B4

GRANDPARENT VISITATION

For Petitioner Only

NO HAGA COPIAS O PRESENTE DE ESTA PAGINA

To Get the First Court Order

Part 1: Completing and Filing the Court Papers

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DRGV1 – 5046 – 121213

SELF-SERVICE CENTER

PETITION AND PAPERS FOR ORDER ABOUT GRANDPARENT VISITATION

CHECKLIST

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You may use the forms and instructions in this packet if . . .

- ✓ You are natural or adoptive grandparents or great grandparent of the minor child or children, AND
- ✓ You want to get a court order allowing you visitation with the minor children, AND
- ✓ The minor children have resided in Arizona at least 6 months before you file the petition or a lawyer advised you that there was some other basis that permits you to pursue the case in Arizona at this time, **AND**

***At least* one of the following is true:**

- The parents of minor child(ren) have been divorced for at least 3 months, OR
- One parent has been dead or missing for at least 3 months, OR
- The minor children were born out of wedlock

READ ME: Consulting a lawyer before filing documents with the court may help prevent unexpected results. A list of lawyers you may hire to advise you on handling your own case or to perform specific tasks, as well as a list of court-approved mediators can be found on the Self-Service Center website.

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Person Filing: _____
Address (if not protected): _____
City, State, Zip Code: _____
Telephone: _____
Email Address: _____
ATLAS Number: _____
Lawyer's Bar Number: _____

FOR CLERK'S USE ONLY

Representing ☐ Self, without a Lawyer or ☐ Attorney for ☐ Petitioner OR ☐ Respondent

SUPERIOR COURT OF ARIZONA IN GRAHAM COUNTY

_____
Petitioner

_____
Respondent

Case No. _____

ATLAS No. _____

FAMILY COURT / SENSITIVE DATA COVERSHEET WITH CHILDREN
(CONFIDENTIAL RECORD)

Fill out. File with Clerk of Court. Social Security Numbers should appear on this form only and should be omitted from other court forms. Access Confidential pursuant to ARFLP 43(G)(1).

A. Personal Information:	**Petitioner**	**Respondent**
Name		
Gender	☐ **Male or** ☐ **Female**	☐ **Male or** ☐ **Female**
Date of Birth (Month/Day/Year)		
Social Security Number		

WARNING: DO NOT INCLUDE MAILING ADDRESS ON THIS FORM IF REQUESTING ADDRESS PROTECTION

Mailing Address		
City, State, Zip Code		
Contact Phone		
Email Address		
Current Employer Name		
Employer Address		
Employer City, State, Zip Code		
Employer Telephone Number		
Employer Fax Number		

B. Child(ren) Information:

Child Name	Gender	Child Social Security Number	Child Date of Birth

C. Type of Case being filed - Check only one category.
Check only if no other category applies

Interpreter Needed: ☐ **Yes** ☐ **No**

☐	**Dissolution (Divorce)**	☐	**Paternity**	**If yes, what language?**
☐	**Legal Separation**	☐	***Legal Decision Maker (Custody)/Visitation**	
☐	**Annulment**	☐	***Child Support**	
☐	**Order of Protection**	☐	**Other**	

DO NOT COPY OR FILE THIS DOCUMENT. DO NOT SERVE THIS DOCUMENT TO THE OTHER PARTY.

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SDS

DRSDS10f-C-041513
version 06/25/2015-b4

SELF-SERVICE CENTER

INSTRUCTIONS: HOW TO FILL OUT ALL FORMS TO REQUEST COURT ORDER FOR GRANDPARENT VISITATION

Do not copy or file this page

WHEN TO USE THIS FORM:

Use this form if you are natural or adoptive grandparent(s) or great grandparent(s) who want to get a court order for visitation.

When filling out any court forms, please type or print with black ink only!

FAMILY COURT / SENSITIVE DATA COVER SHEET:

Print or type in black ink. Write in the information requested about the petitioner, the respondent, and any children under the age of 18.

