PETITION FOR REVIEW HEARING (GUARDIAN AND/OR CONSERVATOR)

Form CC-1646

Using This Revisable PDF Form

- 1. Prepared by person requesting a review hearing in a guardianship and/or conservatorship matter.
- 2. Attachments: none.
- 3. Preparation: none.

PETITION FOR REVIEW HEARING (GUARDIAN AND/OR CONSERVATOR)

Data Elements

- 1. Name and city/county of court.
- 2. Court case number.
- 3. Style of guardianship and/or conservatorship case.
- 4. Name of Guardian.
- 5. Date that court order appointing the guardian and/or conservator was signed.
- 6. Name of Conservator. If same as Guardian, skip to number 7.
- 7. Check box if Guardian and Conservator are the same person.
- 8. Date of the next reviewing hearing scheduled by the court in the guardianship matter. If no review hearing has already been scheduled, write "none."
- 9. Description of why a review hearing is being requested.
- 10. Date of signed petition.
- 11. Signature of person requesting review hearing.
- 12. Printed name of person requesting review hearing.
- 13. Address of person requesting review hearing.
- 14. Telephone number of person requesting review hearing.
- 15. Email address of person requesting review hearing.

PETITION FOR REVIEW HEARING (GUARDIAN AND/OR CONSERVATOR) Commonwealth of Virginia VA. CODE § 64.2-2009

| In the Circuit Court of | the [] City [] Cor | unty of | 1 | |
|--|--|------------------------------|-------------------------------|--|
| This petition is filed in | connection with the | e following case: | Case No | 2 |
| 3 | | V | | 3 |
| PETIT | TIONER | V | RES | PONDENT |
| 4 | ļ | | | 5 |
| NAME O | F GUARDIAN | | DATE OF ORDER (| OF APPOINTMENT |
| NAME OF CONSERVATO | OR, [] SAME AS GUARDIAN | 7 | | |
| for the Respondent list hearing prior to the hear | ed above. Pursuant aring currently scheo | to Va. Code § 64.2-duled on | -2009, I request the 8 | rdian and/or conservator at the court hold a review , as set forth in order of |
| appointment. Good cau | ase exists to hold an | earlier review hear | ing for the following | ing reason(s): |
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| I hereby state that the a | above information is | s correct to the best | of my knowledge | |
| 10 | | 11 | | 12 |
| DATE | SIGNATURE OF PERS | ON REQUESTING HEARIN | G PRINTED NAME O | OF PERSON REQUESTING HEARING |
| | ADDRESS | 13 S OF PERSON REQUESTING | HEARING | |
| | | | | |
| | TELEPHONE NU | JMBER OF PERSON REQUE | STING HEARING | |
| | EMAIL ADDRESS O | 15 F PERSON REQUESTING H | EADING (ODTIONAL) | |