

CAUSE NO. _____

_____	§	IN THE JUSTICE COURT
PLAINTIFF	§	
	§	
v.	§	PRECINCT _____
	§	
_____	§	
DEFENDANT	§	_____ COUNTY, TEXAS

PETITION: REPAIR AND REMEDY CASE

COMPLAINT: Plaintiff files this petition against Defendant pursuant to Rule 509 and Texas Property Code § 92.0563, because there is a condition in Plaintiff's residential rental property that materially affects the health or safety of an ordinary tenant.

Information Regarding Residential Rental Property:

Street Address Unit No. (if any)

City County State Zip Code

Defendant's Contact Information (to the extent known):

Street Address Unit No. (if any)

City County State Zip Code

Phone Number: (____)_____

SERVICE OF CITATION: Plaintiff requests service of the citation on the Defendant and, if required, alternative service pursuant to Rule 509.4.

The following are true (check the box next to each statement that is true):

- ☐ Plaintiff received in writing Defendant's name and business street address.
- ☐ Plaintiff received in writing the name and business street address of Defendant's management company.

CONTACT INFORMATION (if known): Plaintiff provides the following contact information to the best of their knowledge :

Management Company's Contact Information:

Name

Street Address Unit No. (if any)

City County State Zip Code

Phone Number: (____)_____

On-Premises Manager's Contact Information:

Name _____

Street Address _____

Unit No. (if any) _____

City _____

County _____

State _____

Zip Code _____

Phone Number: (_____) _____

Rent Collector's Contact Information:

Name _____

Street Address _____

Unit No. (if any) _____

City _____

County _____

State _____

Zip Code _____

Phone Number: (_____) _____

PROPERTY CONDITION: The property condition materially affecting the physical health or safety of an ordinary tenant that Plaintiff seeks to have repaired or remedied is:

_____.

LEASE AND NOTICE: The following are true (check the box next to each statement that is true):

- ☐ The lease is oral. ☐ The lease is in writing.
- ☐ The lease requires the notice to repair and remedy a condition to be in writing.
- ☐ Plaintiff gave written notice to repair or remedy the condition on _____, 20____.
- ☐ Plaintiff gave a subsequent written notice to repair or remedy the condition after a reasonable time to repair or remedy the condition after giving the first notice. The subsequent written notice was given on _____, 20____.
- ☐ Plaintiff gave written notice to repair or remedy the condition by certified mail, return, receipt requested, or registered mail or by another form of mail that allows tracking of delivery from the USPS or a private delivery service on _____, 20____.
- ☐ Plaintiff gave oral notice to repair or remedy the condition on _____, 20____. Name of person(s) to whom notice was given: _____. Place where notice was given: _____.

RENT: At the time Plaintiff gave notice to repair or remedy the condition, Plaintiff's rent was:

☐ current (no rent owed); ☐ not current but Plaintiff offered to pay the rent and Defendant did not accept it; or ☐ not current and Plaintiff did not offer to pay the rent owed.

Plaintiff's rent of \$ _____ is due on the _____ day of the ☐ month ☐ week ☐ _____ (specify any other rent-payment period).

Plaintiff's rent: ☐ is not subsidized by the government ☐ is subsidized by the government as follows, if known: \$ _____ paid by the government, and \$ _____ paid by Plaintiff.

RELIEF REQUESTED: Plaintiff requests the following relief (check all that apply):

- ☐ a court order to repair or remedy the condition;
- ☐ a court order reducing Plaintiff's rent in the amount of \$ _____ to begin on _____, 20____;
- ☐ actual damages in the amount of \$ _____;
- ☐ a civil penalty of one month's rent plus \$500;
- ☐ attorney's fees; and
- ☐ court costs.

JURISDICTION: Plaintiff states that the total relief requested does not exceed \$10,000, excluding interest and court costs but including attorney's fees.

TRIAL:

- ☐ I request a jury trial. (*The fee is \$22 and must be paid at least 14 days before trial unless you file a Statement of Inability to Afford Payment of Court Costs in compliance with Texas Rule of Civil Procedure 502.3.*)
- ☐ I do not request a jury at this time.

Respectfully submitted,

Signature of Plaintiff

Printed Name: _____

Address: _____

Email: _____

Telephone: _____

Fax: _____

Signature of Attorney, if any

Printed Name: _____

Address: _____

Email: _____

Telephone: _____

Fax: _____

State Bar No.: _____