

This is a private record.

My Name

Address

City, State, Zip

Phone

Email

I am the Petitioner
 Attorney for the Petitioner and my Utah Bar number is _____

In the District Court of _____ County, Utah

Court Address _____

<p>In the Matter of Protection for</p> <p>_____, Respondent</p>	<p>Schedule A—people who must be served with the notice of hearing</p> <p>_____ Case Number</p> <p>_____ Judge</p>
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- (1) I request that the clerk of court post a copy of the notice of the hearing for 10 consecutive days immediately preceding the hearing in at least three public places in the county.
- (2) I will have the notice of the hearing personally served upon: (Check “deceased” if the person listed has died. If the person has been found by a judge to be incapacitated, serve the notice on the person’s guardian.)

Respondent, who can be found in this state

Name

Address

City, State, Zip

Phone

Email

If respondent is not married,
respondent's mother, who can be found
in this state ([] deceased)

Name

Address

City, State, Zip

Phone

Email

Respondent's spouse, who can be
found in this state ([] deceased)

Name

Address

City, State, Zip

Phone

Email

If respondent is not married,
respondent's father, who can be found
in this state ([] deceased)

Name

Address

City, State, Zip

Phone

Email

(3) I will mail the notice of the hearing to:

Respondent, who cannot be found in this state (deceased)

Name

Address

City, State, Zip

Phone

Email

If respondent is not married, respondent's mother, who cannot be found in this state (deceased)

Name

Address

City, State, Zip

Phone

Email

Respondent's spouse, who cannot be found in this state (deceased)

Name

Address

City, State, Zip

Phone

Email

If respondent is not married, respondent's father, who cannot be found in this state (deceased)

Name

Address

City, State, Zip

Phone

Email

(4) At least 10 days before the hearing I will mail the notice of hearing to the following people who have requested notice under Section 75-5-406:

Name

Address

City, State, Zip

Phone

Email

Name

Address

City, State, Zip

Phone

Email

Name

Address

City, State, Zip

Phone

Email

Name

Address

City, State, Zip

Phone

Email

_____ Sign here ► _____
Date
Typed or Printed Name _____