COURT CODE: 3860
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

In the Matter of the Guardianship of the:

□ Person

□ Estate

 \Box Person and Estate

of:

CASE NO.:	 	
DEPT:		

(name of adult alleged to need a guardian) A Proposed Protected Person.

REQUEST FOR SUBMISSION

Petitioner(s), (*first Petitioner's name*) _______ and (*second Petitioner or "n/a" if only one Petitioner*) ______, request(s) that the DECLARATION TO WAIVE SERVICE OR ALTERNATIVELY, FOR SERVICE BY PUBLICATION (GUARDIANSHIP) and DECLARATION OF DUE DILLIGENCE be submitted to the Court for consideration.

This document does not contain the personal information of any person as defined by NRS 603A.040.

DATED (*month*) ______ (*day*) _____, 20____.

(Signature)

(Printed Name)

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