

<b>STATE OF MICHIGAN JUDICIAL DISTRICT</b>	<b>MOTION TO SET ASIDE DEFAULT POSSESSION JUDGMENT</b> <input type="checkbox"/> <b>EX PARTE ORDER TO STAY EVICTION (LANDLORD-TENANT)</b>	<b>CASE NUMBER</b>
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Court address Court telephone number

Plaintiff's name, address, and telephone number
Plaintiff's attorney, bar number, address, and telephone number

v

Defendant's name, address, and telephone number
Defendant's attorney, bar number, address, and telephone number

**MOTION**

1. A default was entered against me on \_\_\_\_\_ for failure to appear.  
Date
2. **I ask** the court to set aside the default possession judgment (motion must be filed within 10 days of default judgment) because: (attach extra pages)
3. **I ask** the court to stay (delay) the eviction proceedings until the court holds a hearing on this motion.
  - a. One month's rent is deposited with the court along with this motion. **OR**
  - b. Reasons for granting a stay are: (attach extra pages)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Defendant/Attorney signature

**EX PARTE ORDER ON MOTION TO STAY EVICTION**

**THE COURT FINDS:**

1.  a. One month's rent has been deposited. **OR**
- b. The grounds for relief to stay eviction are satisfied and the payment of the escrow deposit of \$ \_\_\_\_\_ is waived.

**IT IS ORDERED:**

2. The motion to stay eviction is  granted.  denied.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Judge Bar number

To be completed by the court.

**NOTICE OF HEARING ON MOTION TO SET ASIDE DEFAULT**

A hearing will be held on \_\_\_\_\_ at \_\_\_\_\_  
Date Time

at \_\_\_\_\_ before Hon. \_\_\_\_\_  
Location Bar number

\_\_\_\_\_  
Date

\_\_\_\_\_  
Deputy court clerk

**CERTIFICATE OF MAILING**

I served a copy of this motion and notice of hearing on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined by MCR 2.107(C)(3). I declare under the penalties of perjury that this certificate of mailing has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature