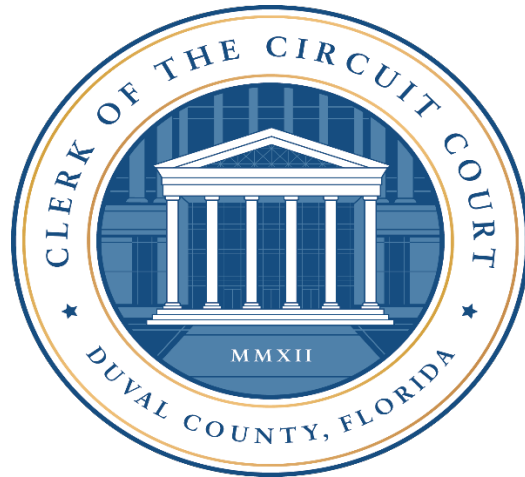


**JODY PHILLIPS**  
**CLERK OF THE CIRCUIT AND COUNTY COURTS**  
**JACKSONVILLE, FLORIDA**

[www.duvalclerk.com](http://www.duvalclerk.com)



**PACKET FEE: \$3.25**

**UNLAWFUL DETAINER PACKET**

Please contact the Clerk's Office at (904) 255-1979 or visit us online  
Revised 8/2024  
at [www.DuvalClerk.com](http://www.DuvalClerk.com) for additional information.

# UNLAWFUL DETAINER

## \*\*\* Important Information \*\*\*

**Notice:** Information or forms provided by the Clerk of the Court should be considered as basic information only and may not be applicable to every situation. The information is not intended to be used as legal advice. Specific guidance concerning filing a lawsuit, answering a lawsuit or questions about your individual situation should be directed to a qualified attorney.

### **FILING FEES:**

Unlawful Detainer	\$300.00
Summons Issuance Fee	\$10.00 Per Summons

**IN ADDITION TO THE FILING FEE AND SUMMONS ISSUANCE FEE**, you must contact a private process server, or persons allowed to do service in the county where the service is to be done, to obtain their service fees.

- If service is outside of Duval County, you must contact the Sheriff of that county to obtain applicable service fees.

### **When should this packet be used?**

- You are trying to remove someone from your home.
- You have a legal right to reside in your home (you are the owner or the legal tenant)
- The person(s) you are trying to remove does not have a legal right to reside in your home (they are not an owner or legal tenant).
- There is no agreement for rent (verbal or written) between you and the person(s) you are trying to remove.

Example – You let your former significant other, relative or friend live in your home. You have now told them to leave, and they refused.

If your situation does not meet the criteria listed above, an Unlawful Detainer may not be the appropriate action, and you should review the information on eviction and ejection. This packet does not constitute legal advice. If you have questions, you may want to contact an attorney.

Unlawful Detainer is a county court lawsuit filed pursuant to Florida Statute Chapter 82 requesting that another person be ordered to leave your property. It is like an eviction proceeding except that in an Unlawful Detainer case there is no landlord/tenant relationship between the parties, meaning there is no agreement to pay rent, either verbal or in writing. If there is an agreement to pay rent, you should consider filing an eviction case. Consult with an attorney if you are not sure.

**Review** the Filing Checklist prior to completing any forms.

**Refer** to chapter 82 of the Florida Statutes for information regarding filing a tenant eviction case.

- Copies of these statutes are available at the Law Library located in the Duval County Courthouse, at your public library or online through the Florida Legislature website at <http://www.leg.state.fl.us/Statutes>.

**Do Not Sign** any documents that require a notary or deputy clerk signature until you are in front of the notary or deputy clerk.

