

MIDVALE JUSTICE COURT
 7505 S HOLDEN STREET, MIDVALE, UT 84047
 Phone: 801-255-4234 / Fax: 801-567-1696 / www.midvalecity.org

Name _____, Plaintiff)
 Street Address _____)
 City, State, ZIP _____)
 vs.)
 Name _____, Defendant)
 Street Address _____)
 City, State, ZIP _____)

SMALL CLAIMS
MOTION TO ENFORCE
SETTLEMENT AGREEMENT
 Case No. _____

Instructions: Attach the following:

- Continuation pages (If any, completing paragraphs that don't have enough space. Write the paragraph number on the continuation page.)
- Copy of the Settlement Agreement
- Notice of Hearing

By and through my attorney, (Attorney, check here if you are appearing for your client.)

I say as follows:

(1) To settle this case, _____ (name) agreed to pay me a total of \$ _____ on the following schedule:

Amount:	Due on:	Amount:	Due on:	Amount:	Due on:
\$		\$		\$	
\$		\$		\$	
\$		\$		\$	
\$		\$		\$	
\$		\$		\$	

(2) _____ (name) has paid me only \$ _____ and the deadline for payment have passed.
 The balance is now due.

(3) _____ (name) still owes me:

\$ _____ Balance not paid
 \$ _____ Cost of this proceeding
 \$ _____ Total

(4) _____ (name) has failed to comply with the terms of the Settlement Agreement, and I request that the court enter judgment for the amount claimed plus post-judgment interest.

I have not included any non-public information in this document.

I declare under penalty of Utah Code Section 78B-5-705 that everything stated in this document is true and correct.

Date _____ Sign here ► _____

Typed or printed name _____

Certificate of Service

I certify that I served a copy of this Small Claims Motion to Enforce Settlement Agreement 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.)		
Midvale Justice Court	<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.)		
	<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.)		

Date _____

Sign here ► _____

Typed or printed name _____