FORM DC 111b ANSWER, DAMAGE/HEALTH HAZARD TO PROPERTY

Use this form if:

• you get a copy of DC 102b, Complaint, Damage/Health Hazard to Property and you want to file with the court a written answer to the statements made in the complaint.

Approved, SCAO

Date

STATE OF MICHIGAN JUDICIAL DISTRICT

ANSWER DAMAGE/HEALTH HAZARD TO PROPERTY Landlord - Tenant

CASE	NO.
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ourt address				Court telephone no.
aintiff name(s), address(es), and telephone n	o(s).]	Defendant name(s), a	ddress(es), and telephone no(s).
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aintiff's attorney, bar no., address, and teleph	one no.		Defendant's attorney	name, bar no., address, and telephone no.
☐ 1. I demand a jury trial.				
2. I received a complaint from the	olaintiff and I appea	ar and answe	er as follows.	
3. I agree that disagree owner of the property described needed.			•	med in item 3 of the complaint is the rou disagree. Use a separate sheet of paper if
4. I ☐ agree that ☐ disagree described in item 4 of the compl				sion of the portion of property et of paper if needed.
5. I ☐ agree that ☐ disagree as stated in item 5 of the compla				s the right to possession of the property of paper if needed.
☐ 6. I ☐ agree that ☐ disagree item 6 of the complaint. Explain				involves regulated housing as stated in needed.
☐ 7. I ☐ agree that ☐ disagree intended and in reasonable redisagree. Use a separate sheet of page 1.	pair during the terr			ept the residential property fit for the use 7 of the complaint. Explain in detail why you
8. I agree that disagree the complaint. Explain in detail why		•		ade by the plaintiff as stated in item 8 of
9. I agree disagree Explain in detail why you disagree. Use	•		dgment and costs	as stated in item 9 of the complaint.
☐ 10. I ☐ agree ☐ disagree a separate sheet of paper if needed		mental comp	olaint for money da	mages. Explain in detail why you disagree. Use
11. Other statements related to this	s case are: Use a se	parate sheet of	paper if needed.	
Date		Defer	ndant/Attorney signatur	e
	CERTIE	ICATE OF N	IAILING	

Defendant/Attorney signature