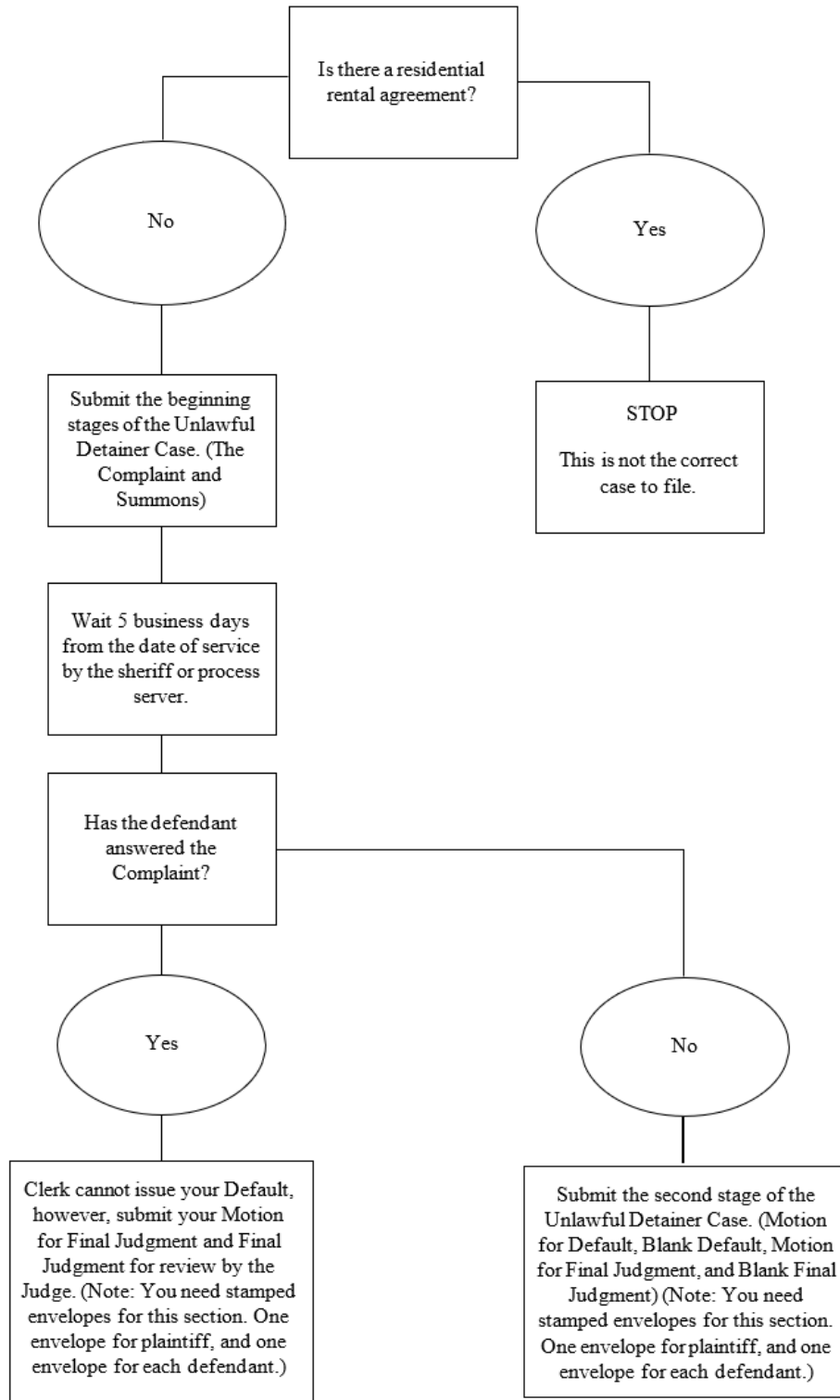
**Retain Copies** of all forms filed for your records.

**Documents Must Be Legible**, type written or legibly handwritten in black or blue ink.

**It Is Important** that the names and addresses are the same on all documents.

**A Delay Can Occur** because of any errors on your paperwork or if the proper fees are not submitted.

## Unlawful Detainer Flow Chart



# FILING CHECKLIST

## UNLAWFUL DETAINER

### **STEP ONE – FILE CASE WITH CLERK**

***To file an Unlawful Detainer case, you may file the following forms along with the filing fee and any service fees, if applicable, with the Clerk's office.***

- \_\_\_\_\_ Complaint for Unlawful Detainer  
(1) Original filed with the Clerk, (1) set of copies for each Defendant to be served
- \_\_\_\_\_ Civil Cover Sheet
- \_\_\_\_\_ Summons – Must include Spanish and French translations  
(1) Original and (1) copy for each Defendant to be served

