

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

I am ☐ Plaintiff/Petitioner ☐ Defendant/Respondent  
☐ Plaintiff/Petitioner's Attorney ☐ Defendant/Respondent's Attorney (Utah Bar #:\_\_\_\_\_)  
☐ Plaintiff/Petitioner's Licensed Paralegal Practitioner  
☐ Defendant/Respondent's Licensed Paralegal Practitioner (Utah Bar #:\_\_\_\_\_)

In the District Court of Utah

\_\_\_\_\_ Judicial District \_\_\_\_\_ County

Court Address \_\_\_\_\_

_____ Plaintiff	<b>Request for Occupancy Hearing</b> Utah Code 78B-6-810
v.	_____ Case Number
_____ Defendant	_____ Judge

1. I am the ☐ plaintiff ☐ defendant.
2. I ask for a hearing to determine who has the right to immediately occupy the property in this case.
3. I ask the hearing be held within 10 business days after the defendant's answer was filed.

### Plaintiff/Petitioner or Defendant/Respondent

I declare under criminal penalty under the law of Utah that everything stated in this document is true.

Signed at \_\_\_\_\_ (city, and state or country).

\_\_\_\_\_  
Signature ► \_\_\_\_\_

Date

Printed Name \_\_\_\_\_

**Attorney or Licensed Paralegal Practitioner of record** (if applicable)

\_\_\_\_\_  
Date

Signature ► \_\_\_\_\_

Printed Name \_\_\_\_\_

**The Certificate of Service** proves you gave copies of this document to everyone involved in your case. It is saying, "I gave everyone the papers they need to see." (Utah Rule of Civil Procedure 5)

1. **Fill out the sections below:** Write the information for each person you are sending a copy to. You have space to include two people and may add more pages if needed.
2. **Serve it:** You need to give a copy of the document including the certificate of service page to the other person. Give it to them on or before the day you give the document to the court.
3. **File it:** You need to give this document including the certificate of service page to the court. Make sure you also keep a copy for yourself.

### Certificate of Service

I confirm that I provided a copy of this Request for Occupancy Hearing to the following people.

I provided a copy to <b>Name of Person</b>	I provided the copy by <b>[x]check one</b>	I provided the copy to this <b>address</b> <b>(based on ← option checked)</b>	I provided the copy on <b>Date</b>
1.	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed/MyCase <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
2.	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed/MyCase <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Your  
Signature ►

\_\_\_\_\_  
Date  
(when you filled this out)

Your Printed  
Name