**Superior Court of Washington, County of**

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| In the Guardianship/Conservatorship of: Respondent | **Case No**. **Petition for Emergency Guardianship of Adult and/or Conservatorship of an Adult/Minor**(PTAPE) |

**Petition for Emergency Guardianship of an Adult and/or Conservatorship of an Adult/ Minor**

***Use this form*** *to petition for emergency guardianship for an adult or conservatorship for an adult or minor.*

I ask the court to appoint an emergency guardian and/or conservator for the Respondent. The court should consider the following information.

**1. Information about the Respondent:** *(complete as much as possible)*

Name:

Age:

Phone number:

Email address:

Principal Residence:

Street Address *(if different)*:

[ ] The Respondent has the following needs for an interpreter, translator, or other form of support to communicate with the court or understand court proceedings:

**2. Information about the Petitioner.** I am a person who is interested in the Respondent’s welfare.

Name:

Phone Number:

Principal Residence:

Street Address *(if different)*:

Email address:

Relationship to Respondent

The Petitioner/s:

[ ] do **not** have a lawyer.

[ ] are represented by *(lawyer's name):*

Lawyer's address:

**3. Jurisdiction**

[ ] **Home State Jurisdiction** – The Respondent has lived in Washington for at least 6 months prior to this case being filed.

[ ] **Home State Jurisdiction** – The Respondent does not live in Washington right now but Washington was the Respondent’s home state sometime in the 6 months prior to this case being filed.

[ ] **Significant Connection Jurisdiction** – Washington is not the Respondent’s home state but the Respondent does have a significant connection to the state other than physical presence. Describe the Respondent’s significant connection:

[ ] **Special Emergency Jurisdiction** – Washington is not the Respondent’s home state but a court order is needed to protect the Respondent’s health, safety, or welfare from substantial harm and no other person has authority and is willing to act.

**4. Venue**

[ ] The Respondent resides in County.

[ ] The Respondent has been admitted by court order to an institution in
 County.

[ ] The Respondent owns property in County.

[ ] The Respondent owns property in County but does not reside in Washington.

**5. Names and addresses of people important to the Respondent**

I have included the names and addresses of people important to the Respondent in *Appendix A.* *Appendix A* is made part of this *Petition* (incorporated by reference).

**6. Why does the Respondent need an emergency guardian?**

[ ] Does not apply.

[ ] I intend to seek a long term guardianship for the Respondent too.

The Respondent needs an emergency guardian because:

1. The Respondent lacks the ability to meet the essential requirements for physical health, safety, or self-care because the Respondent is unable to receive and evaluate information or make or communicate decisions, even with appropriate supportive services, technological assistance, or supported decision making; **and**
2. The Respondent's identified needs cannot be met by a protective arrangement instead of guardianship or other less restrictive alternative.

Describe why the Respondent needs an emergency guardianship including the nature and extent of the Respondent’s emergency situation and the emergency need that has arisen from the emergency situation:

 Describe what substantial and irreparable harm to the Respondent's health, safety, welfare, or rights is likely to be prevented by the appointment of an emergency guardian:

Describe what is currently in place or has been considered to meet Respondent’s emergency needs (*for example, supported decision-making, technological assistance, Durable Power of Attorney for healthcare or for finances, or representative payee to manage government benefits.*):

No other person has authority and willingness to act to meet the Respondent’s emergency need because:

If no alternative has been considered or tried, state why not.

**7. Why does the Respondent need an emergency conservator?**

[ ] Does not apply.

[ ] I also intend to seek a long term conservatorship for the Respondent.

The Respondent needs a conservator because:

1. the Respondent is unable to manage property and financial affairs because of a limitation in the ability to receive and evaluate information or make or communicate decisions even with the use of supportive services, technological assistance, and supported decision making, or the Respondent is missing, detained, or unable to return to the United States, **and**
2. appointment is necessary to avoid harm to the adult or significant dissipation of the property of the adult, or to obtain or provide funds or other property needed for the support, care, education, health, or welfare of the Respondent, or of an individual who is entitled to the Respondent's support, and protection is necessary or desirable to provide funds or other property for that purpose.

Describe why the Respondent needs an emergency conservatorship:

Describe what substantial and irreparable harm to the Respondent's property or financial interest is likely to be prevented by the appointment of an emergency conservator:

Describe what is currently in place to meet Respondent’s needs (*for example, supported decision-making, technological assistance, Durable Power of Attorney for finances, or representative payee to manage government benefits.*):

If no alternative has been considered or tried to meet the Respondent’s emergency needs, state why not:

**8. Scope of Emergency Guardianship or Conservatorship**

I request the following powers to meet the Respondent’s specific emergency needs:

[ ] limited guardianship. The guardian should have these powers:

[ ] limited conservatorship. The conservator should have these powers:

[ ] full guardianship. A full guardianship is needed instead of a limited guardianship because:

[ ] full conservatorship. A full conservatorship is needed instead of a limited conservatorship because:

[ ] the court should limit the Durable Power of Attorney as follows:

**9. Proposed Guardian or Conservator**

I ask the court to appoint *(name/s):* [ ] guardian and conservator [ ] guardian [ ] conservator of the Respondent because:

Proposed guardian/conservator/s’ address:

Phone number:

Email:

[ ] The proposed guardian and/or conservator is a lay person requiring *Lay Guardian Training* and [ ] will complete the training by the hearing on this *Petition* or
[ ] has completed the training.

