Form 2-A. CIVIL INFORMATION SHEET

STATE OF HAWAI'I CIRCUIT COURT OF THE CIRCUIT		CIVIL INFORMATION SHEET					
I (A). PLAINTIFF(S)							
Additional page(s) attached							
I (B). DEFENDANT(S)							
Additional page(s) attached							
II.(A). PLAINTIFF'S(S') ATTORNEY (NA	ME/NU	MBER)	II.(B). DEFENDAN	IT'S (S') ATTO	RNEY (NAI	ME/NUMBER)
Additional page(s) attached				Additional page(s) attached			
III. NATURE OF SUIT Contract Motor Vehicle Tort Assault & Battery Construction Defects Medical Malpractice		IV. ORIGIN V. DEMAND (A). Original Proceeding (B). Transfer from District Court CIV. NO (C). Transfer from another Circuit CIV. NO					
 Legal Malpractice Product Liability Other Non-Vehicle Tort Condemnation Foreclosure Agreement of Sale Foreclosure Agency Appeal Declaratory Judgment Other Civil Action Environmental Court Asbestos Consumer Debt Collection Quiet Title 		VI. JURY DEMAND		VII. CLASS ACTION		VIII. REQUEST TO EXEMPT FROM ARBITRATION YES	
		IX. RELATED CASE(S) JUDGE CIVIL NUMBER					
DATE	ATTO	RNEY NAME/PARTY NA	ME		SIGNATURE		
RESERVED FOR COURT USE							
CIVIL NO.							
In accordance with the Americans with Disabilities Act, and other applicable state and federal laws, if you require reasonable accommodation for a disability, please contact the ADA Coordinator at the Circuit Court Administration Office on OAHU-Phone No. 808-539-4400, TTY 808-539-4853, FAX, 539-4402; MAUI-Phone No. 808-244-2929, FAX 808-244-2777; HAWAII-Phone No. 808-961-7424, TTY 808-961-7422, FAX 808-961-7411; KAUAI-Phone No. 808-482-2365, TTY 808-482-2533, FAX 808-482-2509, at least ten (10) working days prior to your hearing or appointment date.							

INSTRUCTIONS FOR COMPLETING THE CIVIL INFORMATION SHEET

The civil information sheet and the information it contains neither replace nor supplement the filings, the service pleadings or other documents as required by law, except as provided by the rules of court.

This form is required for the purpose of initiating the civil docket sheet.

Consequently, a civil information sheet is required for each civil complaint filed.

The attorney/party filing a civil complaint shall complete the form as follows:

I. PLAINTIFF(S)/DEFENDANT(S)

List names: last, first, middle initial.

If the plaintiff or defendant is a government agency, indicate the full name.

If the plaintiff or defendant is an official of a government agency, first indicate the agency name and then the official's name and title.

If the space provided is insufficient, attach additional page(s) and check the box so indicating.

II. PLAINTIFF'S(S')/DEFENDANT'S(S') ATTORNEY

Indicate the attorney name and license number.

If the space provided is insufficient, attach additional page(s) and check the box so indicating.

III. NATURE OF SUIT

Place a "✔" (check mark) in the appropriate box.

If more than one category applies, select the <u>one</u> category that best describes the action.

Do not select more than one category.

For cases arising under Hawai[€]i Revised Statutes, section 604A-2, place a "✔" (check mark) in the Environmental Court box.

IV. ORIGIN

- (A) Original Proceedings: cases originating in the circuit court.
- (B) Transfer from District Court: cases transferred from district court under Haw. Rev. Stat. §§ 604-5 (Supp. 2006), 633-31 (1993).
- (C) Transfer from another Circuit: cases transferred from another circuit under Haw. Rev. Stat. §§ 603-37, -37.5 (1993)

V. DEMAND

Indicate the remedy being demanded (e.g., damages, preliminary injunction, etc.)

VI. JURY DEMAND

Indicate whether a jury is being demanded.

VII. CLASS ACTION

Indicate whether the action is brought as a class action.

VIII. REQUEST TO EXEMPT FROM ARBITRATION

Indicate whether a "Request to Exempt from Arbitration" is filed.

IX. RELATED CASES

List the civil number and the assigned judge for related pending cases.

X. SIGNATURE OF ATTORNEY OR PARTY

Date and sign the civil information sheet.

(Rev. 08/__/21)