FILING CODE: _____
Your Name: _____
Address: _____
City, State, Zip _____
Telephone: _____
Email Address: _____
Self-Represented

DISTRICT COURT
_____ COUNTY, NEVADA
(*this form is only applicable to the 10th and 11th Judicial Districts in Churchill, Lander, Mineral, Lyon, and Pershing Counties*)

_____ Plaintiff, vs. _____ Defendant.	CASE NO.: _____ DEPT: _____

NOTICE OF INTENT TO SEEK DEFAULT

TO: Defendant (*Defendant's Name*) _____:

PLEASE TAKE NOTICE that unless you answer or otherwise plead to Plaintiff's Complaint / Petition on file within five (5) business days, the Plaintiff will request the Court to enter default against you.

DATED (*month*) _____ (*day*) _____, 20___.

Submitted By: (*your signature*) ▸ _____

Printed Name: _____

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CERTIFICATE OF MAILING

I, (*your name*) _____ declare under penalty of perjury under the law of the State of Nevada that I served this ***Notice of Intent to Seek Default*** on (*month*)_____ (*day*)_____, 20___, by depositing a copy in the U.S. Mail, postage prepaid, addressed to:

Name of Person Served: _____

Address: _____

City, State, Zip _____

DATED (*month*) _____ (*day*) _____, 20___.

Submitted By: (*Your signature*) ▸ _____

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