### **STEP TWO – OBTAIN JUDGMENT**

***5 days (excluding weekends and legal holidays) after service on the Defendant(s) and the defendant(s):***

**DID NOT respond, you may file the following forms:**

- \_\_\_\_\_ Nonmilitary Affidavit
- \_\_\_\_\_ Motion for Clerk's Default
- \_\_\_\_\_ Motion for Default Final Judgment
- \_\_\_\_\_ Final Judgment – (1) Original and (1) copy for each Plaintiff and Defendant along with pre-addressed stamped envelopes for each party

**OR**

**DID respond, you may file the following forms:**

- \_\_\_\_\_ Motion for Court's Default
- \_\_\_\_\_ Motion for Default Final Judgment
- \_\_\_\_\_ Final Judgment – (1) Original and (1) copy for each Plaintiff and Defendant along with a pre-addressed stamped envelopes for each party.

**If the Judge grants your complaint, a Final Judgment will be signed.**

### **STEP THREE – OBTAIN WRIT OF POSSESSION**

***If the Defendant(s) refuse to leave the property after the Final Judgment has been signed, you may file a Writ of Possession and have it issued by the Clerk, allowing the Sheriff's Office to remove them from the property.***

\_\_\_\_\_ Writ of Possession - (1) Original and (1) copy for the Sheriff's Office

#### **Payment Options for Writ of Possession:**

- \$7.00 Cash, credit card, cashier's check, or money order payable to the Duval County Clerk of Court
  - Submitted to the Clerk along with the Writ of Possession
  - \$90.00 payment for service of the Writ payable to the Jacksonville Sheriff's Office

#### **Additional Forms, if applicable**

\_\_\_\_\_ Disclosure from Nonlawyer

This form should only be used if a nonlawyer assists you in completing any forms. The nonlawyer must complete the Disclosure form and both of you are to sign it prior to the nonlawyer assisting you with any forms.

\_\_\_\_\_ Notice of Voluntary Dismissal

If you decide not to proceed with your case prior to a judgment being entered, you should file a Notice of Voluntary Dismissal.

**THIS DOES NOT CONSTITUTE LEGAL ADVICE. Civil court information and forms provided by the Duval County Clerk of Court should be considered informational only and may not be applicable in every situation. The information is not intended to be used as legal advice. Specific guidance as to how to proceed with filing or answering a lawsuit and questions about your particular situation should be directed to a qualified attorney.**

# **STEP ONE**

**FILE CASE WITH CLERK**

**FORM 1.997. CIVIL COVER SHEET**

The civil cover sheet and the information contained in it neither replace nor supplement the filing and service of pleadings or other documents as required by law. This form must be filed by the plaintiff or petitioner with the Clerk of Court for the purpose of reporting uniform data pursuant to section 25.075, Florida Statutes. (See instructions for completion.)

**I. CASE STYLE**

IN THE COUNTY COURT OF THE FOURTH JUDICIAL CIRCUIT  
IN AND FOR DUVAL COUNTY, FLORIDA

\_\_\_\_\_  
\_\_\_\_\_  
Plaintiff(s)

Case No.: \_\_\_\_\_  
Division: \_\_\_\_\_

Vs.  
\_\_\_\_\_  
\_\_\_\_\_  
Defendant(s)

**II. AMOUNT OF CLAIM**

Please indicate the estimated amount of the claim, rounded to the nearest dollar. The estimated amount of the claim is requested for data collection and clerical processing purposes only. The amount of the claim shall not be used for any other purpose.

- \_\_\_\_\_ \$8,000 or less
- \_\_\_\_\_ \$8,001 - \$30,000
- \_\_\_\_\_ \$30,001- \$50,000
- \_\_\_\_\_ \$50,001- \$75,000
- \_\_\_\_\_ \$75,001-\$100,000
- \_\_\_\_\_ over \$100,000.00

**III. TYPE OF CASE** (If the case fits more than one type of case, select the most definitive category.) If the most descriptive label is a subcategory (is indented under a broader category), place an x on both the main category and subcategory lines.

