

# The Self-Help Legal Information Network

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(310) 675-3863 \*\*office

[legalinfonetwork.com](http://legalinfonetwork.com)

## Answer - Unlawful Detainer Questionnaire

I am representing myself and providing the following information to have documents completed for preparation of an Unlawful Detainer Response. I understand if I have any questions, concerns or need legal advice I may need to contact an attorney. I understand The Self-Help Legal Information Network are not attorneys and cannot give legal advice (ie. Tell me the best method for my situation, tell me what forms to complete, tell me the process, or give me their opinion). I understand that I am responsible for filing and/or serving any necessary documents unless otherwise noted.

NOTE: We do provide legal resource material and legal research services if necessary.

Name (print)

Signature

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Date

What is the case #

# Answer- Unlawful Detainer Questionnaire

1.) What is your full name

2.) What is your address

3.) What is your phone number  What is your phone cell number

4.) Do you agree with everything in the complaint filled against you?  Yes  No

If not, what is not true?

5.) Has the landlord done anything you feel is wrong to you?

Did not make repairs when requested  Did you ask in writing?  Yes  No  
 Did not exterminate, clean mold, or other when requested. Please state what he did or did not do

6.) Are you paid up to date on rent?  Yes  No

If not, how many months are you behind? What is the amount you are behind?

Months  The amount per month \$  Total amount you are behind \$

7.) How were you notified that a case was filed against you?

Four empty rectangular text input boxes stacked vertically.

8.) What type of notice was posted on your door if any?

Two empty rectangular text input boxes stacked vertically.

9.) Name the Plaintiff(s)

One wide empty rectangular text input box.

One wide empty rectangular text input box.

10.) Please state the Plaintiff(s) phone # and full address

Phone

One empty rectangular text input box for phone number.

Address, if not on the complaint

One wide empty rectangular text input box for address.

11.) Is there anything else the plaintiff did that you feel is wrong or improper? If so please state:

Seven empty rectangular text input boxes stacked vertically.

12.) Does an attorney represent the other party?

Yes  No

If so, please provide a copy of the documents with their information.

13.) Case #

One empty rectangular text input box for case number.

14.) Name of the person completing this form

One wide empty rectangular text input box for name.

Is there anything else you think we should know? If so, please state:

12 empty rectangular text boxes for providing additional information.

Please attach additional sheets as necessary.

PLEASE NOTE: This questionnaire is meant for litigants who are representing themselves - **we cannot** - give you legal advice, coach you, go with you to court or tell you your rights **we can** - prepare your legal forms or documents for you under your direction and perform legal research.

You are responsible for your court filing, communication to opposing counsel or the other party, and all contact with court. We are legal Document Assistants to assist you with your document preparation needs.

If you have legal concerns or questions you may need the assistance of an attorney.

**We will need a complete copy of your case if it is active.**

When finished, select the Print button to print a copy for your records and select the Email button to send the questionnaire to our office. Thank you.