

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

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

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

**This motion will be decided by the court commissioner at an upcoming hearing. If you do not appear at the hearing, the Court might make a decision against you without your input. In addition, you may file a written response at least 14 days before the hearing.**

**Check your email.** You will receive information and documents at this email address.

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

In the District Court of Utah

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

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

<p>_____ Petitioner</p> <p>v.</p> <p>_____ Respondent</p>	<p><b>Motion for Temporary Order – With Children - Commissioner</b></p> <p><input type="checkbox"/> Hearing Requested</p> <p>_____ Case Number</p> <p>_____ Judge</p> <p>_____ Commissioner</p>
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I ask the court to enter temporary orders in the paragraphs I have marked below.

1.  **Children** (including only unborn, minor and adult incapacitated children)

The petitioner and the respondent are the parents of the following children: (Add additional pages if needed.)

Child's name (first, middle and last)	Month and year of birth	Type of child
Example: Jennie Eliza Jones	January 2017	<input type="checkbox"/> Unborn <input checked="" type="checkbox"/> Minor <input type="checkbox"/> Adult incapacitated
		<input type="checkbox"/> Unborn <input type="checkbox"/> Minor <input type="checkbox"/> Adult incapacitated
		<input type="checkbox"/> Unborn <input type="checkbox"/> Minor <input type="checkbox"/> Adult incapacitated
		<input type="checkbox"/> Unborn <input type="checkbox"/> Minor <input type="checkbox"/> Adult incapacitated
		<input type="checkbox"/> Unborn <input type="checkbox"/> Minor <input type="checkbox"/> Adult incapacitated
		<input type="checkbox"/> Unborn <input type="checkbox"/> Minor <input type="checkbox"/> Adult incapacitated

The children have lived at the addresses listed below and with the persons listed below for the past five years: (Add additional pages if needed.)

Child's name	Address (street, city, state, ZIP)	Dates child lived at this address	Name(s) of person(s) who lived with child at this address	Relationship(s) to child
Example: Jennie Jones	123 Maple St Mayberry, UT 84444	5/15/15 to present	Jane Doe, John Jones	Mother, maternal grandfather

2.  **Child custody**

All orders involving children will include two types of custody: physical custody and legal custody.

**Physical custody** deals with where the children live and how many overnights the children spend with each parent.

**Sole physical custody** means that the children live primarily with one parent and have parent time (visitation) with the other parent (see parent-time options in Section 3).

**Joint physical custody** means that the children typically spend at least 30% of overnights with both parents each year and that both parents contribute to the expenses of the child in

addition to paying child support.

**Split physical custody** means that where there is more than one child, each parent is awarded sole physical custody of at least one of the children.

**Legal custody** deals with access to information and decision making.

**Sole legal custody** means that one parent has the right to make important decisions about the child.

**Joint legal custody** means that both parents: (1) have the right to information about the child (events, appointments, access to school and medical records, etc.); and (2) that both parents discuss and make major decisions together – (education, religion, medical, extra-curricular activities, etc.) but designate a parent to make the final decision if they cannot agree.

I ask the court to order temporary custody below (Choose one. If you ask for any joint legal custody or joint physical custody arrangement, you must file or attach a Parenting Plan based on Utah Code 30-3-10.7 to 30-3-10.10.):

Custody arrangement: (Add additional pages if needed.)

Child's name	Month and year of birth	Order physical custody to	Order legal custody to
Example: Jennie Jones	January 2013	<input type="checkbox"/> Petitioner <input checked="" type="checkbox"/> Respondent <input type="checkbox"/> Joint physical	<input type="checkbox"/> Petitioner <input checked="" type="checkbox"/> Respondent <input type="checkbox"/> Joint legal
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Joint physical	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Joint legal
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Joint physical	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Joint legal
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Joint physical	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Joint legal
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Joint physical	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Joint legal
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Joint physical	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Joint legal

Other custody arrangement (Describe in detail.):

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I ask the court to order the custody arrangement I have marked above because:

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3.  **Parent-time**

I ask the court to order temporary parent-time below (Choose one.):

- Statutory parent-time schedule: (Choose all that apply. You can find the Utah Code at [le.utah.gov/xcode/code.html](http://le.utah.gov/xcode/code.html). Print and attach a copy of the statute(s) for the option(s) you choose.)
  - Children under 5 (Utah Code 30-3-35.5)
  - Children 5-18 (Utah Code 30-3-35)
  - Children 5-18 (expanded schedule) (Utah Code 30-3-35.1)
  - Children 5-18 (equal parent-time) (Utah Code 30-3-35.2)
- Parent-time described in the filed or attached Parenting Plan.
- Other parent-time schedule: (Describe in detail.)

