**Superior Court of Washington, County of**

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| --- | --- |
| In the Guardianship/Conservatorship of:  Respondent | **No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Motion to Terminate or Change/Modify Guardianship/Conservatorship**  **(PTMD)** |

***Use this form*** *together with a Notice of Hearing, GDN ALL 005.*

**Motion to Terminate or Change/Modify   
Guardianship/Conservatorship**

1. Who is asking to terminate or change/modify the guardianship or conservatorship?

Name: . I am the:

[ ] guardian/conservator.

[ ] individual subject to guardianship and/or conservatorship.

[ ] person interested in the welfare of individual subject to guardianship and/or conservatorship (*describe relationship*):

2. Notice to Others

I will provide copies of this *Motion* and a *Notice of Hearing* on anyone else who is a:

* Respondent,
* guardian/conservator, or
* any interested party listed in the *Guardianship/Conservatorship Order* (if any).

3. Request

I ask the court to (*check all that apply*)*:*

[ ] **Terminate** (end) a guardianship and/or conservatorship because:

[ ] the Respondent died on (*date*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

[ ] the basis for appointment no longer exists (the Respondent has regained capacity).

[ ] termination is in the Respondent’s best interest.

[ ] other good cause.

[ ] Allowme to **resign** as guardian/conservator.

[ ] **Remove the Guardian/Conservator** and **Replace** with (*name*):

A successor guardian/conservator has not been named. I ask the court to appoint a successor now pursuant to its authority under RCW 11.130.055.

[ ] **Change/Modify** the terms of the guardianship and/or conservatorship orderas follows (*specify change you want the court to make*)*:*

4. Reasons for Request

I ask the court to consider the following information (*attach relevant documents or extra pages as needed*):

5. Court Visitor

[ ] Does not apply.

[ ] I ask the court to appoint a Court Visitor to investigate and report on the reasons for the request and the Respondent’s best interests or for other good cause.

**6. Lawyer**

[ ] I ask the court to appoint a lawyer to represent the Respondent.

7. Other Requests (if any):

**Person filing this Motion 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:

*Person filing Motion signs here Print name*

**Lawyer (if any) for person filing this Motion fills out below:**

*Lawyer signs here Print name and WSBA No. Date*