DO NOT INCLUDE MAILING ADDRESS ON THIS FORM IF REQUESTING ADDRESS PROTECTION.

Case Type: Check only one box that matches the legal procedure for which you are filing the documents in this packet.

Interpreter: Check “yes” or “no” to indicate whether an interpreter is needed. If “yes”, write in what language(s).

SUMMONS:

Fill in the following information where requested: Your name; street address (if not protected); city, state and ZIP; telephone number; ATLAS NUMBER; name of Petitioner (your name); and name of Respondent (the opposing party's name). There will be **an ATLAS number ONLY if one of the parents receive or have received AFDC or other public benefits for the children for whom you want to establish visitation.**

PETITION:

A. In the top left corner of the first page, fill out the following: YOUR name; address (if not protected); city, state and ZIP code; telephone number.

B. Fill in YOUR name in the space that says "Name of Petitioner." If more than one person is the grandparent who wants visitation, put both names here. Remember, you will be the PETITIONER through the whole case. In the space that says "Name of Respondent," fill in the name of the father, mother, and/or other legal guardian, who will be the RESPONDENT (S) for the rest of your case. Generally you name whoever has custody of the children because this is the person who will have to obey the visitation order.

The Clerk will enter the case number when you file.

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WARNING: IF THE COURT HAS ALREADY MADE AN ORDER FOR DIVORCE OR CHILD CUSTODY OR PATERNITY IN MARICOPA COUNTY, DO NOT GET A NEW CASE NUMBER WHEN FILING YOUR CASE! USE THE EXISTING CASE NUMBER. IF YOU DO NOT KNOW THE EXISTING CASE NUMBER, ASK THE CLERK FOR YOUR EXISTING NUMBER BEFORE YOU FILE YOUR COMPLAINT/PETITION.

Do not copy or file this page

1. **Information about you:** Fill in your name, address (if not protected) and date of birth. This is basic information about YOU, the PETITIONER, and your relationship to the children for whom you want the order.

2. **Information about the mother:** Fill in the information about the mother, including address and date of birth. This is basic information about the opposing party, the RESPONDENT.

3. **Information about the father:** Fill in the information about the father, including address and date of birth. This is basic information about the opposing party, the RESPONDENT.

4. **Information about the legal guardian (if any):** Fill in the information about any legal guardian for the children, including address and date of birth. This is basic information about the opposing party, the RESPONDENT.

5. **Information about the children:** Fill in information about all the children for whom you want this order. The same persons should be the custodial adult for all the children for whom you want this order. If the children have different adults who have custody, name all the adults with custody as respondents in the caption, and complete all the information about them in numbers 2, 3, and/or 4 above.

6. **Legal Reasons you should have visitation:** under the law, grandparents can only have visitation orders in certain cases. Read all the choices and decide which one applies to you. Then complete all the information about the choice you selected. If your situation does not fit one of the choices, do not file the Petition. You can ask a lawyer for help, to see if there is some other legal ground upon which you can ask for visitation.

7. **Relationship with Children:** explain here what our relationship with the children has been for the past 6 months, and why it is best for the children to have visitation with you.

8. **Your visitation plan:** Explain here specifically what visitation arrangements you think are best for the children.

9. **Other information about the children:** If you are aware of court cases about the children, you need to tell the court that. Attach a copy of the orders about custody, visitation, or child support to the petition, unless the orders are from the Superior Court in Maricopa County.

10. **More information about children:** Fill out where the children from this action have been living **for the past 5 years;** if any children are under age 5, simply put information since their birth. Write each child's name; the address where the child lived; what dates the child lived at each address; who the child lived with; and the relationship of that person to the child. While you may not remember exact dates when you moved from one location to another, fill this information out as completely as possible.

11. **Other cases about the children:** You must tell the Court if there are prior cases involving your minor child(ren) that don't involve custody or visitation, e.g. personal injury cases involving the child(ren). If there are no other cases, mark the first box and GO ON. If there is another case, mark the second box and give as much information as possible. This information could affect you or your children's rights in this case.

