

IN THE DISTRICT COURT OF THE THIRD CIRCUIT _____ DIVISION STATE OF HAWAI'I	
Plaintiff(s)	Reserved for Court Use
	Civil No.
Defendant(s)	Filing Party/Attorney Name, Attorney Name (if applicable), Address, Telephone and Fax Numbers
Premises Address:	Court Date Writ Was Ordered:
	Effective Date of Writ of Possession:

WRIT OF POSSESSION

THE STATE OF HAWAI'I:

TO: The Director of Law Enforcement or any police officer or other person authorized by the laws of the State of Hawai'i.

Plaintiff(s) appeared on the Court Date above and obtained a Judgment For Summary Possession against Defendant(s), under the provisions of Hawai'i Revised Statutes §666-11, for the possession of the premises located at the address specified above.

NOW, YOU ARE COMMANDED TO REMOVE Defendant(s) and all persons holding under or through him/her/them from the premises, including his/her/their personal belongings and properties, and to put Plaintiff(s) in full possession of the premises; and file the Writ with the completed execution information within 180 days from the date of this Writ, unless extended by order of this Court.

Date:	Judge
-------	-------

SEE PAGE 2 FOR EXECUTION INFORMATION
WRITPOSS

I certify that this is a full, true and correct copy of the original on file in this office.

Clerk, District Court of the above Circuit, State of Hawai'i

I am duly authorized by Hawai'i law to serve this Writ and I executed this Writ on the following person(s):

at (location):

on (date): _____ 20__.

Signature of Serving Officer:

Date:

Print/Type Name:



If you need an accommodation for a disability when participating in a court program, service, or activity, please contact the ADA Coordinator as far in advance as possible to allow for time to provide an accommodation. Call the ADA Coordinator at (808) 961-7629, Fax (808) 961-7577. Send an e-mail to adarequest@courts.hawaii.gov. The ADA coordinator will try to provide, but cannot guarantee, the requested auxiliary aid, service, or accommodation.