JDF 1	JDF 150 Motion to Remove Unauthorized Persons				
Col	Court  District County  Colorado County:  Mailing Address:				
Plai v.	intiff:	the Case	This box is for court use only.		
3. File Nar Mai Pho	ed by me: illing Addr one	ess:	4. Case Details  Number:  Division:  Courtroom:		
5.	Background I submit this complaint and verified motion under C.R.S. § 13-40.1-101(2).				
6.	Premi	ises			
	I am th	e owner, or authorized agent of the owner, of the owner.  Street Address:  City:			
7.	Reque	est			
	I reque	est that the court:			
	a)	Hold a hearing within one business day;			
	b)	Enter a Temporary Mandatory Injunction; and			
	c)	Issue a Writ of Restitution ordering that the peop removed and ordered not to return for fourteen d			
8.	Declared Statements				
	I represent and declare under penalty of perjury that: (initial each declaration)				
	a) I own the premises or am the owner's authorized agent;				

	b)	_ Unauthorized person(s) (people) have entered and rema	ain on the premises;			
	c)	_ I never permitted them to enter and stay on the premises	5;			
	d)	_ I never had a written or oral agreement with them about	using the premises.			
	e)	_ I am not related to them;				
	f)	_ I never accepted money or anything of value from them	regarding the premises;			
	g)	_ I demanded that they vacate the premises, but they have	e not done so;			
	h)	_ I informed them that I was requesting an Injunction to res the premises. I will deliver a copy of this Motion to them	• •			
	i)	_ Describe how the premises have been altered or damag	ed. (Optional section)			
		-				
9.	Certificate o					
	On (enter service date)					
	I certify that I s	I certify that I sent a copy of this document to the other parties by: (select one)				
	Personal Service under C.R.C.P. 4. Also, file JDF 98 – Affidavit of Service.					
	Posting a copy in a visible place at the premises.					
10.	Verified Signature					
	I declare under penalty of perjury under the law of Colorado that the foregoing is true and correct.					
	Execu	ited on the (date) day of (month)	(year)			
	at City	r: (or other location)				
	and St	tate: (or country)				
	Print Your Name:					
	Your Signature:					
	_	ure: (If any)				
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