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12. **Other custody, visitation, support cases about these children:** The Court **MUST** know if there have been other cases involving custody, visitation or child support of the children of this case. If there are no other custody or visitation cases, or you don't know of any, mark the second box and GO ON. If you have been involved in any way with this type of Court case, mark the first box and give the information where requested. Tell the Court what happened and what is going on now in the other case(s).

13. **Custody rights of others as to these children:** If you do not know of another person OTHER THAN THE OPPOSING PARTY who is claiming custody or visitation rights to any of the children, mark the first box and GO ON. If you do know of such a person, put the information here, including the child's name and the person who believes they have a custody or visitation claim.

14. **Proper location for this court case:** the grandparents, parents/custodian, or children must live in Graham County for this to be a proper county for you to pursue your court case.

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REQUESTS MADE TO THE COURT:

1. FOR COURT ORDER FOR GRANDPARENT VISITATION

2. OTHER ORDERS THE COURT DEEMS JUST AND FAIR

AFFIRMATION AND SIGNATURE(S) OF PETITIONER(S):

By signing this form you are telling the court that everything contained in the Petition for Grandparent Visitation is true, under penalty of perjury.

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SELF-SERVICE CENTER

PROCEDURES: WHAT TO DO AFTER COMPLETING ALL FORMS TO GET A COURT ORDER FOR GRANDPARENT VISITATION

STEP 1:

Complete the "Family Court / Sensitive Data Cover Sheet".
(No copies needed.)

Make 3 copies (or more*) of the following documents after you have filled them out.

- *"Summons"*
- *"Petition to Establish Grandparent Visitation"*

STEP 2:

SEPARATE YOUR DOCUMENTS INTO ONE SET of ORIGINALS and SETS of COPIES FOR YOURSELF AND ONE SET FOR EACH PERSON (OR AGENCY) ENTITLED TO RECEIVE NOTICE :

SET 1 - ORIGINALS FOR CLERK OF COURT: • ***"Family Court /Sensitive Data Cover Sheet"*** • ***"Summons"*** • ***"Petition for Grandparent Visitation"***	**SET 2 – COPIES FOR YOU:** • ***"Summons"*** • ***"Petition for Grandparent Visitation"***
SET 3 – COPIES FOR MOTHER*: *if living and parental rights have not been terminated *by court order* • ***"Summons"*** • ***"Petition for Grandparent Visitation"***	**SET 4 - COPIES FOR father*:** *if living and parental rights have not been terminated *by court order* • ***"Summons"*** • ***"Petition for Grandparent Visitation"***
SET 5 – *if needed* – for LEGAL GUARDIAN** • ***"Summons" • ***"Petition for Grandparent Visitation"***	***SET 6** (or more, *if needed)* **– for Other Person(s) or Agency having possession of or claiming a right to Custody of the children:** • ***"Summons"*** • ***"Petition for Grandparent Visitation"***

STEP 3: FILE THE PAPERS AT THE COURT:

GO TO THE CLERK OF THE COURT'S FILING COUNTER: Hand over the originals and all three sets of copies to the Clerk at the filing counter ***and pay the filing fee***. The Clerk will keep the originals, stamp the extra copies to show that these are copies of papers you have filed with the Court, *and return the stamped copies to you.* These stamped sets of copies are now called "conformed" copies. The Court is open from 8 a.m. to 5 p.m., Monday through Friday.

You may file your papers at any of the following Superior Court locations:

Graham County Clerk of the Court
800 W. Main Street
Safford, Az 85546

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FEES: A list of current fees is available from the Self Service Center and from the Clerk of Court's website.

If you cannot afford the filing fee and/or the fee for having the papers served by the Sheriff or by publication, you may request a deferral (payment plan) when you file your papers with the Clerk of the Court. Deferral Applications are available at no charge from the Self-Service Center.

