

County Court _____ County, Colorado Court Address: _____	
Plaintiff(s): v. Defendant(s):	▲ COURT USE ONLY ▲
Attorney or Party Without Attorney (Name and Address):	Case Number:
Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	Division _____ Courtroom _____
AFFIDAVIT TO SUPPORT CLAIM FOR A BREACH OF THE WARRANTY OF HABITABILITY PURSUANT §38-12-507(1)(c) C.R.S.	

The Defendant(s) _____ answers(s) the Complaint stating that the Landlord has breached the warranty of habitability. In addition, to the answer filed, I/we file this Affidavit stating the following:

The rental agreement, which is the subject of this action, was entered into or extended or renewed on or after September 1, 2008.

Total Past Rent Due, as stated in the Complaint: \$ _____

Total expenses incurred as a result of the property being uninhabitable:
\$ _____

Difference (Total Past Rent Due – minus total expenses incurred) \$ _____
NOTE: If the total rent due is greater than the total expenses incurred as a result of the property being uninhabitable, you are required to deposit funds in the Court Registry for the amount stated above. This money must be deposited via certified funds with the Court at the same time you are filing your answer. This money will be held in the Court Registry and refunded or applied as ordered by the Court at the conclusion of the case.

VERIFICATION AND ACKNOWLEDGEMENT

I _____ (name) swear/affirm under oath, and under penalty of perjury, that I have read the foregoing *AFFIDAVIT TO SUPPORT CLAIM FOR A BREACH OF THE WARRANTY OF HABITABILITY PURSUANT TO §38-12-507(1)(c), C.R.S.*, and that the statements set forth therein are true and correct to the best of my knowledge and belief.

 Defendant's Signature Date

 Defendant's Signature Date

 Defendant's Attorney Signature, if any Date

 Defendant's Attorney Signature, if any Date

Subscribed and affirmed, or sworn to before me
 in the County of _____,
 State of _____, this _____
 day of _____, 20 _____.
 My Commission Expires: _____

Subscribed and affirmed, or sworn to before me
 in the County of _____,
 State of _____, this _____
 day of _____, 20 _____.
 My Commission Expires: _____

 Notary Public/Clerk

 Notary Public/Clerk

CERTIFICATE OF SERVICE

I certify that on _____ (date) a true and accurate copy of this *AFFIDAVIT TO SUPPORT CLAIM FOR A BREACH OF THE WARRANTY OF HABITABILITY PURSUANT TO §38-12-507(1)(c), C.R.S.*, was served on _____ the other party(s) or attorney(s) by:

Hand Delivery E-filed Faxed to this number _____ or by placing it in the United States mail, postage pre-paid, and addressed to the following:

 Signature