

STATE OF HAWAI'I FAMILY COURT OF THE FIRST CIRCUIT	MOTION AND DECLARATION TO []AMEND []DISSOLVE []EXTEND THE EXISTING ORDER; NOTICE OF HEARING; CERTIFICATE OF SERVICE	CASE NUMBER FC-DA NO.
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<p>_____, Petitioner,</p> <p style="text-align: center;">vs.</p> <p>_____, Respondent.</p>	<p>This Motion is Submitted By:</p> <p>Name: _____</p> <p>Address: _____</p> <p>_____</p> <p>Telephone Number: _____</p> <p>[]Attorney for []Petitioner []Respondent</p>
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MOTION AND DECLARATION TO []AMEND []DISSOLVE []EXTEND THE EXISTING ORDER

The undersigned moves, pursuant to Section 586-9 of the Hawai'i Revised Statutes, Rules 6(d) and 7(b)(1) of the Hawai'i Family Court Rules, and Rule 7(g) of the Rules of the Circuit Courts for modification of the existing order filed on _____.

Facts supporting this application are as follows: _____

I HEREBY SOLEMNLY AND SINCERELY DECLARE UNDER PENALTY OF PERJURY THAT THE STATEMENTS MADE HEREIN ARE TRUE AND CORRECT TO THE BEST OF MY BELIEF, INFORMATION, AND KNOWLEDGE.

DATED: Honolulu, Hawai'i, _____.

Signature: _____

Print Name: _____

[]Attorney for []Petitioner []Respondent

FOR COURT USE ONLY

STATE OF HAWAI'I FAMILY COURT OF THE FIRST CIRCUIT	NOTICE OF HEARING	CASE NUMBER FC-DA NO.
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<p>_____ , Petitioner,</p> <p style="text-align: center;">vs.</p> <p>_____ , Respondent.</p>	
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TO: (Name) _____
 (Address) _____

You are hereby notified that the attached motion will be heard before the Presiding Judge in the Family Court, First Circuit, Third Floor of the Kapolei Court Complex at 4675 Kapolei Parkway, Kapolei, Hawai'i, on _____ at []8:00 A.M. []1:00 P.M. or as soon thereafter as the case may be heard.

You must appear at the hearing with or without an attorney. If you fail to appear at the hearing, the relief requested in the attached motion may be granted without further notice to you.

If you are incarcerated on Oahu on the date of your court hearing, you will not automatically be transported to the Family Court. You must either: 1) make your own arrangements with your secured facility; or 2) send a written request entitled, "Ex Parte Request for Transport of Incarcerated Party," which states the Petitioner's and Respondent's full names, the case number, the hearing date and time, the place of your incarceration and your name to the SPECIAL DIVISION CALENDAR CLERK, FAMILY COURT, Kapolei Court Complex, 4675 Kapolei Parkway, Kapolei, Hawai'i 96707-3272. The written request should be submitted in sufficient time for the Court to respond to your request.

DATED: Honolulu, Hawai'i, _____.

Clerk of the Above-Entitled Court



In accordance with the Americans with Disabilities Act, and other applicable state and federal laws, if you require a reasonable accommodation for a disability, please contact the Disability Accommodations Coordinator at the First Judicial Circuit, Chief Court Administrator's Office 954-8200, FAX 954-8308, or TTY 539-4853, at least ten (10) working days prior to your hearing or appointment date.

CERTIFICATE OF SERVICE

I hereby certify that a copy of the foregoing document was duly mailed, first class, postage prepaid on the date noted below to the following individual addressed as follows:

Name: _____

Address: _____

City, State, Zip Code: _____

DATED: Honolulu, Hawai'i, _____.

Signature: _____

Print Name: _____

Petitioner Respondent