

**MOTION TO SET ASIDE  DEFAULT  JUDGMENT  
OR  DISMISSAL; DECLARATION; NOTICE OF MOTION;  
CERTIFICATE OF SERVICE**

Form #2DC42

**IN THE DISTRICT COURT OF THE SECOND CIRCUIT**  
 \_\_\_\_\_ **DIVISION**  
**STATE OF HAWAI'I**

Plaintiff(s)

Reserved for Court Use

Civil No.

Filing Party(ies)/Filing Party(ies)' Attorney (Name, Attorney Number, Firm Name (if applicable), Address, Telephone and Facsimile Numbers)

Defendant(s)

Date of Default, Judgment or Dismissal entered:

**MOTION TO SET ASIDE  DEFAULT  JUDGMENT or  DISMISSAL**

Filing Party(ies) requests that this Motion be set for hearing on a date and time certain. This Motion is based on the Declaration below and is made pursuant to the District Court Rules of Civil Procedure, Rule \_\_\_\_\_.

**DECLARATION**

I have read this Motion, know the contents and verify that the statements are true to my personal knowledge and belief. **I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF HAWAI'I THAT THE FOLLOWING IS TRUE AND CORRECT:**

1. I am the  Movant or  associated with Movant as \_\_\_\_\_;
2. The following are facts why the Motion should be granted (attach continuation page, if necessary);

Date:

Signature of Declarant:

Print/Type Name:

**NOTICE OF MOTION**

TO: \_\_\_\_\_:  
Please take notice that this Motion will be heard by the District Judge of this Court, in his/her Courtroom, at the address checked below on \_\_\_\_\_, \_\_\_\_\_, 20\_\_\_\_ at \_\_\_\_\_ M., or as soon thereafter as parties may be heard.

**COURT ADDRESSES**

- Wailuku Division (Regular Claims) 2145 Main Street, Courtroom 3C, Third Floor, Wailuku, Hawai'i, 96793
- Wailuku Division (Small Claims) 2145 Main Street, Courtroom 3D, Third Floor, Wailuku, Hawai'i 96793
- Lahaina Division 1870 Honoapiilani Highway, Lahaina, Hawai'i, 96761
- Hana Division 4974 Uakea Road, Hana, Hawai'i, 96713
- Moloka'i Division 55 Makaena Place, Kaunakakai, Moloka'i, Hawai'i 96748
- Lana'i Division 312 8th Street, Lana'i City, Lana'i, Hawai'i 96763

Mailing address for the above Courts: 2145 Main Street, Room 106, Wailuku, Hawai'i 96793.

**CERTIFICATE OF SERVICE**

I certify that a copy of this Motion was served at the last known address(es) of the Opposing Party(ies) or Opposing Party(ies)' attorney on \_\_\_\_\_ by  Hand-delivery or  Mail, Postage Prepaid, at the following address(es):

Date:	Signature of Filing Party(ies)/Filing Party(ies)' Attorney:
	Print/Type Name:

**RESPONSE TO MOTION/CERTIFICATE OF SERVICE**

- I DO NOT OBJECT to this Motion.
- I DISAGREE with this Motion for the following reasons:

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I have read this Response, know the contents and verify that the statements are true to my personal knowledge and belief. **I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF HAWAII THAT THE ABOVE IS TRUE AND CORRECT.**

**CERTIFICATE OF SERVICE**

I certify that a copy of this Response was served at the last known address(es) of the Opposing Party(ies) or Opposing Party(ies)' attorney on \_\_\_\_\_ by  Hand-delivery or  Mail, Postage Prepaid, at the following address(es):

Date:	Signature of Responding Party(ies)/Responding Party(ies)' Attorney:
	Print/Type Name:

In accordance with the **Americans with Disabilities Act**, and other applicable State and Federal laws, if you require an accommodation for your disability when working with a court program, service, or activity please contact the District Court Administration Office at PHONE NO. 244-2800, FAX 244-2849, or email [adarequest@courts.hawaii.gov](mailto:adarequest@courts.hawaii.gov) at least (10) working days before your preceeding, hearing, or appointment date. For Civil related matters, please call 244-2706 or visit the Service Center at 2145 Main Street, Room 141A, Wailuku, Hawai'i 96793.