

**MOTION TO OPEN JUDGMENT  
(CIVIL MATTERS OTHER THAN  
SMALL CLAIMS AND HOUSING  
MATTERS)**

JD-CV-107 Rev. 7-19  
C.G.S. §§ 52-212, 52-212a, 52-259c  
P.B. §§ 17-4, 17-43

*This form is available  
in other language(s).*

STATE OF CONNECTICUT  
**SUPERIOR COURT**  
www.jud.ct.gov



For information on ADA accommodations,  
contact a court clerk or go to: [www.jud.ct.gov/ADA](http://www.jud.ct.gov/ADA).

*This motion must be filed with the correct fee required by section 52-259c(a) of the Connecticut General Statutes, unless waived by the judicial authority.*

Name of case ( <i>Plaintiff v. Defendant</i> )		Docket number
Judicial District of	At ( <i>Town</i> )	

**Motion to Open Judgment**

I request that the judgment in the case named above be opened because:

NOTE: If this is a motion to open a judgment entered because of a default or nonsuit, the motion must be sworn to by the person filing this motion or that person's attorney.

Signed ( <i>Plaintiff/Defendant or Attorney</i> )		Date signed
Subscribed and sworn to before me	on ( <i>Date</i> ) ( <i>See note above</i> )	Signed ( <i>Assistant Clerk, Comm. of Superior Court, Notary</i> ) ( <i>See note above</i> )

**Certification**

I certify that a copy of this document was or will immediately be mailed or delivered electronically or non-electronically on (date) \_\_\_\_\_ to all attorneys and self-represented parties of record and that written consent for electronic delivery was received from all attorneys and self-represented parties of record who received or will immediately be receiving electronic delivery.

Name and address of each party and attorney that copy was or will be mailed or delivered to\*

\*If necessary, attach additional sheet or sheets with name and address which the copy was or will be mailed or delivered to.

Signed ( <i>Signature of filer/Connecticut Attorney</i> )	Print or type name of person signing	Date signed
Mailing address ( <i>Number, street, town, state and zip code</i> )		Telephone number