
Name

Address

City, State, Zip

Phone

Email

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

I am Plaintiff/Petitioner Defendant/Respondent
 Plaintiff/Petitioner's Attorney Defendant/Respondent's Attorney (Utah Bar #: _____)

In the District Justice Court of Utah

_____ Judicial District _____ County

Court Address _____

<p>_____ Plaintiff/Petitioner</p> <p>v.</p> <p>_____ Defendant/Respondent</p>	<p>Motion to Enforce Writ of Garnishment (Motion for Order to Show Cause)</p> <p>_____ Case Number</p> <p>_____ Judge</p> <p>_____ Commissioner (domestic cases)</p>
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Attach:

- Certificate of Service showing service upon the garnishee of the Writ of Garnishment
- Order to Garnishee to Show Cause

1. I am the judgment creditor, and I have had the Writ of Garnishment served on _____ (name), the garnishee.
2. The deadline to comply with the Writ of Garnishment was _____ (date), which has passed. The garnishee has not complied with the Writ of Garnishment by failing to:

- 3. I have tried to settle the issue without further court action. I have in good faith discussed or attempted to discuss the issue with the garnishee.

- 4. I request that the court order the garnishee to explain why they should not be held in contempt or why the court should not make other orders, including reimbursement for the cost of this motion.

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 _____

Certificate of Service

This certificate of service is required only if the other party is represented by an attorney. **The other party should be served by a sheriff, constable or private investigator.**

I certify that I filed with the court and am serving a copy of this Motion for Order to Show Cause on the following people.

Person's Name	Service Method	Service Address	Service Date
(Other party's attorney, if applicable)	<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.)		
(Other party's attorney, if applicable)	<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 _____