**CIRCUIT CIVIL**

- \_\_\_\_\_ Condominium
- \_\_\_\_\_ Contracts and indebtedness
- \_\_\_\_\_ Eminent domain
- \_\_\_\_\_ Auto negligence
- \_\_\_\_\_ Negligence—other
- \_\_\_\_\_ Business governance



- Business torts
- Environmental/Toxic tort
- Third party indemnification
- Construction defect
- Mass tort
- Negligent security
- Nursing home negligence
- Premises liability—commercial
- Premises liability—residential
- Products liability
- Real property/Mortgage foreclosure
  - Commercial foreclosure
  - Homestead residential foreclosure
  - Non-homestead residential foreclosure
  - Other real property actions
- Professional malpractice
  - Malpractice—business
  - Malpractice—medical
  - Malpractice—other professional
- Other
  - Antitrust/Trade regulation
  - Business transactions
  - Constitutional challenge—statute or ordinance
  - Constitutional challenge—proposed amendment
  - Corporate trusts
  - Discrimination—employment or other
  - Insurance claims
  - Intellectual property
  - Libel/Slander
  - Shareholder derivative action
  - Securities litigation
  - Trade secrets
  - Trust litigation

**COUNTY CIVIL**

- Civil
- Real Property/Mortgage foreclosure
- Replevins
- Evictions
  - Residential Evictions
  - Non-residential Evictions
  - Other civil (non-monetary)

**IV. REMEDIES SOUGHT (check all that apply):**

Monetary;  
 Nonmonetary declaratory or injunctive relief;  
 Punitive

**V. NUMBER OF CAUSES OF ACTION:** [    ]  
(Specify) \_\_\_\_\_  
\_\_\_\_\_

**VI. IS THIS CASE A CLASS ACTION LAWSUIT?**

yes  
 no

**VII. HAS NOTICE OF ANY KNOWN RELATED CASE BEEN FILED?**

no  
 yes If “yes,” list all related cases by name, case number, and  
court. \_\_\_\_\_  
\_\_\_\_\_

**VIII. IS JURY TRIAL DEMANDED IN COMPLAINT?**

yes  
 no

**IX. DOES THIS CASE INVOLVE ALLEGATIONS OF SEXUAL ABUSE?**

yes  
 no

I CERTIFY that the information I have provided in this cover sheet is accurate to the best of my knowledge and belief, and that I have read and will comply with the requirements of Florida Rule of General Practice and Judicial Administration 2.425.

Signature \_\_\_\_\_ Fla. Bar # \_\_\_\_\_  
(Attorney or party) (Bar # if attorney)

\_\_\_\_\_  
(type or print name) Date

IN THE COUNTY COURT OF THE FOURTH JUDICIAL CIRCUIT  
IN AND FOR DUVAL COUNTY, FLORIDA

\_\_\_\_\_  
\_\_\_\_\_  
Plaintiff(s)

Case No.: \_\_\_\_\_  
Division: \_\_\_\_\_

Vs.  
\_\_\_\_\_  
\_\_\_\_\_  
Defendant(s)

**COMPLAINT FOR UNLAWFUL DETAINER**

Plaintiff(s) \_\_\_\_\_ sues  
Defendant(s) \_\_\_\_\_ and alleges:

1. This is a cause of action for unlawful detainer pursuant to Chapter 82, Florida Statutes.
2. Plaintiff(s) is/are entitled to possession of the following real property (address or legal description):  
\_\_\_\_\_  
\_\_\_\_\_
3. Plaintiff(s) is/are entitled to possession of the real property by virtue of the following:  
\_\_\_\_\_  
\_\_\_\_\_
4. With the consent of the Plaintiff(s), Defendant(s) occupied or otherwise made use of the property described in paragraph (2) above.
5. On or about (date) \_\_\_\_\_, Plaintiff(s) revoked this consent, informed Defendant(s) of this revocation, and demanded that Defendant(s) vacate the premises.
6. Defendant(s), however, has/have refused to vacate the premises.
7. There is no residential agreement between Plaintiff(s) and Defendant(s).
8. In accordance with section 82.04(1), Florida Statutes, Plaintiff(s) is/are entitled to summary procedure under section 51.011, Florida Statutes.

