# PETITION TO REMOVE GUARDIAN(S)

## **GA-16**

Resource Center
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Reno, NV 89501
775-325-6731

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## PETITION TO REMOVE GUARDIAN(S)

#### **PACKET GA-16**

## USE THIS PETITION PACKET ONLY IF <u>ALL</u> OF THE FOLLOWING REQUIREMENTS HAVE BEEN MET:

Ш	There is an open guardianship case in washoe County.
	The protected person is still in need of a guardian.
	You wish to have the court remove one or more guardian(s) from acting as guardian(s) or the protected person.

#### **INSTRUCTIONS FOR COMPLETING FORMS**

## CAREFULLY READ ALL INSTRUCTIONS BEFORE STARTING TO FILL OUT ANY OF THE FORMS.

Use black or blue ink only. Neatly print the information requested.

Do not use correction fluid/tape on the forms.

This packet contains the following forms:

- 1. Petition to Remove Guardian(s)
- 2. Citation to Appear and Show Cause
- 3. Certificate of Mailing
- 4. Declaration of Service

The penalty for willfully making a false statement under penalty of perjury is a minimum of 1 year, and a maximum of 4 years in prison, in addition to a fine of not more than \$5,000.00. N.R.S. §199.145.

**INSTRUCTIONS: STEP 1** 

#### **Complete the Petition as Shown:**

If you have documents that support your Petition to Remove Guardian(s), attach copies of the documents to your petition as exhibits (see INSTRUCTIONS: STEP 2). Explain in your petition how the documents support your petition. If you do not have any exhibits, please continue to INSTRUCTIONS: STEP 3.

1) Print your name, address, — telephone number, and email.	COURT CODE: 3645 Your Name: Address: City, State, Zip: Telephone: Email Address: Self-Represented
2) Print the heading, Case No., and Dept. No. exactly as it appears on all other documents in this case.	IN THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA IN AND FOR THE COUNTY OF WASHOE  In the Matter of the Guardianship of the:    Person
3) Complete pages 1 - 4,	Petitioner, (name of petitioner), respectfully represents to the Court as follows:  1. This Court previously appointed (name of first guardian) and (name of second guardian, or as Guardian(s) of the above named protected person.
following the instructions on each page.	2. The name of the guardian(s) who should be removed is (name of guardian(s) you would like removed  This request for removal is based on the following: (⊠ check all that apply):  The guardian is deceased and another person will apply to serve as a successor guardian;  The guardian has become mentally incapacitated, unsuitable or otherwise incapable of exercising the authority and performing the duties of a guardian as provided by law;
	Page 1 of 4 – Petition to Remove Guardian(s)

#### **INSTRUCTIONS: STEP 2**

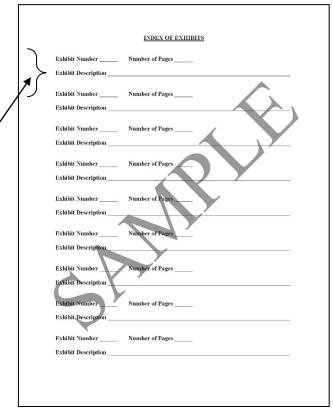
#### Complete the Index of Exhibits and the Exhibit Cover Page as Shown:

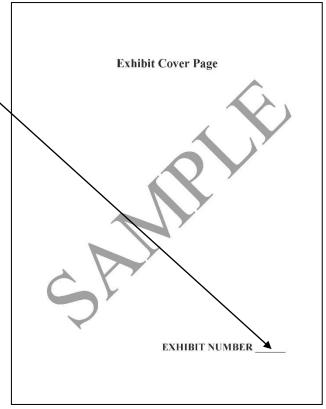
To attach documents in support of your Petition to Remove Guardian(s) you will need an Exhibit Index and Exhibit Cover Page(s). If you do not have any exhibits skip this step and continue with INSTRUCTIONS: STEP 4.

- 1) For each exhibit you are attaching you must print:
  - a) An exhibit number, starting with 1,
  - b) The number of pages in the exhibit, and
  - c) A description of the exhibit.

2) For each exhibit, you must fill out an Exhibit Cover Page with the exhibit number listed on the Index of Exhibits.

- 3) The documents should be in the following order:
  - The Petition to Remove Guardian(s)
  - The Index of Exhibits
  - The Exhibit Cover Page
  - The exhibit
  - The Exhibit Cover Page
  - The exhibit, and so on.





**INSTRUCTIONS: STEP 3** 

#### **Electronically Filing the Documents**

You will need to upload the original documents to eFlex. EFlex is available online at <a href="https://wceflex.washoecourts.com/">https://wceflex.washoecourts.com/</a>, and in the Law Library and the Resource Center.

Sign into your eFlex account using the username and password you created and electronically file the:

- Petition to Remove Guardian(s);
- Any Exhibits.

