZONA**  
**IN \_\_\_\_\_ COUNTY**

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

**PLAINTIFF**

**vs.**

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

**DEFENDANT**

**Case Number:**

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

**CERTIFICATE OF COMPULSORY  
ARBITRATION**

The undersigned certifies that the largest award sought by the complainant, including punitive damages, but excluding interest, attorneys' fees, and costs [ ] **does** [ ] **does not** exceed limits set by Local Rule for compulsory arbitration. This case [ ] **is** [ ] **is not** subject to compulsory arbitration as provided in Rules 72 through 77 of the Rules of Civil Procedure.

**SUBMITTED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.**

**BY \_\_\_\_\_**

Person Filing: \_\_\_\_\_  
Address (if not protected): \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Representing [ ] Self or [ ] Attorney for \_\_\_\_\_  
Lawyer's Bar Number: \_\_\_\_\_

FOR CLERK'S USE ONLY

**SUPERIOR COURT OF ARIZONA**  
**IN \_\_\_\_\_ COUNTY**

\_\_\_\_\_  
**Name of Plaintiff**

**Case Number:** \_\_\_\_\_

\_\_\_\_\_  
**Name of Defendant**

**PLAINTIFF'S DEMAND for  
JURY TRIAL**

Plaintiff, \_\_\_\_\_ (*Name of Plaintiff*), demands a trial by jury in this case. If this case is sent to compulsory arbitration, Plaintiff demands a trial by jury if there is an appeal from that compulsory arbitration.

**Dated this** \_\_\_\_\_.  
(Date of signature)

\_\_\_\_\_  
(Signature of Plaintiff or Plaintiff's Attorney)