WHEREFORE, Plaintiff(s) respectfully request(s) that the Court (1) find that Defendant(s) wrongfully hold(s) possession of the subject property; (2) grant final judgment in favor of Plaintiff(s) and against Defendant(s); (3) order the issuance of a Writ of Possession in accordance with section 82.091, Florida Statutes; and (4) grant to the Plaintiff(s) such other relief as is justified by the circumstances in this case.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name [Print]

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Telephone

This form was completed with the assistance of  
Name:  
Address:  
Telephone Number:

IN THE COUNTY COURT OF THE FOURTH JUDICIAL CIRCUIT  
IN AND FOR DUVAL COUNTY, FLORIDA

\_\_\_\_\_  
\_\_\_\_\_  
Plaintiff(s)

Case No.: \_\_\_\_\_  
Division: \_\_\_\_\_

Vs.  
\_\_\_\_\_  
\_\_\_\_\_  
Defendant(s)

**UNLAWFUL DETAINER SUMMONS**

YOU ARE COMMANDED to serve this summons and a copy of the complaint or petition in this action on:

Defendant(s): \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_

**TO THE DEFENDANT(S):**

You are being sued by the **PLAINTIFF** to require you to move out of the place where you are living for the reason(s) given in the attached complaint. YOU ARE REQUIRED to mail or take a copy of your WRITTEN ANSWER AND DEFENSES to the attached COMPLAINT to the CLERK OF THE COURT, 501 W. Adams Street, Rm 1054, Jacksonville, FL 32202, AND a copy to the Plaintiff or Plaintiff's Attorney whose name and address is:

\_\_\_\_\_  
\_\_\_\_\_

PERSONAL SERVICE: IF THE SUMMONS and a copy of the COMPLAINT have been personally served upon you or upon anyone residing in your residence who is 15 years of age or older, your WRITTEN ANSWER AND DEFENSES MUST be received by the CLERK within FIVE (5) WORKING DAYS of service as to the claim for possession of the premises. POSTED – MAIL SERVICE: IF THIS SUMMONS and a copy of the COMPLAINT have been attached to a conspicuous place on your residence, your WRITTEN ANSWER AND DEFENSES MUST be received by the CLERK within FIVE (5) WORKING DAYS of the date that it was attached to some conspicuous place on the property described in the COMPLAINT. The date of posting is the date noted thereon by the Process Server.

A DEFAULT may be entered against you and a JUDGMENT to remove you from the property and/or for reasonable costs and attorney fees may be entered without further notice to you if you do not follow these instructions.

**If you are a person with a disability who needs any accommodation in order to participate in this proceeding, you are entitled, at no cost to you, to the provision of certain assistance. Please contact:**

**The 4<sup>th</sup> Judicial Circuit ADA Coordinator**

**Phone Number: (904) 255-1695**

**Email Address: [crtinrp@coj.net](mailto:crtinrp@coj.net)**

**Contact the ADA Coordinator at least 7 days before your scheduled court appearance, or immediately upon receiving this notification if the time before the scheduled appearance is less than 7 days; If you are hearing or voice impaired, call 711.**

TO STATE OF FLORIDA:

To Each Sheriff of the State: You are commanded to serve this summons and a copy of the complaint in this lawsuit on the above-named Defendant(s).

DATE: \_\_\_\_\_

**JODY PHILLIPS**  
CLERK OF THE COURT

By: \_\_\_\_\_  
Deputy Clerk

Por medio de la presente **El DEMANDANTE** le exige que se mude del lugar donde está viviendo por los motivos indicados en la demanda adjunta. DEBE enviar por correo o llevar la copia de su RESPUESTA Y DEFENSAS POR ESCRITO a la DEMANDA al SECRETARIO DEL TRIBUNAL, en el 501 W. Adams Street, Sala 1054, Jacksonville, FL 32202, Y una copia al Demandante o al Abogado del Demandante cuyo nombre y dirección son:

---

---

NOTIFICACIÓN EN PERSONA: SI EL REQUERIMIENTO JUDICIAL y una copia de la DEMANDA se los han entregados personalmente a usted o a cualquier persona que resida en su residencia y que tenga 15 años de edad o más, el SECRETARIO DEL JUZGADO DEBE recibir su RESPUESTA Y DEFENSAS POR ESCRITO dentro de los CINCO (5) DÍAS LABORABLES a la notificación concerniente al reclamo de posesión del inmueble. PUBLICADO – ENVIADO POR CORREO POSTAL: SI EL PRESENTE REQUERIMIENTO JUDICIAL y una copia de la DEMANDA lo anuncian en un lugar visible de su residencia, el SECRETARIO DEL JUZGADO DEBE recibir su RESPUESTA Y DEFENSAS POR ESCRITO dentro de los CINCO (5) DÍAS LABORALES a partir de la fecha en que se publicó en el lugar visible de la propiedad descrita en la DEMANDA. La fecha de publicación es la fecha que el Agente Judicial indique en la notificación.

