

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

\_\_\_\_\_  
\_\_\_\_\_  
Write the first and last name of each plaintiff.

Case No. \_\_\_\_\_ CV \_\_\_\_\_

-against-

**REQUEST FOR A CLERK'S  
CERTIFICATE OF DEFAULT**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Write the first and last name of each defendant.

**Request for Clerk's Certificate of Default**

I, \_\_\_\_\_, request a Clerk's Certificate of Default, as required under Local Civil Rule 55.1(a) of the Local Rules of the United States District Courts for the Southern and Eastern District Courts of New York. A Declaration in support of this Request is attached.

\_\_\_\_\_  
Executed on (date)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name

\_\_\_\_\_  
Prison Identification # (if incarcerated)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Telephone Number (if available)

\_\_\_\_\_  
E-mail Address (if available)

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

\_\_\_\_\_  
\_\_\_\_\_  
Write the first and last name of each plaintiff.

Case No. \_\_\_\_\_ CV \_\_\_\_\_

-against-

**DECLARATION IN SUPPORT OF  
REQUEST FOR CLERK'S  
CERTIFICATE OF DEFAULT**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Write the first and last name of each defendant.

**Declaration in Support of Request for Clerk's Certificate of Default**

I, \_\_\_\_\_, declare under penalty of perjury that the following facts are true and correct:

1. I am the self-represented plaintiff in this action.
2. This action was commenced on \_\_\_\_\_ by the filing of the complaint.
3. An executed summons, showing that defendant \_\_\_\_\_ was served, was filed on \_\_\_\_\_.
4. The time for defendant \_\_\_\_\_ to answer or otherwise respond to the complaint expired on \_\_\_\_\_.

5. Defendant \_\_\_\_\_ has not answered or responded to the complaint, nor has this defendant moved for an extension of time to answer or respond to the complaint.
6. Defendant \_\_\_\_\_ is not an infant or incompetent.
7. Defendant \_\_\_\_\_ is not currently serving in the United States military.

Plaintiff requests the issuance of a certificate of default against Defendant(s)

\_\_\_\_\_.

\_\_\_\_\_  
Executed on (date)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name

\_\_\_\_\_  
Prison Identification # (if incarcerated)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Telephone Number (if available)

\_\_\_\_\_  
E-mail Address (if available)

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

\_\_\_\_\_  
\_\_\_\_\_  
Write the first and last name of each plaintiff.

Case No. \_\_\_\_\_ CV \_\_\_\_\_

-against-

**CLERK'S CERTIFICATE  
OF DEFAULT**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Write the first and last name of each defendant.

I, TAMMI HELLWIG, Clerk of the United States District Court for the Southern District of New York, do hereby certify that:

1. This action was commenced on \_\_\_\_\_ with the filing of a complaint.
2. A copy of the summons and complaint were served on defendant(s):  
\_\_\_\_\_.
3. By personally serving \_\_\_\_\_.
4. Proof of service was filed on \_\_\_\_\_. (See ECF Doc. #(s) \_\_\_\_\_.)

I further certify that the docket entries indicate that the defendant(s) has not filed an answer or otherwise responded to the complaint herein. The default of the defendant(s) is/are hereby noted.

Dated: \_\_\_\_\_  
New York, New York

TAMMI HELLWIG, Clerk of Court

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

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

\_\_\_\_\_  
\_\_\_\_\_  
Write the first and last name of each plaintiff.

Case No. \_\_\_\_\_ CV \_\_\_\_\_

-against-

**CERTIFICATE OF SERVICE**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Write the first and last name of each defendant.

I, \_\_\_\_\_ ,  
affirm that the foregoing documents have been personally served on  
\_\_\_\_\_ or mailed to the last  
known address of \_\_\_\_\_  
at \_\_\_\_\_.

\_\_\_\_\_  
Executed on (date)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name

\_\_\_\_\_  
Prison Identification # (if incarcerated)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Telephone Number (if available)

\_\_\_\_\_  
E-mail Address (if available)