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I ask the court to order the parent-time schedule I chose above because:

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4.  **Parent-time transfers**

I ask the court to order transfer (pick-up and drop-off) of the children for parent-time described below (Choose one.):

Order transfer of the children for parent-time described in the filed or attached Parenting Plan.

Order transfer at **beginning** of parent-time with

petitioner

respondent

other adult (Name) \_\_\_\_\_

transferring the children at this address:

\_\_\_\_\_

and transfer at **end** of parent-time with

petitioner

respondent

other adult (Name) \_\_\_\_\_

transferring the children at this address:

\_\_\_\_\_

Order curbside transfers (The parent/person picking up or dropping off the children does not leave the vehicle and the other parent/person does not leave the residence).

Other transfer arrangements (Describe in detail.):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I ask the court to order the transfer arrangement I chose above because:

\_\_\_\_\_

\_\_\_\_\_

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5.  **Communication between parties**

I ask the court to order communication between the parties as described below  
(Choose as many options as you want.):

In person

Phone

Petitioner's # \_\_\_\_\_ Respondent's # \_\_\_\_\_

Text

Petitioner's # \_\_\_\_\_ Respondent's # \_\_\_\_\_

Email

Petitioner's email address \_\_\_\_\_

Respondent's email address \_\_\_\_\_

Through a third party

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Other method of communication: (Describe in detail.)

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Communications between the parties must be civil and respectful and limited to parent-time issues only.

The parties must not make negative or harmful remarks about each other in the presence of the children, must not allow other people to do so and must remove the children if anyone makes negative remarks about the other party.

The parties must not discuss this case in the presence of the minor children, must not allow other people to do so and must remove the children if anyone discusses the case in the presence of the minor children.

The parties must not harm or threaten to harm the other parent or the children and must not allow other people to do so and must remove the children if anyone harms or threatens harm to the other parent or children.

6.  **Child support**

I ask the court to order child support based on the parties' incomes or estimate of income based on ability or work history.

- a. Petitioner's total countable gross monthly income for child support purposes is \$\_\_\_\_\_ (Utah Code 78B-12-203).

This income is from these sources:

\_\_\_\_\_  
\_\_\_\_\_.

- The court should consider petitioner's income to be \$\_\_\_\_\_ based on (Choose one.):

minimum wage.

historical earnings.

- Petitioner does receive or has received public assistance.

- b. Respondent's total countable gross monthly income for child support purposes is \$\_\_\_\_\_ (Utah Code 78B-12-203).

This income is from these sources:

\_\_\_\_\_  
\_\_\_\_\_.

- The court should consider respondent's income to be \$\_\_\_\_\_ based on (Choose one.):

minimum wage.

historical earnings.

- Respondent does receive or has received public assistance.

- c. Order  petitioner  respondent to pay \$\_\_\_\_\_ per month for child support. The following child support worksheet is filed or attached (Choose one.):

sole physical custody worksheet

joint physical custody worksheet

split custody worksheet

(Choose one.)

This amount is based on the Uniform Child Support Guidelines (Utah Code 78B-12-201 et seq.).

This amount is **not** based on the Uniform Child Support Guidelines and I am asking for a different amount because (Choose one.):

the guidelines are unjust.

the guidelines are inappropriate.

the guidelines amount is not in the best interest of the children.

(Utah Code 78B-12-202 and 210.)

Explain your choice:

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d. Effective date (Choose one.):

The child support is effective upon entry of this order.

**OR**

The child support is effective as of this date: \_\_\_\_\_.

e. Child support will be paid as follows (Choose one.):

Mandatory income withholding by the Office of Recovery Services. Unless the Office of Recovery Services gives notice that payments will be sent elsewhere, all child support payments must be made to: Office of Recovery Services, PO Box 45011, Salt Lake City, UT 84145

**OR**

Direct payments to the parent receiving child support by:

Check

Deposit in bank account

Cashier's check or money order

Other: \_\_\_\_\_

I ask for direct payment because (Utah Code 62A-11-404):

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f. I ask that child support payments be made (Choose one.):



One-half on or before the 5th day of each month, and one-half on or before the 20th day of each month.

**OR**

Other payment arrangement:

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- g. Child support not paid on or before the due date is delinquent on the day after the due date.
- h. Child support arrearages will be determined by further judicial or administrative process. Any federal or state tax refund or rebate due to the non-custodial parent will be intercepted by the state of Utah and applied to child support arrearages.