De no acatar estas instrucciones, se podrá dictar un INCUMPLIMIENTO en su contra y se emitirá un FALLO DE POSESIÓN sin previo aviso para desalojarlo de la propiedad y/o los costos razonables y honorarios de abogados.

**Si usted es discapacitado y necesita alguna adaptación para participar en este procedimiento, tiene derecho, sin costo alguno, a recibir cierta asistencia. Favor de contactar:**

**El Coordinador de la ADA, Cuarto Circuito Judicial**  
**Número de teléfono: (904) 255-1695**  
**Correo Electrónico: [crtintrap@coj.net](mailto:crtintrap@coj.net)**

**Comuníquese con el Coordinador de la ADA al menos con 7 días de antelación a su comparecencia en el tribunal, o inmediatamente después de recibir esta notificación judicial si la fecha de la comparecencia programada es menos de 7 días. Si tiene problemas de audición o del habla, comuníquese con el 711.**

## CITATION DE DETENUE ILLICITE

### AU(X) PRÉVENU(S) :

Vous êtes poursuivi par le **PLAIGNANT** pour vous obliger à déménager du lieu où vous vivez pour le(s) motif(s) indiqué(s) dans la plainte ci-jointe.

VOUS ÊTES TENU d'envoyer ou d'apporter une copie de votre RÉPONSE ÉCRITE et de vos ARGUMENTS DE DÉFENSE à la plainte ci-jointe au greffier du tribunal, 501 W. Adams Street, Rm 1054, Jacksonville, FL 32202, et une copie au plaignant ou à l'avocat du plaignant, dont le nom et l'adresse sont les suivants :

---

NOTIFICATION PERSONNELLE : Si la sommation et une copie de la plainte ont été remises personnellement à votre domicile ou à toute personne âgée de 15 ans ou plus résidant dans votre domicile, votre RÉPONSE ÉCRITE et vos arguments de défense DOIVENT parvenir au greffier dans les CINQ (5) JOURS ouvrables suivant la signification de la demande de possession des lieux. POSTÉ - SERVICE POSTAL : SI LA PRÉSENTE sommation et une copie de la plainte ont été placées à un endroit bien visible à votre domicile, votre RÉPONSE ÉCRITE et vos arguments de DÉFENSES DOIVENT parvenir au greffier dans un délai de CINQ (5) jours ouvrables à compter de la date à laquelle elles ont été placées à un endroit bien visible de la propriété décrite dans la plainte. La date d'envoi est la date notée par l'huissier de justice.

Si vous ne suivez pas ces instructions, un DÉFAUT peut être prononcé à votre encontre et un JUGEMENT visant à vous expulser du bien et/ou à vous réclamer des frais raisonnables et des honoraires d'avocat peut être prononcé sans autre préavis.

**Si vous êtes une personne handicapée et que vous avez besoin que des mesures d'adaptation soient prises pour participer à cette procédure, vous avez le droit, sans frais, de bénéficier de certaines mesures d'aide. Veuillez-vous adresser à :**

**The 4<sup>th</sup> Judicial Circuit ADA Coordinator**

**Phone Number: (904) 255-1695**

**Email Address: [crtintrap@coj.net](mailto:crtintrap@coj.net)**

**Contactez le coordinateur ADA au moins 7 jours avant la date prévue de votre comparution devant le tribunal, ou immédiatement après avoir reçu cette notification si le délai avant la date prévue de la comparution est inférieur à 7 jours ; Si vous êtes malentendant ou malentendante, appelez le 711.**



