

LUCY ADAME-CLARK

COUNTY CLERK



BEXAR COUNTY

BEXAR COUNTY COURTHOUSE
100 DOLOROSA, SUITE 104
SAN ANTONIO, TEXAS 78205

Cause No. _____

Plaintiff/Petitioner

§

IN THE COUNTY COURT

VS.

§

§

§

AT LAW NO. _____

Defendant/Respondent

§

§

BEXAR COUNTY, TEXAS

MOTION TO SET HEARING ON THE EVICTION DOCKET

Now comes _____, Movant in the above-styled and numbered cause, and files this Motion to set hearing on _____.

The above-styled and numbered cause, having been presented, is hereby set for an in-person hearing on the _____, day _____, _____ at 1:30 p.m. in the County Civil Presiding Courtroom, County Court at Law No. []#3 / []#10 (check one), Suite B.23, basement floor of the Bexar County Courthouse, 100 Dolorosa, San Antonio, Texas 78205.

Hearing Information

- | | |
|--|----------------|
| 1. Time announcement (e.g. 30 minutes) | Time: _____ |
| 2. Is the party ready? | [] Yes [] No |
| 3. Is an interpreter required for the hearing? _____ | [] Yes [] No |
| 4. Will a record be required? | [] Yes [] No |

Signed this _____ day of _____, _____.

PRESIDING JUDGE

CERTIFICATE OF SERVICE

I hereby certify that a true and correct copy of this Notice of Hearing (Fiat) has been duly served on the _____ day of _____, _____, to the following:

Include information for each party to the lawsuit served with the document.

Party Information & Method of Service

Name:	_____	<i>Check Method(s) of Delivery</i>
Address:	_____	<input type="checkbox"/> Via Mail
Phone number:	_____	<input type="checkbox"/> Via Phone
Fax number:	_____	<input type="checkbox"/> Via Fax
E-mail:	_____	<input type="checkbox"/> Via E-mail
Date delivered:	_____	
Misc:	_____	

Party Information & Method of Service

Name:	_____	<i>Check Method(s) of Delivery</i>
Address:	_____	<input type="checkbox"/> Via Mail
Phone number:	_____	<input type="checkbox"/> Via Phone
Fax number:	_____	<input type="checkbox"/> Via Fax
E-mail:	_____	<input type="checkbox"/> Via E-mail
Date delivered:	_____	
Misc:	_____	

Party Information & Method of Service

Name:	_____	<i>Check Method(s) of Delivery</i>
Address:	_____	<input type="checkbox"/> Via Mail
Phone number:	_____	<input type="checkbox"/> Via Phone
Fax number:	_____	<input type="checkbox"/> Via Fax
E-mail:	_____	<input type="checkbox"/> Via E-mail
Date delivered:	_____	
Misc:	_____	

I declare under penalty of perjury that the information in this Certificate of Service is true and correct.

Signed on _____ in _____, County, Texas.

Signature of Person Providing Notice
Printed Name: _____
Address: _____
Phone number: _____
E-mail: _____