Make sure to keep the original copy of any documents you file for your personal records. File-stamped copies of your documents are available through your eFlex account.

Scanners are available in the Law Library and the Resource Center.

#### **INSTRUCTIONS: STEP 4**

#### Complete the Citation to Appear and Show Cause as Shown:

You must contact the Court to set your petition for hearing and have the Citation issued. You may do this by: 1) emailing the Citation to <a href="Mailto:AdultGuardianship@washoecourts.us">AdultGuardianship@washoecourts.us</a>, or 2) calling the guardianship Court Clerk at 775-328-3135. If you have any questions about getting the Citation issued, call 775-328-3135. You must serve a copy of the file-stamped Petition and Citation to Appear and Show Cause to the following proposed protected person's family members (if surviving):

Siblings (over the age of 14)

Grandchildren (over the age of 14)

Spouse

- Mother
- Father
- Children (over the age of 14)
- Grandparents

You will also need to serve

- The Protected Person and their attorney.
- The Director of the Department of Health and Human Service if the Protected Person has received or is receiving benefits from Medicaid.
- The Department of Veteran Affairs if the Protected Person is receiving benefits from the VA.
- Anyone else who is listed under NRS 159.034.
- 1) Print your name, address, telephone number, and email. COURT CODE: 1395 Your Name: \_\_\_\_ Address: \_\_\_\_ City, State, Zip: \_ 2) Print the heading, Case Email Address: Self-Represented No., and Dept. No. exactly as IN THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NE IN AND FOR THE COUNTY OF WASHOE it appears on all other In the Matter of the Guardianship of the: documents in this case. ☐ Person CASE NO DEPT ☐ Person and Estate (name of person who has a guardian) A Protected Person 3) Print the names of all the CITATION TO APPEAR AND SHOW CAUSE people you are required to (protected person's att serve. (guardian's names) RELATIVES OF THE PROTECTED PERSON: 4) Print the names of the Petitioners on the second page and mark the box for "Remove Guardian". Leave ANY PERSON HAVING THE CARE, CUSTODY, AND CONTROL OF THE the rest of the second page PROTECTED PERSON blank. A court employee will fill this out. Page 1 of 2 - Citation to Appear and Show Cause (Generic)

**INSTRUCTIONS: STEP 5** 

#### **Serving the Documents**

Everyone listed on the citation must be served by certified mail, with return receipt requested, at least 20 days before the hearing, or by personal service at least 10 days before the date set for the hearing. **PERSONAL SERVICE CANNOT BE COMPLETED BY YOU.** 

If you serve by certified mail, keep the white slips and green cards to attach to your Certificate of Service (*see INSTRUCTIONS: STEP 6*).

If you serve by personal service, service may be completed by:

- The Civil Division of the Sheriff's Office in the County in which the person you are serving resides or works; or
- A responsible adult over the age of 18 years (such as a friend or relative); or
- A private process service.

The Declaration of Service must be completed by the person who served the documents (*see INSTRUCTIONS: STEP 7*).

#### **INSTRUCTIONS: STEP 6**

#### Complete the Certificate of Service for all Persons Served by Mail as Shown:

1) Print your name, address, telephone number, and email address.	COURT CODE: 1360
2) Print the heading, Case No., and Dept. No. just as they appear on all your other documents in this case.	Your Name: Address: City, State, Zip: Telephone: Email Address: Self-Represented  IN THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA IN AND FOR THE COUNTY OF WASHOE
3) Complete the information on pages 1-2, following the instructions on each page.	In the Matter of the Guardianship of the:  Person Estate Person and Estate DEPT:
4) List the names and addresses of the people served by mail, if any, in these spaces. If more room is needed, attach additional sheets.	of:  (name of person who has a guardian) A Protected Person  CERTIFICATE OF SERVICE
	I HEREBY CERTIFY that I am over the age of 18 and I served the (⊠ check all that apply)  ☐ Petition to Remove Guarding(s) ☐ Circle to Remove Guarding(s)
Name: Name: Address: Address:	in the following manner:
Name: Name: Address: Address:	BY MAIL  Learnify that I deposited copies the foregoing documents in the U.S. mail in (city)  Nevada, addressed to the persons listed below on (date)
Name:	by (Sechech one) □ Regular, □ Certified or □ Registered, return receipt requested:  Name:
	Address: Address:
Name:         Name:           Email Address:         Email Address:           Name:         Name           Email Address:         Email Address:	© 2018 Nevada Supreme Court  Page 1 of 2 – Certificate of Service (Generic Guardianship)
Name:	
I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct.	
This document does not contain the personal information of any person as defined by SRS 603A.040.  DATED (month)	5) Date, sign, and print your name.
(Your Signature) (Printed Name)	5) Date, sign, and print your name.
Page 2 of 2 – Certificate of Service (Generic Guardiarship)	

**INSTRUCTIONS: STEP 7** 

Complete the Declaration of Service for those Personally Served as Shown:

This form will be filled out by the person who completes service. One document will need to be filled out for each individual served. It is your responsibility to file a copy of the Declaration of Service once service is completed.