## **STEP TWO**

**OBTAIN JUDGMENT**

IN THE COUNTY COURT OF THE FOURTH JUDICIAL CIRCUIT  
IN AND FOR DUVAL COUNTY, FLORIDA

\_\_\_\_\_  
\_\_\_\_\_  
Plaintiff(s)

Case No.: \_\_\_\_\_  
Division: \_\_\_\_\_

Vs.  
\_\_\_\_\_  
\_\_\_\_\_  
Defendant(s)

**NON-MILITARY AFFIDAVIT**

I, \_\_\_\_\_, being first duly sworn, states under penalty of perjury:

1. That I know of my own personal knowledge that the respondent is not on active duty in the armed forces of the United States.
2. That I have inquired of the armed forces of the United States and the U. S. Public Health Service to determine whether the respondent, \_\_\_\_\_ is a member of the armed services and am attaching certificates that the respondent is not now in the armed forces.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature  
\_\_\_\_\_  
Name [Print]  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
City, State, Zip Code  
\_\_\_\_\_  
Telephone

Acknowledged before me on \_\_\_\_\_, by \_\_\_\_\_ who is personally known to me \_\_\_\_\_ or produced \_\_\_\_\_ as identification, and who \_\_\_\_\_ did / \_\_\_\_\_ did not take an oath.

\_\_\_\_\_  
NOTARY PUBLIC-STATE OF FLORIDA  
Name: \_\_\_\_\_  
Commission No.: \_\_\_\_\_  
Commission Expires: \_\_\_\_\_

I CERTIFY that I have mailed, or hand delivered, a copy of this affidavit to Attorney for opposing part/Pro se party at the name and address and phone number below:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_

IN THE COUNTY COURT OF THE FOURTH JUDICIAL CIRCUIT  
IN AND FOR DUVAL COUNTY, FLORIDA

\_\_\_\_\_  
\_\_\_\_\_  
Plaintiff(s)

Case No.: \_\_\_\_\_  
Division: \_\_\_\_\_

Vs.  
\_\_\_\_\_  
\_\_\_\_\_  
Defendant(s)

**MOTION FOR CLERK'S DEFAULT**

Plaintiff asks the clerk to enter a Default against \_\_\_\_\_,  
Defendant, for failing to respond as required by law to Plaintiff's Complaint for Unlawful  
Detainer.

\_\_\_\_\_  
Signature  
\_\_\_\_\_  
Name [Print]  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
City, State, Zip Code  
\_\_\_\_\_  
Telephone

**DEFAULT**

A Default is entered in this action against the Defendant for Unlawful Detainer for failure to  
respond as required by law.

Date: \_\_\_\_\_

**JODY PHILLIPS**  
CLERK OF THE COURT

By: \_\_\_\_\_  
Deputy Clerk

\_\_\_\_\_  
\_\_\_\_\_  
(Insert name of Landlord)

\_\_\_\_\_  
\_\_\_\_\_  
(Insert name of Tenant)

IN THE COUNTY COURT OF THE FOURTH JUDICIAL CIRCUIT  
IN AND FOR DUVAL COUNTY, FLORIDA

\_\_\_\_\_  
\_\_\_\_\_  
Plaintiff(s)

Case No.: \_\_\_\_\_  
Division: \_\_\_\_\_

Vs.  
\_\_\_\_\_  
\_\_\_\_\_  
Defendant(s)

**MOTION FOR COURT DEFAULT**

Plaintiff moves for entry of a Default by the Court because the Defendant,  
\_\_\_\_\_, failed to respond as required by law.

\_\_\_\_\_  
Signature of Landlord/Plaintiff

**DEFAULT**

A Default is entered in this action against the Defendant, \_\_\_\_\_,  
Named in foregoing Motion for failure to respond as required by law.

**DONE AND ORDERED** in Duval County, Florida on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
County Judge

IN THE COUNTY COURT OF THE FOURTH JUDICIAL CIRCUIT  
IN AND FOR DUVAL COUNTY, FLORIDA

\_\_\_\_\_  
\_\_\_\_\_  
Plaintiff(s)

Case No.: \_\_\_\_\_  
Division: \_\_\_\_\_

Vs.  
\_\_\_\_\_  
\_\_\_\_\_  
Defendant(s)

**MOTION FOR FINAL JUDGMENT – UNLAWFUL DETAINER**

Plaintiff asks the court to enter a Final Judgment against \_\_\_\_\_,  
Defendant, for unlawful detainer and says:

1. Plaintiff filed a complaint alleging grounds for unlawful detainer against Defendant(s).
2. A Default was entered by the Clerk of this Court on \_\_\_\_\_ (if applicable).