7.  **Child care expenses**

I ask the court to order that both parties share equally the reasonable child care expenses related to the custodial parent's work or occupational training.

The parent who pays child care expenses must **immediately** provide to the other parent written verification of the cost of the child care expenses and the identity of the child care provider when hired, within 30 calendar days after a change in the provider or the expense, and anytime upon the request of the other parent.

If the parent who pays child care expenses fails to provide written verification of child care above, that parent may be denied the right to recover or receive credit for the other parent's one-half share of the child care expense.

The other parent must begin paying one-half the child care amount on a monthly basis **immediately** after receiving proof from the parent that pays the child care expense.

Other request for child care payment:

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8.  **Health insurance, medical and dental expenses**

Our minor children currently have health insurance coverage through:

- Petitioner's insurance
- Respondent's insurance

- Medicaid
- CHIP
- Other: \_\_\_\_\_
- Not covered by insurance

- I ask the court to order that  petitioner  respondent maintain health insurance for our minor children. Both parties must share equally:
  - a. the cost of the premium paid by a parent for the children's portion of the insurance. The children's portion of the premium will be calculated by dividing the premium amount by the number of people covered by the policy and multiplying the result by the number of minor children of the parties; and
  - b. all reasonable and necessary uninsured medical and dental expenses incurred for the children and paid by a parent, including deductibles and co-payments.

The parent ordered to maintain insurance must provide written verification of coverage to the other parent or the Office of Recovery Services when the children are first enrolled, on or before January 2nd of each calendar year and upon any change of insurance carrier, premium, or benefits within 30 calendar days after the date that parent knew or should have known of the change.

If the parent ordered to maintain insurance fails to provide written verification of coverage to the other parent or to the Office of Recovery Services, or if the parent incurring medical expenses fails to provide written verification of the cost and payment of the expenses to the other parent **within 30 days of payment**, that parent may be denied the right to receive credit for the expenses or to recover the other parent's share of the expenses.

The parent receiving written verification will reimburse the parent who incurred the medical or dental expenses one-half of the amount **within 30 days after receiving the written verification**.

I ask for this order because (Choose all that apply.):

- the insurance is available to  petitioner  respondent;
- the cost of the insurance is reasonable
- the custodial parent prefers this arrangement.
- Other reasons:

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I ask for these additional orders regarding health insurance and medical and dental expenses:

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9.  **Pregnancy expenses**

I ask the court to order that  petitioner  respondent pay 50% of the pregnancy expenses. These expenses were billed for services the mother received after becoming pregnant and before the pregnancy ended. (You must attach all documents supporting the amounts you are requesting.)

One-half of health insurance premiums not paid by an employer or government program \$ \_\_\_\_\_  
 from \_\_\_\_\_ to \_\_\_\_\_ (dates)

One-half of medical costs related to the pregnancy not covered by insurance or government program \$ \_\_\_\_\_

10.  **Tax exemptions for dependent children**

I ask the court to order tax exemptions for the dependent children for tax year \_\_\_\_\_, as follows:

Child's name	Month and year of birth	Parent who may claim exemption
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent

		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent

Other: \_\_\_\_\_

11.  **Payment of bills and debts**

I ask the court to order payment of bills and debts (such as mortgage, rent, credit card, utilities, medical expenses, car payments, insurance, etc.) as follows (File or attach Financial Declaration. Add additional pages if needed.):

Petitioner to pay:

Type of debt	Name of creditor	Last 4 digits of account no.	Total amount owed	Monthly amount owed
			\$	\$
			\$	\$
			\$	\$

Respondent to pay:

Type of debt	Name of creditor	Last 4 digits of account no.	Total amount owed	Monthly amount owed
			\$	\$
			\$	\$
			\$	\$

The bills and debts should be paid as requested because:

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12.  **Property**

I ask the court to order the temporary use and possession of the following property (File or attach Financial Declaration. File or attach additional pages if needed.):

To petitioner

Residence (Address): \_\_\_\_\_

Vehicle(s) (Make/model/year): \_\_\_\_\_

Personal property items:

\_\_\_\_\_  
\_\_\_\_\_

Other: \_\_\_\_\_

To respondent

Residence (Address): \_\_\_\_\_

Vehicle(s) (Make/model/year): \_\_\_\_\_

Personal property items:

\_\_\_\_\_  
\_\_\_\_\_

Other: \_\_\_\_\_

I ask the court to order that neither party sell, transfer or dispose of any property without a court order or written agreement signed by both parties.

I ask for this property order because:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

13.  **Temporary alimony** (Divorce cases only. (Utah Code 30-3-5(8)).)

I am unable to meet my own financial needs, and I ask the court to order temporary alimony as follows (File or attach Financial Declaration.):

petitioner  respondent shall pay to  petitioner  respondent temporary alimony in the amount of \$ \_\_\_\_\_ per month by:  
(Choose one.):

Check

- Deposit in bank account
- Cashier's check or money order
- Other: \_\_\_\_\_

Petitioner  Respondent needs temporary alimony because :

\_\_\_\_\_

\_\_\_\_\_

Petitioner  Respondent has the financial ability to pay temporary alimony because:

\_\_\_\_\_

\_\_\_\_\_

14.  **Attorney fees**

I ask the court to order the other party to pay \$\_\_\_\_\_ to my attorney. (You can only ask for this if you are paying an attorney to represent you in this case. You must file or attach a Financial Declaration.)

I ask for attorney fees because:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

15.  **Other**

I ask the court for these additional orders:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I ask for these additional orders because:

\_\_\_\_\_

\_\_\_\_\_

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16. **Documents**

I have filed or attached the following documents in support of this Motion for Temporary Order (Check all that apply. Forms can be found at [www.utcourts.gov](http://www.utcourts.gov)):

- Parenting Plan (Utah Code 30-3-10.7 to 30-3-10.10)
- Parent time Schedule (Utah Code 30-3-35; 30-3-35.5; 30-3-35.1; 30-3-35.2)
- Child Support Obligation Worksheet (Utah Code 78B-12)
- Financial Declaration (Utah Rule of Civil Procedure 26.1)
- Income verification (Most recent tax return and pay stub)
- Other supporting documents: \_\_\_\_\_

**Petitioner or 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).

\_\_\_\_\_  
Date

Signature ► \_\_\_\_\_  
Printed Name \_\_\_\_\_

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

\_\_\_\_\_  
Date

Signature ► \_\_\_\_\_  
Printed Name \_\_\_\_\_

### Notice to responding party

You have a limited amount of time to respond to this motion. In most cases, you must file a written response with the court and provide a copy to the other party:

- within 14 days of this motion being filed, if the motion will be decided by a judge, or
- at least 14 days before the hearing, if the motion will be decided by a commissioner.

In some situations a statute or court order may specify a different deadline.

If you do not respond to this motion or attend the hearing, the person who filed the motion may get what they requested.

See the court's Motions page for more information about the motions process, deadlines and forms:  
[utcourts.gov/motions](http://utcourts.gov/motions)



Scan QR code to visit page

### Finding help

The court's Finding Legal Help web page ([utcourts.gov/help](http://utcourts.gov/help)) provides information about the ways you can get legal help, including the Self-Help Center, reduced-fee attorneys, limited legal help and free legal clinics.



Scan QR code to visit page

### Aviso para la parte que responde

Su tiempo para responder a esta moción es limitado. En la mayoría de casos deberá presentar una respuesta escrita con el tribunal y darle una copia de la misma a la otra parte:

- dentro de 14 días del día que se presenta la moción, si la misma será resuelta por un juez, o
- por lo menos 14 días antes de la audiencia, si la misma será resuelta por un comisionado.

En algunos casos debido a un estatuto o a una orden de un juez la fecha límite podrá ser distinta.

Si usted no responde a esta moción ni se presenta a la audiencia, la persona que presentó la moción podría recibir lo que pidió.

Vea la página del tribunal sobre Mociones para encontrar más información sobre el proceso de las mociones, las fechas límites y los formularios:  
[utcourts.gov/motions-span](http://utcourts.gov/motions-span)



Para acceder esta página escanee el código QR

### Cómo encontrar ayuda legal

La página de la internet del tribunal Cómo encontrar ayuda legal ([utcourts.gov/help-span](http://utcourts.gov/help-span)) tiene información sobre algunas maneras de encontrar ayuda legal, incluyendo el Centro de Ayuda de los Tribunales de Utah, abogados que ofrecen descuentos u ofrecen ayuda legal limitada, y talleres legales gratuitos.



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### Certificate of Service

I certify that I filed with the court and am serving a copy of this Motion for Temporary Order – With Children on the following people.

Person's Name	Service Method	Service Address	Service Date
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <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.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <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.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <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.)		

\_\_\_\_\_ Signature ► \_\_\_\_\_  
 Date Printed Name \_\_\_\_\_