## COMPLAINT - RESIDENTIAL SUMMARY POSSESSION (Unpaid Rent Only) Temporary use form Act 202, SLH 2024

IN THE DISTRICT COURT OF THE SECOND CIRCUIT	
STATE OF HAWAI`I	
Plaintiff	
	Civil No.
Defendant	Filing Party/Attorney Name, Attorney Number, Firm Name (if applicable), Address, and Telephone Number
Premises Address:	
COMPLAINT - UNPAID RENT ONLY	
<ul> <li>□ Defendant is a month-to-month tenant.</li> <li>6. Monthly rent is \$ As of (date), to or greater than: □ 4 months' rent; □ 3 months' rent; □ 2 month</li> <li>7. □ A written 15 day notice providing all the information required to Defendant on (date): (Attach a construction of the is not required as tenant breached the mediation agreement</li> </ul>	copy of the written rental agreement) oral agreement. (Attach a copy of the expired rental agreement) Defendant owes \$ in unpaid rent. This amount is equal ns' rent; □ 1 month's rent or □ less than 1 month's rent. by Act 202 (2024) (to be codified at HRS Chapter 521) was given to py of the written notice)
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COMPLAINT (continued)	
9. The parties participated in mediation on (date)	
□ Mediation is scheduled for (date)	
As of (date), mediation has not been scheduled for the following reasons	
<ul> <li>10. Despite the notice and mediation attempts, Defendant has failed to correct this situation and is still in possession of the premises.</li> <li>11. The Service Members Civil Relief Act, 50 U.S.C. App. §501 may apply to a Defendant who is classified active duty as defined in the Act. Please check all that apply.</li> </ul>	
$\Box$ To the best of my knowledge, the Defendant is not an active duty member of the Military.	
□ The following Defendant is an active duty member of the Military. Name	
□ I am unable to determine whether the Defendant is an active duty member of the Military. Please attach separate sheet indicating what attempt was made to determine Defendant's military status.	
Plaintiff is asking the Court for the following:	
A. A Judgment giving Plaintiff possession of the premises.	
B. A Writ of Possession directing the Sheriff or Police Officer to:	
<ol> <li>Remove the Defendant from the premises and all persons possessing the premises through the Defendant;</li> <li>Remove from the premises all personal belongings of the Defendant and of any other person; and</li> <li>Put Plaintiff in possession of the premises.</li> </ol>	
C. Judgment against the Defendant for \$	
In addition, the Court may award additional rent and other charges owed under the rental agreement, damages, court costs, interest and reasonable attorney's fees.	
Signature of Plaintiff/Attorney:	
Date: Print/Type Name:	
DECLARATION	
I DECLARE UNDER PENALTY OF PERJURY THAT WHAT IS STATED IN THE COMPLAINT IS TRUE AND CORRECT.	
Date: Signature of Declarant:	
Print/Type Name:	
If you need an accommodation for a disability when participating in a court program, service, or activity, please contact the ADA Coordinator as soon as possible to allow the court time to provide an accommodation: Call (808) 244-2855 FAX (808) 244-2932 OR Send an e-mail to: adarequest@courts.hawaii.gov. The court will try to provide, but cannot guarantee, your requested auxiliary aid, service or accommodation	