WHEREFORE, Plaintiff asks this Court to enter a Final Judgment for Unlawful Detainer against Defendant.

\_\_\_\_\_  
Signature  
\_\_\_\_\_  
Name [Print]  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
City, State, Zip Code  
\_\_\_\_\_  
Telephone

cc:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
(Insert name and address of defendant)

This form was completed with the assistance of:  
Name:  
Address:  
Telephone Number:

IN THE COUNTY COURT OF THE FOURTH JUDICIAL CIRCUIT  
IN AND FOR DUVAL COUNTY, FLORIDA

\_\_\_\_\_  
\_\_\_\_\_  
Plaintiff(s)

Case No.: \_\_\_\_\_  
Division: \_\_\_\_\_

Vs.  
\_\_\_\_\_  
\_\_\_\_\_  
Defendant(s)

**JUDGMENT FOR POSSESSION - UNLAWFUL DETAINER**

THIS CAUSE was considered by the Court upon the Plaintiff's COMPLAINT FOR UNLAWFUL DETAINER from the premises described in the Complaint, and it appears that Defendant(s) was/were duly served with Notice and process as required by law and:

\_\_\_\_\_ Defendant(s) failed to file any pleading contesting the allegations of the Complaint and a Default has been entered by the Clerk.

\_\_\_\_\_ The Court has taken testimony or received Affidavits from the Plaintiff(s).

IT IS THEREFORE ordered by the Court that a Judgment be and is hereby entered against the Defendant(s), and that the Plaintiff(s) does/do have and recover of and from the Defendant(s),

\_\_\_\_\_  
\_\_\_\_\_  
Possession of the premises situated in the County of Duval, State of Florida described as:

\_\_\_\_\_  
\_\_\_\_\_  
And the Clerk of this Court shall issue a Writ of Possession under the Seal of this Court directed to the Sherriff of Duval County, Florida, describing the premises and commanding him to put the Plaintiff(s), in possession of the premises.

WRIT OF POSSESSION SHALL:

\_\_\_\_\_ issue upon signing of this Judgment.

\_\_\_\_\_ not issue for ten (10) days from date of this Judgment.

Plaintiff is awarded Court costs in the amount of \$\_\_\_\_\_ for which let execution now issue with interest at \_\_\_\_\_% per annum in accordance with section 55.03, Florida Statutes. The

Court may reserve jurisdiction to enter a money judgment against the Defendant(s) in accordance with section 83.625, Florida Statutes, if applicable.

**DONE AND ORDERED** in Duval County, Florida on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

---

County Judge

cc:

Plaintiff's Name and address

---

---

Defendant's Name and address

---

---

## **STEP THREE**

**OBTAIN WRIT OF POSSESSION**



IN THE COUNTY COURT OF THE FOURTH JUDICIAL CIRCUIT  
IN AND FOR DUVAL COUNTY, FLORIDA

\_\_\_\_\_  
\_\_\_\_\_  
Plaintiff(s)

Case No.: \_\_\_\_\_  
Division: \_\_\_\_\_

Vs.  
\_\_\_\_\_  
\_\_\_\_\_  
Defendant(s)

**WRIT OF POSSESSION**

IN THE NAME OF THE STATE OF FLORIDA, TO THE SHERIFF OF SAID COUNTY –  
WHEREAS, judgment was rendered on the \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_ that  
\_\_\_\_\_ recover of and from \_\_\_\_\_  
possession of \_\_\_\_\_  
\_\_\_\_\_

You are hereby commanded to post a copy of the writ of notice, conspicuously, on said premises  
and after 24 hours remove all persons from said premises and to put  
\_\_\_\_\_ in full possession thereof.

Given under my hand and seal of the County Court, this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

**JODY PHILLIPS**  
CLERK OF THE COURT

By: \_\_\_\_\_  
Deputy Clerk