

**IN THE SUPERIOR COURT OF THE STATE OF WASHINGTON
IN AND FOR THE COUNTY OF SNOHOMISH**

In Re: the Guardianship of:

Case No.:

an Incapacitated Person.

MOTION TO:

- Modify Guardianship**
- Replace Guardian**
- Terminate Guardianship**
- Other** _____

OR 18 09-11

**IMPORTANT: Read this form and the Information and Instructions attached (Page 4)
BEFORE completing, signing and filing this form.**

(1) Pursuant to RCW 11.88.120, the undersigned person(s) (hereinafter referred to as applicant(s)) _____
_____ move(s) the Court for an order:

- Modifying the Guardianship in the following particulars:

_____, and/or

- Replacing the present Guardian(s) of the

person of the estate

- Terminating the Guardianship of the person the estate.

- Other: _____

(2) The applicant(s) have the following familial, business or other relationship with the ward and/or guardianship: _____

(3) This motion is based upon the following reasons: (If the reason is a Guardian's resignation, have such Guardian sign below or submit a separate written resignation). _____

(If more space is necessary, attach pages and check)

(4) If a replacement Guardian or Guardians is/are requested, applicant(s) nominate _____

be so appointed.

(5) If a reason for this motion is Guardian's resignation or desire to resign, the Guardian(s) have have not filed a final report. If not, the resigning Guardian(s) should should not be required to do so. If not, the reasons are: _____

(6) A copy of this motion has has not been delivered to the Incapacitated Person (IP) or his/her legal representative. If not, the reason is: _____

(7) Applicant(s) do do not request the appointment of a Guardian ad Litem.

I/we, the above-named applicant(s), each declare(s) under penalty of perjury as defined by the laws of the State of Washington that the foregoing is true and correct.

Signed at _____, Washington on the _____ day of _____, 20__.

Signature

Address(es) and Phone Number(s) :
of Applicant(s):
Name: _____

Signature
Name: _____

Phone: _____

Phone: _____

e-mail: _____

e-mail: _____

INFORMATION AND INSTRUCTIONS

Guardianship Monitoring Program (GMP). This form is published and distributed primarily for the use of *pro-se* (not represented by counsel) persons by the court's GMP. It is a volunteer organization with offices in Room C102 of the courthouse, open on Tuesday, Wednesday and Thursday from 9:00a.m. to noon, telephone # 425-388-3284. Contact the GMP for further information, forms and in some cases assistance.

Clerk's Office. All Motions and other legal documents pertaining to Guardianships are filed with and permanently maintained by the County Clerk's Office. Room M206 on the 2nd floor of the courthouse where they are available for public inspection.

Revised Code of Washington (RCW) is the law governing Guardianships in Title 11 Chapters 88 and 92. It is available in print at many public libraries, the County Law Library, Room C139 in the courthouse and on line – search Guardian Revised Code of Washington.

Court Commissioners are judicial officers of the court to whom Guardianship matters are referred for hearing and court action by local rule. The Commissioner in Dept.A hears matters *ex-parte* which do not require scheduling a hearing or notice to other parties. It is available all judicial days 9:00a.m. to 10:30a.m. and 1:00p.m. to 4:00p.m. Dept.D hears Guardianship matters requiring notice on 9:00a.m. to noon Thursdays and 9:30a.m. to noon Fridays. See below re notice.

**SUPERIOR COURT OF WASHINGTON
IN AND FOR SNOHOMISH COUNTY**

In the Guardianship of:

CASE NO. _____

**Acknowledgement of Receipt of Motion and
Waiver of Notice of Hearing**

_____ **an Incapacitated Person.**

I/We _____ the undersigned who is/are (check one) Guardian(s) Counsel of Record for

_____ Other person(s) entitled to receive notice of proceedings in the above matter, declare as follows:

I/We have each received a copy of the Motion to: Modify Guardianship Replace Guardian Terminate Guardianship Other wherein _____

_____ is/are the Applicants, dated the _____ day of _____ 20____.

I/We each waive notice of hearing of said motion and leave it to the court to make a determination of the matter.

Dated this _____ day of _____ 20_____

Signature

Signature