



**KELVIN MILES
JUSTICE COURT
PRECINCT ONE**

REPAIR AND REMEDY

- **REPAIR AND REMEDY CASE:** A Repair and Remedy Case is a lawsuit filed by a residential tenant under Chapter 92, Subchapter B, of the Texas Property Code to enforce the landlord's duty to repair or remedy a condition materially affecting the physical health or safety of an ordinary tenant. The relief sought can be for no more than \$20,000, excluding statutory interest and court costs but including attorney fees, if any.

Courthouse N.E. Annex, 1020 E. Hwy 199, Springtown, TX 76082
(682) 229-2107 – civil clerk **(682) 229-2106**
(817) 220-2000 fax **jp1@parkercountytx.com**

CAUSE NO. _____

_____	§	IN THE JUSTICE COURT
PLAINTIFF	§	
	§	
v.	§	PRECINCT ONE
	§	
_____	§	
DEFENDANT	§	PARKER 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.

SERVICE BY EMAIL: (*Normally, documents in this case are sent by mail. If it is easier for you, you can choose to get some of the documents sent by email. If you choose to get documents by email, you must have an email account where you can receive, open, and view large attachments, and it is important that you check this email account every day. Even if you receive some documents by email, you will still receive some documents about the case by mail or personal service, so you must not ignore any documents from the court or other parties received by mail or personal service.*)

Yes, I would like to receive documents related to this case by email at this email address: _____.

No, I do not want to receive any documents by email.

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.: _____

CAUSE NO. _____

_____	§	IN THE JUSTICE COURT
VS	§	PRECINCT ONE
_____	§	PARKER COUNTY, TEXAS

AFFIDAVIT OF MILITARY STATUS OF DEFENDANT

Before me, the undersigned clerk of the justice court or notary public, on this day personally appeared the undersigned affiant whose identity is known to me. After I administered an oath to such affiant, he or she upon oath and under penalty of perjury stated the following:

My name is *[please print]* _____; I am *[check one]* _____ the plaintiff or _____ an authorized agent or _____ attorney for the plaintiff in the above styled and numbered cause. I am over the age of 18 and am capable of making this affidavit. The facts stated in the affidavit are within my personal knowledge and are true and correct.

[check below as applicable]

- The defendant is not in the military
- The defendant is not on active duty in the military and/or
- The defendant is not in a foreign country on military service
- The defendant is on active military duty and/or is subject to the Service member Civil Relief Act of 2003.
- The defendant has waived his/her rights under the Service member Civil Relief Act of 2003.
- The defendant's military status is unknown at this time.

Signature of Plaintiff/Agent/Attorney

Subscribed and sworn to before me by _____ on this the _____ day of _____, 20____.

Court Clerk/Notary Public