<ol> <li>Print your name (the person who served the documents), address, telephone number, and email address.</li> <li>Print the heading, Case No., and Dept. No. just as they appear on all other documents in this case.</li> <li>Complete the information on pages 1 – 2, following the instructions on each page.</li> </ol>	COURT CODE: 1520 Your Name: Address: City, State, Zip: Phone: Email: Self-Represented  IN THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA IN AND FOR THE COUNTY OF WASHOE  In the Matter of the Guardianship of the: Person Estate Person Person Represented  CASE NOX DEPT:  (name of person who has a guardian) A Protected Person.
4. What Documents You Served. 1 served a copy of the (図 check all that apply)  □ Petition to Remove Guardian(s) □ Citation to Appear and Show Cause / Notice of Hearing □ Other:  5. Where You Served. I personally delivered and left the documents with: (☑ check one) □ The Person Directly. I served the documents directly to the person at the location below. (complete the details below)  Name of Person Served  City, State, Zip Code □ Someone Who Lives with the Person. This is a person of suitable age and discretion who lives with the person I needed to serve. (complete the details below)  Name of Person Served	DECLARATION OF SERVICE  A copy of the filed documents can be personally served on anyone who is required to receive scrives.  A neutral person, not involved in this case or related to the parties, can personally serve the documents directly to the person. If hat is not possible, the server can personally serve the documents on someone of suitable age and discretion who lives with the person. The proposed quardants or relatives cannot do this.  The person who serves the documents must complete this form.  1, (name of person who served the documents)  declare (complete EVERY SECTION below):  1. I am not a party to or interested in this action and I am over 18 years of age.  2. I am not a ficensed process server; I am a natural person serving legal process without compensation, not more than three times per year, on behalf of a litigant who is a natural person, and therefore I am not required to be licensed pursuant to NRS 648.063(2) (2017 Nevada Laws Ch. 126 (A.B. 128)).  3. Who You Served. I served (name of person who is supposed to get the documents)  ———————————————————————————————————
Address Where Saved  City, State, Zip Cook  6. When You Served. I personally served the documents on (date you served the documents) (month) (day), 20 at the hour of (time)	4) The person who served the documents will need to date, sign, print their name, address, and phone number.  PERSONAL SERVICE CANNOT BE COMPLETED BY YOU.

**INSTRUCTIONS: STEP 8** 

#### **Electronically Filing the Documents**

You will need to upload the original documents to eFlex. EFlex is available online at <a href="https://wceflex.washoecourts.com/">https://wceflex.washoecourts.com/</a>, and in the Law Library and the Resource Center.

Sign into your eFlex account using the username and password you created and electronically file the:

- Certificate of Mailing
- Declaration of Service

Make sure to keep the original copy of any documents you file for your personal records. File-stamped copies of your documents are available through your eFlex account.

Scanners are available in the Law Library and the Resource Center.

Once the Certificate of Mailing and the Declaration of Service have been filed, you will need to mail a file-stamped copy to all of the parties served who are not electronic filers.

**INSTRUCTIONS: STEP 9** 

#### The Hearing

The hearing will be virtual. The Court will send log in instructions prior to the hearing. Log on approximately 15 minutes prior to your scheduled time for the hearing.

The Judge may have questions for you, the guardian(s), the protected person, and any potential new guardian(s).

#### **Legal Assistance Information**

The information in this packet is provided as a courtesy only. This packet is not a substitute for the advice of an attorney. Counsel is always recommended for legal matters.

If you do not have an attorney, you are encouraged to seek the advice of a licensed attorney or contact the Resource Center or the Law Library. **The Resource Center and the Law Library staff cannot give legal advice** but can give information regarding court procedures.

You may wish to speak with a lawyer at no cost through the Law Library's Lawyer in the Library program. The Lawyer in the Library program is held via Zoom; you must register ahead of time to participate. No walk-ins accepted as space is limited.

#### LAWYER IN THE LIBRARY

Sign up on our website:

https://www.washoecourts.com/LawLibrary/LawyerInLibrary
For questions, contact the Law Library at 775-328-3250

To seek assistance from other free or reduced-cost legal resources in the area, please contact:

#### NEVADA LEGAL SERVICES

449 S. Virginia St.
Reno, NV 89501
775-284-3491 – leave a message, if
necessary
https://nevadalegalservices.org

#### NORTHERN NEVADA LEGAL AID

1 S. Sierra St., 1<sup>st</sup> Floor Reno, NV 89501 775-321-2062 – leave a message, if necessary https://nnlegalaid.org