STEP 4:

SERVE THE PAPERS ON THE OTHER PARTY(IES). The papers may be delivered by the Sheriff's Department, a licensed private process server, commercial delivery service or mail by which you can obtain an original or copy of the other party's signature confirming delivery or by "***Acceptance of Service***" as described in the "SERVICE" packet available from the Self-Service Center or the internet.

Scroll down and choose the appropriate Service Packet that meets your needs.

NOTE: If both parents are living and unless an order has been signed by a Judge *specifically stating* that the parental rights of one of the parents have been "**permanently severed**", you must serve the papers on **both** parents. This includes your own son or daughter, even if he or she agrees with your request.

STEP 5:

WAIT. Depending on HOW and WHERE you served the papers on the other party or parties (in- state, out of state, by publication, etc.), he or she has a certain number of days to file a RESPONSE to tell the Court that he or she disagrees with your facts, or objects to the Orders you want the Court to make. You should receive a copy of the Response and a notice about when and where you must appear for any Court procedure or hearing.

If *NO RESPONSE IS FILED*, you must file papers to tell the Court that ALL other parties DEFAULTED - that is, the other parties either agree with your request *or at least did not file papers to disagree*, so the Court should move forward and give you a Court Order.

See the Self-Service Center's "DEFAULT WITH CHILDREN" packet and follow the timetable and procedures there to apply for your default court order.

IF A RESPONSE *IS* FILED, you should receive a copy from the other party(ies) and the Court will notify all parties of a hearing or conference date.

STEP 6:

ATTEND THE HEARING. You will need packet #4, **"The Court Order"** for the hearing.

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Person Filing: _____
Address (if not protected):_____
City, State, Zip Code:_____
Telephone:_____
Email Address:_____
ATLAS Number: _____
Lawyer's Bar Number:_____

For Clerk's Use Only

Representing ☐ **Self, without a Lawyer or** ☐ **Attorney for** ☐ **Petitioner OR** ☐ **Respondent**

SUPERIOR COURT OF ARIZONA IN GRAHAM COUNTY

_____
Name of Petitioner

Case No.: _____

SUMMONS

And

_____
Name of Respondent

WARNING: This is an official document from the court that affects your rights. Read this carefully. If you do not understand it, contact a lawyer for help.

FROM THE STATE OF ARIZONA TO: _____
Name of Respondent

1. **A lawsuit has been filed against you. A copy of the lawsuit and other court papers are served on you with this *"Summons".***
2. **If you do not want a judgment or order taken against you without your input, you must file an *"Answer"* or a *"Response"* in writing with the court, and pay the filing fee. If you do not file an *"Answer"* or *"Response"* the other party may be given the relief requested in his/her Petition or Complaint. To file your *"Answer"* or *"Response"* take, or send, the *"Answer"* or *"Response"* to the:**

Graham County Clerk of the Court
800 W. Main Street
Safford, Az 85546

Mail a copy of your *"Response"* or *"Answer"* to the other party at the address listed on the top of this Summons.

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3. **If this *"Summons"* and the other court papers were served on you by a registered process server or the Sheriff, within the State of Arizona, your *"Response"* or *"Answer"* must be filed within TWENTY (20) CALENDAR DAYS from the date you were served, not counting the day you were served. If this *"Summons"* and the other papers were served on you by a registered process server or the Sheriff outside the State of Arizona, your Response must be filed within THIRTY (30) CALENDAR DAYS from the date you were served, not counting the day you were served. Service by a registered process server or the Sheriff is complete when made. Service by Publication is complete thirty (30) days after the date of the first publication.**

4. **You can get a copy of the court papers filed in this case from the Petitioner at the address listed at the top of the preceding page, from the Clerk of the Superior Court's Customer Service Center at:**

Graham County Clerk of the Court
800 W. Main Street
Safford, Az 85546

5 **If this is an action for dissolution (divorce), legal separation or annulment, either or both spouses may file a *Petition for Conciliation* for the purpose of determining whether there is any mutual interest in preserving the marriage or for Mediation to attempt to settle disputes concerning legal decision-making (custody) and parenting time issues regarding minor children.**

