

SUPERIOR COURT OF THE DISTRICT OF COLUMBIA
PROBATE DIVISION

INT
IDD

In re

ward

**PETITION POST APPOINTMENT TO TERMINATE GUARDIANSHIP OF A LIVING
WARD**

1. _____
(Name of petitioner)

2. _____
(Interest of petitioner – ward, guardian, conservator, friend, family, other)

3. Petitioner asks the Court to terminate or end the guardianship for the following reasons: _____

4. The ward is alive and is no longer incapacitated, and
[] medical evidence is attached.
[] no medical evidence is attached.

5. I understand that a hearing may be scheduled to decide this petition and that I must attend.

Signature of attorney

Signature of petitioner

Typed name of attorney

Typed name

Address (actual address/not Post Office Box)

Address (actual address/not Post Office Box)

_____	_____
_____	_____
_____	_____
Telephone number	Telephone number
_____	_____
Email address	Email address
_____	_____
Unified Bar number	Unified Bar number (if filer is an attorney)

VERIFICATION

I, _____, being first duly sworn, on oath, depose and say that I have read the foregoing pleading by me subscribed and that the facts therein stated are true to the best of my knowledge, information, and belief.

Signature of petitioner

Subscribed and sworn to before me this ____ day of _____, 20____.

Notary Public/Clerk

CERTIFICATE OF SERVICE

I certify that on the ____ day of _____, 20____, a copy of this filing was either eServed in accordance with the provisions of Administrative Order 13-15 or served by first-class mail, postage prepaid, on the following persons (list names and complete mailing addresses):

Signature

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NOTICE OF RIGHT TO RESPOND AND/OR REQUEST AN ORAL HEARING
(This notice must be served on all parties, and a copy must be filed with the
petition post appointment.)

Notice is hereby given that _____ has filed a Petition Post Appointment To Terminate Guardianship of an Adult. A copy is attached.

You are entitled to file a response or opposition to the petition and to request a hearing if you so choose. If you object to the petition or want to respond to the petition or want to request an oral hearing, you must file the objection, response, or request for an oral hearing within ten days after the petition was personally served on you or, if the petition was mailed to you, within thirteen days of the date that the petition was mailed. The Court rules that apply are Superior Court, Probate Division Rule 322(a) and (c).

Date

Signature

Typed name

Address (actual address/not Post Office Box)

Telephone number

Email address

Unified Bar number (if filer is an attorney)

SUPERIOR COURT OF THE DISTRICT OF COLUMBIA
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ORDER APPOINTING COUNSEL

Upon consideration of the petition filed herein on the ____ day of _____,
20____, it is by the Court this ____ day of _____, 20____,

ORDERED that _____ is appointed counsel for
_____, the subject of the above proceeding. The counsel shall have
access to any current medical, psychological, or sociological evaluation records of the subject. Counsel
shall perform the duties set forth in D.C. Code, sec. 21-2033(b) and Superior Court, Probate Division
Rule 305 and represent the subject at the hearing to be held on _____, 20____, at
_____ o'clock a.m./p.m. in Courtroom ____ of the Superior Court of the District of Columbia,
Building A, 515 5th Street, NW, Washington, DC, before Judge _____.

ORDERED that counsel shall forthwith file a Notice of Appearance pursuant to Superior Court,
Probate Division Rules 321(d) and 305(a)(2).

JUDGE

cc:

SUPERIOR COURT OF THE DISTRICT OF COLUMBIA
PROBATE DIVISION

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NOTICE OF HEARING ON SUBSEQUENT PETITION

(Pursuant to D.C. Code, sec. 21-2031 and Superior Court, Probate Division Rules 311 and 322)

You are advised that a hearing has been scheduled in the Probate Division of the Superior Court of the District of Columbia, 515 5th Street, NW, Washington, DC 20001 on _____, 20____ at _____ o'clock a.m./p.m. in courtroom ____ to consider whether to grant the relief requested in the following petition:

Petition To Terminate Guardianship of an Adult

A person entitled to file a response who wishes to do so must file the response within ten (10) days of the date of this notice (or 13 days if this notice has been mailed). A copy of the response must be sent to the person(s) whose name(s) appears below under "copies to." At the hearing the Court will hear from all parties and persons entitled to participate and may take testimony on the issues presented.

Parties are entitled to the following rights: (1) to respond in writing to the petition, (2) to appear through counsel, (3) to participate at the hearing, (4) to conduct discovery with the Court's permission, and (5) to receive copies of pleadings filed by other parties.

Any person who is not a party and wishes to participate must file a Petition for Permission To Participate and proposed order for the Court's consideration in accordance with Superior Court, Probate Division Rule 303(b).

Date: _____

NOTE: Pursuant to Superior Court, Probate Division Rule 311(c)(3), this notice must be mailed no fewer than 17 days or personally delivered no fewer than 14 days before the date set for the hearing.

Copies to: Parties to the above-captioned case and persons granted permission to participate pursuant to Superior Court, Probate Division Rule 303 and persons who requested notice pursuant to Superior Court, Probate Division Rule 304.

Proof of service in accordance with Superior Court, Probate Division Rule 311(c)(6) must be filed.

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ORDER

Upon consideration of the Petition Post Appointment To Terminate Guardianship of an Adult filed herein on the _____ day of _____, 20_____, it is by the Court this ____ day of _____, 20_____,

ORDERED that

JUDGE

cc: