

# MAGISTRATE COURT OF MURRAY COUNTY

## STATE OF GEORGIA

DATE FILED: \_\_\_\_\_

CASE NO.: \_\_\_\_\_

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LANDLORD/PLAINTIFF(S) NAME & ADDRESS

TENANT/DEFENDANT(S) NAME & ADDRESS

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### **TRANSPORTABLE HOUSING DISPOSSESSORY OF TENANT**

Personally appeared \_\_\_\_\_, who upon oath says that he/she is the owner, (or attorney, agent or lessee for the owner of said premises) and that Defendant is in possession as tenant of premises at the above address in Murray County. Further Tenant:

Fails to pay the rent with is now past due.  
 Holds the premises over and beyond the term for which they were rented or leased to him/her.  
 Has received notice to vacate premises and has failed to do so.

Plaintiff desires and has demanded possession of the premises and Defendant has failed and refused to deliver said possession. WHEREFORE, Plaintiff DEMANDS:

Possession of the premises       Past due total \$ \_\_\_\_\_ plus \$ \_\_\_\_\_ court costs.  
(Rent: \_\_\_\_\_ + Late Fee: \_\_\_\_\_)

Sworn to and subscribed before me.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Affiant

Chief / Deputy Clerk / Notary Public

Exp. Date

### **SUMMONS**

To: The Constable of the Magistrate Court of Murray County

The Defendant(s) herein is/are commanded and required personally or by attorney to answer orally or in writing, to the Judge or Clerk of Murray County Magistrate Court; 812 G.I. Maddox Parkway, Chatsworth, GA 30705 between the hours of 8:00 A.M. and 4:30 P.M. on or before the **SEVENTH** day from the date of service of the within affidavit and summons (or on the first business day thereafter IF the seventh day fall on Saturday, Sunday, or legal holiday). If the answer is NOT made, a Writ of Possession shall be issued upon request of the Plaintiff. **THE LAST POSSIBLE DAY TO ANSWER WILL BE THE \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_.**

Witness the Presiding Judge of said Court.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Clerk / Deputy Clerk

### **TEN DAY NOTICE FOR REMOVAL OF TRANSPORTABLE HOUSING**

YOUR ATTENTION IS CALLED TO THE LAW OF THE STATE OF GEORGIA AS IT PERTAINS TO REMOVAL OF TRANSPORTABLE HOUSING. GEORGIA CODE SECTION 44-7-59, REMOVAL OF TRANSPORTABLE HOUSING FROM LANDS SUBJECT TO WRIT OF POSSESSION: If the Court issues a Writ of Possession to the Property upon which the tenant has placed a manufactured home, mobile home, trailer, or other type of transportable housing and the tenant does not remove the same within ten days after the final Order is entered, the landlord shall be entitled to have such housing moved from the property at the expense of the tenant by a motor common carrier licensed by the Department of Public Safety for the transportation of manufactured housing. There shall be a lien upon such transportable housing to the extent of moving fees and storage expenses in favor of the person performing such services. Such lien may be claimed and foreclosed in the same manner as special liens on personal property by mechanics under Code Section 44-14-550, except that storage fees not to exceed \$4.00 per day shall be expressly allowed.

**MAGISTRATE COURT OF MURRAY COUNTY  
STATE OF GEORGIA**

812 G.I. MADDOX PARKWAY, CHATSWORTH, GA 30705

**General Information**

**Plaintiff's Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

We will send out a copy of the sheriff's service once papers have been served.

If an email is provided, we will email a copy of the sheriff's service and Defendant's answer (once filed)

**Best Phone # & Name:** \_\_\_\_\_

**Alternate Phone # & Name:** \_\_\_\_\_

\*\* Please understand if we cannot get ahold of you, we are unable to set up court which could cause your court date to be delayed. \*\*

**Type of Suit:**

Eviction  Mobile Home Lot Eviction  Civil Suit  Foreclosure  Trover  Tort

Defendants Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Place to be served: \_\_\_\_\_

**(If different from physical address)**

Principal Amount owed: \$ \_\_\_\_\_

Plus court cost \$ \_\_\_\_\_

Total Amount owed: \_\_\_\_\_

**FOR EVICTIONS:**

Rent amount due \$ \_\_\_\_\_ per Week / Month

Late fees due \$ \_\_\_\_\_ at the rate of \$ \_\_\_\_\_ per day/ week