	Small Claim No.				
IN THE SMALL CLA	IMS COURT OF NEW BRUNSWICK				
JUDICIAL DISTRICT	**COF				
BETWEEN:					
	Claimant(s)				
and					
	Defendant(s)				
	AFFIDAVIT TO SET ASIDE DEFAULT JUDGMENT OR INTERIM JUDGMENT (FORM 8)				
I,	, defendant, of	in			
the County of	and Province of	,			
(check only one)					
□ MAKE OATH					
or					
□ SOLEMNLY AFFIR	M				
AND SAY THAT:					
1. I am the defendant a	and I am requesting an order to set aside a judgment entered on	(day/month/year)			
2. The reasons for requ	nesting the setting aside of the judgment are as follows:				
a. (check only one)					
☐ I did not receiv	ve a copy of the Claim.				
or					
☐ I received a co	py of the Claim on				
	(day/month/year)				

D.	I became aware of the	default/interim judg	gment on		·
				(day/month/year)	
c.	I failed to defend the	elaim because			
	Additional pages are at	ached because more	e room is needed.		
d.	I believe I have a valid	l defence to the clai	m on the followin	g grounds:	
	Additional pages are at	ached because more	e room is needed.		
M	1 y address is				
			(mailing address)		
ity, to	own, village)	(pr	rovince)		(postal code)
ıdica	ate residential address i	different from abo	ve:		

Telephone	_(work)	
	_(home)	
Fax number		
E-mail address		
SWORN TO (or SOLEMNLY AFFIRMED))
before me		
at	,	}
in the County of	,	}
and Province of	,	
this day of	,	
20		}
)
)
		}
A Commissioner of Oaths / A Notary Public (if outside New Brunswick)) Signature of Defendant)

NOTE:

You must attach a completed Response (Form 2) to this affidavit and serve all parties with a copy of the application, affidavit and completed response at least 10 days before the application is to be heard.