



UNAUTHORIZED OCCUPANT(S) REMOVAL COMPLAINT

OFFICIAL USE ONLY

I _____ (name of complainant), declare under the penalty of perjury that:

Initial each applicable item

____ 1. I am the owner or the agent of the owner of residential real property located at _____ (property address).

____ 2. A person unlawfully entered and occupies a dwelling on the property without the owner's consent.

____ 3. The property was not open to the public when the person entered the property.

____ 4. The property is not the subject of pending litigation between the owner and the person.

____ 5. The owner or the owner's agent has directed the person to leave the property, and the person has not done so.

____ 6. The person is not a current or former tenant of the owner under an oral or written lease and any lease produced by the person is fraudulent.

____ 7. The person is not an owner or co-owner of the property and any title to the property that lists the person as an owner or co-owner is fraudulent.

____ 8. The person is not an immediate family member of the owner.

____ 9. I understand that a person removed from the property as a result of this complaint may bring an action against me for any false statement made in the complaint or for wrongfully submitting the complaint.

____ 10. I understand that I may be held liable for actual damages, exemplary damages, court costs, and reasonable attorney fees in an action described by Item 9.

____ 11. I am requesting that the sheriff or constable immediately remove each person occupying the dwelling without the owner's consent.

____ 12. A copy of my valid government-issued identification is attached and, if I am the owner's agent, a document evidencing my authority to act on the property owner's behalf is attached.

I HAVE READ EACH STATEMENT IN THIS COMPLAINT AND CONFIRM EACH STATEMENT IS TRUE AND CORRECT. I UNDERSTAND THAT A STATEMENT MADE IN THIS COMPLAINT IS MADE UNDER PENALTY OF PERJURY, PUNISHABLE UNDER SECTION 37.02, PENAL CODE.

SUBSCRIBED AND SWORN TO
before me on _____

Complainant Signature _____

Notary _____

Service Fee: \$ _____

My commission expires _____

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Owner of Record: _____ per Tax Office Clerk Other _____

Entitlement Type: Owner Agent Power of Attorney Other _____

Additional Info _____

Signature _____ Title _____ Date _____