6. **Requests for reasonable accommodation for persons with disabilities must be made to the office of the judge or commissioner assigned to the case, at least ten (10) judicial days before your scheduled court date.**

7. **Requests for an interpreter for persons with limited English proficiency must be made to the office of the judge or commissioner assigned to the case at least ten (10) judicial days in advance of your scheduled court date.**

SIGNED AND SEALED this date _____

DARLEE MAYLEN, CLERK OF COURT

By_____
Deputy Clerk

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Person Filing: _____
Address (if not protected): _____
City, State, Zip Code: _____
Telephone: _____
Email Address: _____
ATLAS Number: _____
Lawyer's Bar Number: _____

For Clerk's Use Only

Representing ☐ Self, without a Lawyer or ☐ Attorney for ☐ Petitioner OR ☐ Respondent

SUPERIOR COURT OF ARIZONA
IN GRAHAM COUNTY

Regarding the Matter of:

Case Number _____

_____
Name of Grandparent(s) Requesting Visitation

_____
Name of *Other* Grandparent (if applicable)

_____
Name of Mother ☐ DECEASED (if applicable)

_____
Name of Father ☐ DECEASED (if applicable)

PETITION FOR GRANDPARENT VISITATION
A.R.S § 25-409

_____
Name of Legal Guardian, if any

☐ **There is an existing Family Court case in this county between the mother and the father of the children for whom I want an order of visitation, and I have listed that case number above as required by Arizona law (A.R.S. § 25-409(E)).**

General Information:

1. Information about me (or us), the Grandparent(s):

Name(s): _____

Address: _____

County of residence: _____

Occupation(s): _____

My / Our relationship to minor child(ren) for whom I want the VISITATION order:

☐ Grandparent on Mother's side ☐ Great Grandparent on Mother's side

☐ Grandparent on Father's side ☐ Great Grandparent on Father's side

☐ Other: (explain):

_____

_____

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2. Information about the mother of minor child(ren)

Name:_____
Address:_____
County of residence:_____
Date of Birth:_____
Occupation:_____

3. Information about the father of minor child(ren)

Name:_____
Address:_____
County of residence:_____
Date of Birth:_____
Occupation:_____

4. Information about other legal guardians of minor child(ren), if any:

Name:_____
Address:_____
County of residence:_____
Date of Birth:_____
Occupation:_____

5. Information about minor children for whom I / We want the visitation order:

Name:_____
Birthdate:_____
Current Address:_____
_____
County of residence:_____
Father: _____
Mother:_____

Name: _____
Birthdate:_____
Current Address: _____
_____
County of residence: _____
Father:_____
Mother:_____

Name: _____
Birthdate: _____
Current Address: _____
_____
County of residence: _____
Father: _____
Mother: _____

Name: _____
Birthdate:_____
Current Address: _____
_____
County of residence: _____
Father: _____
Mother: _____

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6. **Legal Reason why I/We have a right to request a visitation order:** (check whichever applies)

A. ☐ Parents of minor child(ren) have been divorced for at least 3 months:

Date of Divorce: _____ Court case number: _____

Name of Court: _____

Court Address/Location: _____

B. ☐ Child(ren) were born out of wedlock (List names of children born out of wedlock) :

_____

_____

C. ☐ Mother OR ☐ Father of minor child(ren) has been dead for at least 3 months:

Date of Death:_____

D. ☐ Mother OR ☐ Father of minor child(ren) has been missing for at least 3 months:

Date parent discovered to be missing:_____

Date reported to Law enforcement agency:_____

Name, location of agency:_____

E. If you are asking for visitation rights as PATERNAL grandparent(s), that is, you are the parent(s) or grandparent(s) of the *father* of the minor children, complete the information below: **PATERNITY WAS ESTABLISHED BY**: **(check one box)**

☐ A Court Order for Paternity***** from *this* county or previously *transferred to* this county. **(A.R.S. § 25-502(c))**

☐ Filing an Acknowledgment of Paternity through the Hospital Paternity Program or other means allowed by law on or after July 21, 1996 **(A.R.S. § 25-812-814, or § 36-334).**

☐ Child Support Order*****: An Order for Child Support has been issued which names my/our son/grandson as the father. (Supply information about the Order as requested below.)

☐ Marriage: Parties were legally married when child(ren) was (were) born, conceived or adopted.

*****Note: Documents mentioned above or giving proof of the above should already be in the case file or attached.

7. Statements about your relationship with minor child(ren) for the last 6 months, and why you think it is best for the child(ren) that you have visitation with them:

_____

_____

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8. Your plan for visitation for the good of minor child(ren): (be specific)

_____

_____

TRANSPORTATION will be provided by (name):_____ as follows: (explain)

_____

_____

During WEEKENDS: (explain specifically)

_____

_____

During the SUMMER MONTHS OR SCHOOL BREAKS: (explain specifically)

_____

_____

FOR HOLIDAYS AND BIRTHDAYS: (explain specifically)

_____

_____

FOR TELEPHONE CALLS: (explain specifically)

_____

_____

OTHER: (explain specifically)

_____

_____

_____

OTHER INFORMATION ABOUT THE CHILD(REN):

9. **Where the child(ren) who is/are under 18 years of age have lived for the last 5 years.** (Attach extra pages if necessary.)

Child's Name:_____ Dates: From _____To_____
Lived with:_____ Relationship to child:_____
Street address: _____ City, State_____

Child's Name:_____ Dates: From _____To_____
Lived with:_____ Relationship to child:_____
Street address: _____ City, State_____

Child's Name:_____ Dates: From _____To_____
Lived with:_____ Relationship to child:_____
Street address: _____ City, State_____

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10. Court cases NOT involving legal decision making, physical custody, parenting time or visitation related to the child(ren) under 18 years old. (check one box)

☐ I **HAVE** ☐ I **HAVE NOT** been a party or a witness in court in this state or in any other state regarding issues OTHER THAN legal decision making, custody, parenting time or visitation of any of the child(ren) named above (If so, explain below, using extra pages if necessary. IF NOT, GO ON.)

Name of each child:_____
Court state:_____ Court location:_____
Court case number:_____ Current status:_____
How the child is involved:_____
Summary of any Court Order:

_____

_____

11. Court cases INVOLVING legal decision making, physical custody, parenting time or visitation cases related to child(ren) under 18 years old. (check one box)

☐ I **DO** HAVE ☐ I **DO NOT** HAVE information about a legal decision making, custody, parenting time or visitation court case relating to any of the children named above that is pending in this state or in any other state (If so, explain below, using extra pages if necessary. IF NOT, GO ON).

Name of each child:_____
Court state:_____ Court location:_____
Court case number:_____ Current status:_____
How the child is involved:_____
Summary of any Court Order:

_____

_____

12. Legal decision making, custody, parenting time or visitation claims of any person. (check one box)

☐ I **DO** KNOW ☐ I **DO NOT** KNOW a person other than the Petitioner or the Respondent with whom the children are now living or who claims legal decision making authority, custody, parenting time or visitation rights to any of the children named above.
If so, explain below. Use extra pages if necessary. IF NOT, GO ON).
Name of each child:_____
Name of person with the claim:_____
Address of person with the claim:_____
Nature of the claim:_____

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Other Statements to the Court:

_____

_____

_____

13. **VENUE:** This is the proper court to bring this lawsuit under Arizona law because it is the county of residence of the petitioner, or the respondent, or the child(ren).

REQUEST MADE TO COURT:

(1) For court order for visitation as described above, and

(2) For such other orders as this court considers just and fair.

ACKNOWLEDGMENT AND SIGNATURE OF GRANDPARENT(S)

I state to the Court under penalty of perjury that the contents of this document are true and correct.

_____ _____
SIGNATURE **Date**

_____
PRINTED Name

_____ _____
SIGNATURE **Date**

_____
PRINTED Name

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