IN THE JUSTICE OF THE PEACE COURT OF THE STATE OF DELAWARE, IN AND FOR **COUNTY COURT NO COURT ADDRESS** CIVIL ACTION NO **PLAINTIFF(S)** VS. **DEFENDANT(S)** (1) Name (1) Name Address Address Phone Phone Attorney, if Any Attorney, if Any (2) Name (2) Name Address Address Phone Phone Attorney, if Any Attorney, if Any **APPLICATION TO REVIVE A JUDGMENT** Please revive the judgment in the above case. The judgment was entered on (Date) The amount of the judgment and costs is: (Fill in N/A for those items which were not ordered in the judgment in this case.) Judgment \$ Pre-judgment interest **Court Costs** Attorney's Fees % per year Post-judgment interest at Post-judgment rent at X days. \$ **SUBTOTAL** MINUS CREDITS -\$ **TOTAL**

(Signature of Plaintiff) (Signature of Plaintiff No. 2, if any)

(Plaintiff's Attorney, if any) (Attorney's Address/Phone No.)

Form: 15A (Rev. 6/15/17)

DATED: