



State of Connecticut - Superior Court
Small Claims Area At Manchester
410 Center Street
Manchester, CT 06040-

Telephone No.: (860) 647-9789 Fax Number: (860) 649-7219

149637

December 23, 2003

THE COMMON AT SINNOTT FARM, INC.
P.O. BOX 681
BLOOMFIELD, CT 06002-

Notice of Judgment or Disposition

RE: Docket #: SCAH-149637 THE COMMON AT SINNOTT FARM, INC. VS. HAWKINS ET AL
Plaintiff THE COMMON AT SINNOTT FARM, INC.

On 12/23/2003 Judgment for the Plaintiff after Default and Hearing in Damages

THE COURT FOUND JUDGMENT IN FAVOR OF THE PLAINTIFF(S). This means that the Defendant(s) lost the case and must pay the Damages and Costs as follows:

The defendant(s) owes \$1,875.00 Damages and \$35.00 Costs for a total of **\$1,910.00**

Payments of \$35.00 Weekly starting on 01/15/2004 have been ordered by the court.
This means that, starting on the above date, the defendant(s) must pay the above amount Weekly.

Judgment was entered in your favor against the defendant. It is important that you read this notice carefully.

The purpose of the small claims court is to resolve a claim between the parties. THE COURT DOES NOT COLLECT THE MONEY OWED YOU. The Court has ordered the defendant to pay you as shown above but it is your responsibility to enforce this order if the defendant fails to make the payment(s) as indicated.

If payments are not made as ordered, wages, bank accounts or other property of the defendant may be attached. In order to enforce the judgment when it is not adhered to, you must file an application for execution. A wage execution may issue ONLY if an order for installment payments is entered against the defendant. In order to prepare the execution you will need all of the information shown on this form plus an accurate record of payments made (if any) by the defendant up to the time you seek the execution.

The execution forms are available on-line at www.jud.state.ct.us or at the small claims clerk's office. The clerk will assist you in completing the forms if necessary. Once an execution is issued, IT WILL BE YOUR RESPONSIBILITY TO ARRANGE FOR A STATE MARSHAL TO SERVE THE EXECUTION. YOU MUST ALSO PROVIDE THE STATE MARSHAL WITH THE INFORMATION NEEDED TO BE SUCCESSFUL IN RECOVERING THE MONEY OWED YOU, such as the defendant's current address, bank, employer or other information.

Once a judgment is paid in full, the recovering party shall file a written satisfaction of judgment with the Court Clerk.

Payments to be made to:

THE COMMON AT SINNOTT FARM, INC.
P.O. BOX 681
BLOOMFIELD, CT 06002-



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410 Center Street
Manchester, CT. 06040-

ORIGINAL

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THE COMMON AT SINNOTT FARM, INC.
P.O. BOX 681
BLOOMFIELD, CT 06002-

RE: Docket No SCAH-149637

THE COMMON AT SINNOTT FARM, INC. VS. HAWKINS ET AL

NOTICE TO PLAINTIFF

Answer Date:

Monday, October 20, 2003

The defendant is required to file an answer on or before the answer date.

After the answer has been filed, the matter will be set for a hearing. If no answer is filed, either a default judgment will enter or a hearing in damages will be scheduled, as appropriate.

**SMALL CLAIMS WRIT
AND NOTICE OF SUIT**JD-CV-40 Rev. 4-01
C.G.S. § 51-15
Pr. Bk. § 24-1 et seq.**CONNECTICUT SUPERIOR COURT
SMALL CLAIMS SESSION**

Type or print legibly. Complete original and make one copy for each party to the action.
File the original and all copies with the clerk. Also, include one "Instructions to Defendant"
for each defendant and submit the appropriate entry fee.

DOCKET NO. SC A. H. - 17-1427
ANSWER DATE 1/10/18

SMALL CLAIMS AREA LOCATION☐ G.A. ☐ HOUSING SESSION AT: ☐ JUDICIAL DISTRICT AT:

P L T F	NAME ADDRESS AND ZIP CODE OF PLAINTIFF #1 The Company at Summit Farm, Inc. 100 Oak Hill Bloomfield, CT 06002		P L T F	NAME ADDRESS AND ZIP CODE OF PLAINTIFF #2	
	TELEPHONE NO. (w/area code) ("X" ONE) <input type="checkbox"/> LLC <input type="checkbox"/> PARTNERSHIP 360 242-7123 <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> CORPORATION			TELEPHONE NO. (w/area code) ("X" ONE) <input type="checkbox"/> LLC <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> CORPORATION	
ATTORNEY FOR PLAINTIFF(S)			JURIS NO.		TELEPHONE NO. (w/area code)
D E F	NAME ADDRESS AND ZIP CODE OF DEFENDANT #1 Anderson and Pearline Hawkins 22 Pine Bush Lane Bloomfield, CT 06002		D E F	NAME ADDRESS AND ZIP CODE OF DEFENDANT #2	
	TELEPHONE NO. (w/area code) ("X" ONE) <input type="checkbox"/> LLC <input type="checkbox"/> PARTNERSHIP 360 242-0813 <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> CORPORATION			TELEPHONE NO. (w/area code) ("X" ONE) <input type="checkbox"/> LLC <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> CORPORATION	
FOR COURT USE ONLY:			JURIS NO.		TELEPHONE NO. (w/area code)

YOU ARE BEING SUED.

THE ABOVE PLAINTIFF(S) **CLAIMS YOU OWE** →
PLUS COURT COSTS, FOR THE FOLLOWING REASONS:

AMOUNT DUE

\$1,875.00TOWN WHERE TRANSACTION/INJURY OCCURRED
OR PREMISES LOCATED

Bloomfield

UNPAID MAINTENANCE FOR TWO FIVE

The undersigned, being duly sworn, deposes and says that the signer has read the claim and, to the best of the signer's knowledge, information and belief, there is good ground to support it.

SIGNED X <i>Charles R. Norwood</i>	TYPE IN NAME AND TITLE OF PERSON SIGNING AT LEFT <i>Charles R. Norwood, President</i>
SUBSCRIBED AND SWORN TO BEFORE ME ON (Date) 1/10/18	SIGNED (Clerk, Notary, Comm. of Sup. Ct.) X

MILITARY SERVICE AFFIDAVIT

The undersigned deposes and says:

- ☒ that the undersigned is unable to determine whether or not the defendant(s) in this action are in the military or naval service of the United States.
- ☐ that the defendant is in the military or naval service of the United States.
- ☐ that no defendant in this action is in the military or naval service of the United States, and that, to the personal knowledge of the undersigned (state facts showing defendant is not in such service)

SIGNATURE AND TITLE X <i>Charles R. Norwood, President</i>	SIGNED (Clerk, Notary, Comm. of Sup. Ct.) X
SUBSCRIBED AND SWORN TO BEFORE ME ON (Date) 1/10/18	SIGNED (Clerk)
X	

FOR COURT USE ONLY

DATE ENTERED

DOCKET NO.