
Full Name of Party Filing Document

Mailing Address (Street or Post Office Box)

City, State and Zip Code

Telephone

Email Address (if any)

IN THE DISTRICT COURT FOR THE _____ JUDICIAL DISTRICT
FOR THE STATE OF IDAHO, IN AND FOR THE COUNTY OF _____

_____,
Plaintiff,
vs.
_____,
Defendant.

Case No. _____

NOTICE OF INTENT TO TAKE
DEFAULT

TO: _____, Plaintiff, Defendant:

You are notified Plaintiff intends to ask the Court to enter your default after three days (or six days if notice was served by mail) from the date of the Certificate of Service below.

You are notified Defendant intends to ask the Court to enter your default after three days (or six days if notice was served by mail) from the date of the Certificate of Service below.

Date: _____

Typed/Printed

Signature:

CERTIFICATE OF SERVICE

I certify that on (date) _____ I served a copy to: (name all parties in the case other than yourself)

(Name)

(Street or Post Office Address)

(City, State, and Zip Code)

- By mail
- By fax (number) _____
- By personal delivery
- By email to:

(if allowed):

(Name)

(Street or Post Office Address)

(City, State, and Zip Code)

- By mail
- By fax (number) _____
- By personal delivery
- By email to:

(if allowed):

Typed/printed name

Signature