
My Name

Address

City, State, Zip

Phone

Email

I am the Plaintiff/Petitioner
 Defendant/Respondent
 Attorney for the Plaintiff/Petitioner Defendant/Respondent and my
Utah Bar number is _____

In the District Court of Utah

_____ Judicial District _____ County

Court Address _____

<p>_____ Plaintiff/Petitioner</p> <p>v.</p> <p>_____ Defendant/Respondent</p>	<p>Affidavit Opposing the Motion to Renew Judgment</p> <p><input type="checkbox"/> Hearing Requested</p> <p>_____ Case Number</p> <p>_____ Judge</p>
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Instructions:

- You must complete this form before you file it. Court staff cannot complete this form for you.
- Keep a copy of all documents for your records.
- Attend all court hearings.
- Attach:
 - Additional pages as needed to complete paragraphs that don't have enough space. Write the paragraph number on the additional page.
 - Any documents referred to in this document.

- o Non-Public Information Form, more fully describing any non-public information referred to in this document.

Being first sworn and while under oath or affirmation, I say as follows:

- (1) I agree disagree with Paragraph (1) of the Affidavit Supporting the Motion.
- (2) I agree disagree with Paragraph (2) of the Affidavit Supporting the Motion.
- (3) I agree disagree with Paragraph (3) of the Affidavit Supporting the Motion. The amount that I owe is:

Amount of Judgment (original or as last renewed by motion, whichever is later)	\$
Post-judgment interest to the date of this affidavit at the rate of _____% per year	\$
Fee to file applications for writs of garnishment or writs of execution. (Attach receipts.)	\$
Garnishees' fees (Attach receipts.)	\$
Cost to serve writs (Attach receipts.)	\$
Attorney fees (Attach statute or contract showing your obligation to pay attorney fees.)	\$
Fee to file Motion to Renew Judgment (one-half the fee for a civil claim of the same amount)	\$
Subtotal	\$
Less Payments Made	\$
Total Amount Due	\$

- (4) I agree disagree with Paragraph (4) of the Affidavit Supporting the Motion.
- (5) I agree disagree with Paragraph (5) of the Affidavit Supporting the Motion.
- (6) I agree disagree with Paragraph (6) of the Affidavit Supporting the Motion.
- (7) I further say as follows:

Certificate of Service

I certify that I served a copy of this document on the following people.

Person's Name	Method of Service	Served at this Address	Served on this Date
(Other Party or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Clerk of Court)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Electronic File		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

_____ Sign here ► _____
 Date

 Typed or Printed Name