

In the Iowa District Court for _____ County

Plaintiff(s)

(Name)

(Address)

(Name)

(Address)

vs.

Defendant(s)

(Name)

(Address)

(Name)

(Address)

**Original Notice and
Petition for Intervention**

Small Claim No. _____

If you need assistance to participate in court due to a disability, call the disability coordinator at _____. Persons who are hearing or speech impaired may call Relay Iowa TTY (1-800-735-2942). **Disability coordinators cannot provide legal advice.**

To Plaintiff(s) and Defendant(s):

1. I (We), _____, being interested in the subject matter of this case seek to intervene in the following manner:

2. This Petition for Intervention is based on (state briefly the basis for the demand):

Intervenor's signature

Printed name

Mailing address

Phone #

Email address

Intervenor's signature

Printed name

Mailing address

Phone #

Email address