



Maricopa County Justice Courts, Arizona

CASE NUMBER: _____

Name of Petitioner/Plaintiff

Name of Respondent/Defendant

REQUEST AND ORDER FOR HEARING

Check at least one of the following:

- I request a hearing on the denial of my supplemental application for waiver or further deferral.
- I do not agree with the amount of unpaid fees and costs on the itemized statement provided by the court. I request a hearing on the calculation of the unpaid fees and costs.

Date: _____

Signature

Printed Name

The Court completes the following section.

IT IS ORDERED scheduling a hearing on the above matter.

Date: _____ Time: _____

Be in court at least 15 minutes before the scheduled hearing.

YOU MUST CHECK IN AT THE FRONT COUNTER BEFORE ENTERING THE COURT ROOM.

(Esté en el tribunal por lo menos 15 minutos antes de la audiencia programada.)

(DEBE REGISTRARSE EN EL MOSTRADOR DELANTERO ANTES DE ENTRAR EN LA SALA DEL TRIBUNAL)

REQUESTS FOR REASONABLE ACCOMMODATIONS FOR PERSONS WITH DISABILITIES SHOULD BE MADE TO THE COURT AS SOON AS POSSIBLE.

(LAS SOLICITUDES PARA ARREGLOS O ADAPTACIONES RAZONABLES PARA PERSONAS CON DISCAPACIDADES SE DEBEN PRESENTAR ANTE EL TRIBUNAL LO MAS ANTES POSIBLE.)

If an interpreter is needed, please contact the court listed above to request an interpreter be provided.

(En caso de necesitarse un intérprete, favor de comunicarse con el Tribunal antes mencionado para solicitar que se brinden los servicios de un intérprete.)

Location: _____

Hearing Officer: _____

Date: _____
Justice of the Peace

I CERTIFY that I mailed/ delivered a copy of this document to:

Applicant at the above address in court
 Applicant's attorney at the above address in court

Date: _____ By _____
Clerk