THE TRIAL CO.	MASSACHUSETTS TRIAL COURT	
COURT DEPARTMENT		
LAND COURT		
CASE N	AME	
The [□ Plaintiff □ Defendant	
	<i>ntinuance.</i> This case is sch ent until	
	atus conference. Please sch	
	date	
□ Re	move default. A default or o	
order that the entry of default or of		

MOTION TO THE COURT AND AFFIDAVIT IN SUPPORT	
COUNTY	DOCKET NUMBER

COURT USE ONLY

CASE NAME						
The □ Plaintiff □ Defendant □	l Party-in	-Interest in this	case reques	ets the following from the Court:		
□ <i>Continuance</i> . This case is scheduled for an event on (date). Please continue the event until (date), for the reasons given on page two of this form.						
☐ Status conference. Please schedule a status conference in this case on or after (date), for the reasons given on page two of this form.						
☐ Remove default. A default or default judgment was entered on (date). Please order that the entry of default or default judgment be undone, for the reasons given on page two of this form.						
□ Leave to amend. Please give permission to amend (change or add to) the □ complaint, □ answer, □ other (specify document), filed on (date), for the reasons given on page two of this form.						
□ Extend time. Please give more time to file a/the (specify document), until (date), for the reasons given on page two of this form.						
☐ <i>Remote event</i> . An in-person event is scheduled on (date). Please change it to a remote event for the reasons given on page two of this form.						
☐ <i>In-person event.</i> A remote event is scheduled on (date). Please change it to an in-person event for the reasons given on page two of this form.						
☐ <i>Other.</i> (On page two of this form, specify (1) what you are asking the Court to do and (2) the reasons why. If you need more space, attach another piece of paper to this form.)						
NAME (ATTORNEY OR PARTY(S))				B.B.O. NUMBER (IF APPLICABLE)		
FIRM OR AGENCY NAME (IF APPLICABLE)		OFFICE OR HOME PHONE NUMBER				
STREET ADDRESS	APT/UNIT #	CELL PHONE NUMBER				
CITY/TOWN	STATE	ZIP CODE	E-MAIL ADDRE	SS		
DATE	SIGNATURI	E				

MASSACHUSETTS TRIAL COURT	MOTION TO THE COURT AND AFFIDAVIT IN SUPPORT	COURT USE ONLY				
COURT DEPARTMENT	COUNTY	DOCKET NUMBER				
LAND COURT						
CASE NAME						
AFFIDAVI	T IN SUPPORT OF MOTION TO TH	E COURT				
Instructions: You must comply with any court rules that apply to your specific motion (https://www.mass.gov/law-library/massachusetts-land-court-rules). Attach to this affidavit anything you want the Court to look at. Also, include in this affidavit all reasons for your motion. If you do not include a reason now for filing the motion, you might not be able to raise it later. All statements of fact (like "I live at 4 Main Street") are made under the penalties of perjury. If you need more space, attach another piece of paper.						

DATE

SIGNATURE UNDER THE PENALITIES OF PERJURY

MASSACHUSETTS TRIAL COURT	MOTION TO THE COURT AND AFFIDAVIT IN SUPPORT	COURT USE ONLY					
COURT DEPARTMENT LAND COURT	COUNTY	DOCKET NUMBER					
CASE NAME							
CERTIFICATE OF SERVICE							
I certify that I have served a copy of the attached Motion to the Court and Affidavit in Support by ☐ first class mail, postage prepaid and/or ☐ e-mail, to the following person(s) and address(es): (Enter name, address, and/or e-mail address for each person served.)							
DATE	SIGNATURE						