The Respondent [ ] did [ ] did not nominate a guardian or conservator in a power of attorney or other document. The nominated guardian or conservator, if any, is
(*name*) .

**10. Respondent’s Financial Information**

The approximate value and the description of the property owned by the Respondent are:

**Assets**:

1. Real property: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Stocks, mutual funds, & bonds: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Mortgages and notes: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Bank accounts: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Other property: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Description of other property:

**The total approximate value of assets is**: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The Respondent receives compensation, pension, insurance, and allowances as follows:

**Income**:

1. Social Security benefits: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ per month
2. Veterans’ benefits : $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ per month
3. Retirement income: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ per month
4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ per month
5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ per month
6. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ per month

**The total approximate income is**: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ per month

**11. Waiver of Filing Fee**

[ ] Does not apply. This is a request to extend an emergency appointment.

[ ] I do not ask the court to waive the filing fee.

[ ] I ask the court to waive the filing fee because:

[ ] The Respondent has total assets that value less than $3,000.

[ ] Payment of the filing fee would impose a hardship on the Respondent because:

**12. Existing or Pending Guardianships, Conservatorships, or Other Court Cases**

[ ] There **is no** guardianship or conservatorship action in this state or another for the Respondent.

[ ] There **is** a guardianship or conservatorship action in this state or another for the Respondent:

Where is the case filed? (State and County)

Case number if known:

Was a guardian or conservator appointed? [ ] yes [ ] no

If yes:

Name of guardian or conservator:

Date of appointment:

[ ] I request that the clerk consolidate this action with the existing guardianship or conservatorship case. Case Number: .

[ ] Other court cases, like protection order cases, limiting contact between the Respondent and other persons include:

**13. Nomination of Court Visitor**

[ ] Does not apply. This is a request to extend an emergency appointment.

[ ] I **am not** proposing that a specific individual act as court visitor (Visitor). The person appointed should be the next person on the list.

[ ] I **am** proposing that a specific individual, (*name*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ act as visitor.

The proposed visitor [ ] does [ ] does not have knowledge of or a relationship to any of the parties. Explain:

I nominate this person as visitor because:

[ ] The visitor should be paid by the county because the Respondent’s assets are less than $3,000.

[ ] The visitor should be paid at private expense because the Respondent’s assets are over $3,000.

[ ] This is a petition for an emergency conservatorship for a minor and no visitor is requested.

**14. Nomination of Lawyer**

[ ] Does not apply this is a request to extend emergency appointment.

[ ] This is a petition for an emergency conservatorship for a minor and no lawyer is requested.

[ ] I **am not** proposing that a specific individual act as a Lawyer for the Respondent. The court should appoint a Lawyer to represent the Respondent.

[ ] I **am** proposing that a specific individual, (*name*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ act as Lawyer for the Respondent. I proposed this Lawyer because

[ ] The lawyer should be paid by the county because the Respondent’s assets are less than $3,000.

[ ] The lawyer should be paid at private expense because the Respondent’s assets are over $3,000.

**15. Change Respondent’s Residence**

I ask to change the Respondent’s residence to .

The Respondent [ ] has [ ] has not expressed a residence preference.

The proposed dwelling meets the Respondent’s needs as follows:

 .

**16. Immediate Order for an Emergency Guardianship**

[ ] Does not apply.

[ ] I am asking the court for an *Immediate Emergency Guardianship* *Order* to issue letters of guardianship for the Respondent. The individual named in **9** will serve as guardian.

Without an *Immediate Emergency Guardianship* *Order*, the Respondent’s health, safety, or welfare will be substantially and irreparably harmed prior to a hearing. *(Explain how the Respondent could be harmed beyond repair):*

**Petitioner fills out below:**

I declare under penalty of perjury under the laws of the State of Washington that the facts I have provided on this form (including any attachments) are true.

[ ] I have attached *(#):* pages.

Signed at *(city and state):* Date:

Petitioner signs here Print name

Presented by:

Petitioner’s lawyer signs here Print name and WSBA No. Date

Appendix A: People Important to the Respondent

Below is the name, relationship, and current address of people important to the Respondent.

This list includes the Respondent’s:

* spouse, domestic partner, or an adult whom the Respondent has shared household responsibilities with for more than 6 months in the last year;
* adult children. If there are no adult children, the Respondent’s parents and adult siblings are listed. If the Respondent has none of the above, the adult nearest in kinship to the Respondent is listed;
* adult step-children that the Respondent parented when they were Minors and have continued to have a relationship with the Respondent in the last 2 years;
* adult caregiver;
* attorney;
* any representative payee;
* guardian or conservator;
* trustee or custodian of a trust or custodianship of which the Respondent is a beneficiary;
* fiduciary for the Respondent appointed by the Department of Veterans Affairs;
* agent designated in the Respondent’s Power of Attorney;
* nomination of a person to serve as guardian or conservator;
* parent, spouse, or domestic partner’s nomination as a guardian or conservator in a will or other signed record; and/or
* assisted decision maker, meaning a person known to have routinely assisted the Respondent with decision-making during the 6 months immediately before the filing of the emergency petition.

Name:

Relationship:

Address:

Name:

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