

<b>IN THE DISTRICT COURT OF THE FIFTH CIRCUIT LIHU'E DIVISION STATE OF HAWAI'I</b>	
Plaintiff(s)	<b>Reserved for Court Use</b>
Defendant(s)	Civil No.  Filing Party/Attorney Name, Attorney Number, Firm Name (if applicable), Address, Telephone and Fax Numbers

PLAINTIFF'S /  DEFENDANT'S EX PARTE MOTION TO

\_\_\_\_\_

Filing Party requests that this motion be granted for the reasons stated in the Declaration below and made pursuant to:

- Rules of the District Courts of the State of Hawai'i, Rule \_\_\_\_\_ ;
- District Courts Rule of Civil Procedure, Rule \_\_\_\_\_ ;
- Rules of the Small Claims Division of the District Court, Rule \_\_\_\_\_ ;
- Hawai'i Revised Statutes § \_\_\_\_\_ .

**DECLARATION**

**I DECLARE UNDER PENALTY OF PERJURY THAT THE FOLLOWING IS TRUE AND CORRECT.**

1. I am  the Moving Party or  associated with the Moving Party as \_\_\_\_\_ ;
2. The following are facts why the Motion should be granted (as additional pages, if necessary):

Date:	Signature of Declarant:  Print/Type Name(s):
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In accordance with the **Americans with Disabilities Act**, and other applicable State and Federal laws, if you require an accommodation for your disability when working with a court program, service, or activity please contact the Deputy Chief Court Administrator's Office at PHONE NO. (808) 482-2347, FAX (808) 482-2509, OR TTY (808) 482-2533 **at least (10) working days in advance** of your hearing, or appointment date.

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**COURT ORDER**

This motion is:  **GRANTED**     **DENIED**     **PARTIALLY GRANTED as follows:**

Date:

Judge: