

**Superior Court of Washington, County of \_\_\_\_\_**  
**华盛顿州 县高等法院**

In the Guardianship/Conservatorship of:  
关于以下个人的监护/保护:

\_\_\_\_\_,  
Individual  
个人

No. \_\_\_\_\_  
编号

**Petition to Transfer Guardianship/  
Conservatorship from Washington  
State to the Receiving State**  
**将监护权/保护权从华盛顿州转移到接收州  
的申请**

(PT)  
(PT)

*Instructions for use: Use this form to transfer this case from the state of Washington to another state. Use form GDN T 711 to change the location of this case (venue) from one County to another within Washington.*

*使用说明: 使用此表格将此案件从华盛顿州转移到另一个州。使用GDN T 711表格将此案件的地  
点(审判地)从华盛顿州内的一个县更改为另一个县。*

**Petition to Transfer Guardianship/Conservatorship from Washington  
State to Another (the Receiving) State**  
**将监护权/保护权从华盛顿州转移到另一个(接收)州的申请**

I am the guardian/conservator for the Individual Subject to Guardianship/Conservatorship (Individual). I am petitioning the Washington court to transfer the guardianship/conservatorship to (county and state) \_\_\_\_\_ under RCW 11.90.400.

*我是受监护/保护的个体(个人)的监护人/保护人。我正在请求华盛顿法院将监护权/保护权转移至(县和州) 根据RCW 11.90.400。*

**1. Information about the Guardianship/Conservatorship:**  
**有关监护权/保护权的信息:**

**Name of Guardian/Conservator:** \_\_\_\_\_  
**监护人/保护人姓名:**

**Date of Appointment:** \_\_\_\_\_  
**指定日期:**

Letters of Guardianship/Conservatorship expire on: \_\_\_\_\_  
监护人/保护人授权书到期日期:

Scope: ☐ full ☐ limited guardianship  
范围: ☐ 完全 ☐ 有限监护权

☐ full ☐ limited conservatorship  
完全 ☐ 有限保护权

**2. Reasons to Transfer the Guardianship/Conservatorship (RCW 11.90.400)**  
**转移监护权/保护权的原因(RCW 11.90.400)**

Connections to the other state (check one):  
与其他州的联系 (勾选一项):

☐ The Individual is physically present in or is reasonably expected to move to the other state:  
该个人在另一州实际居住, 或者有合理预期将迁往另一州:

Address: \_\_\_\_\_  
地址:

Date of move: \_\_\_\_\_  
迁居日期:

Explain: \_\_\_\_\_  
请说明:

OR  
或

☐ I am only asking to transfer the conservatorship estate and the Individual has a significant connection to the other state, considering the following factors in RCW 11.90.200(2):  
我仅申请转移保护权财产, 且该个人与另一州有重要联系, 根据 RCW 11.90.200(2), 考虑以下因素:

- (a) The location of the respondent's family and other persons required to be notified of the guardianship or protective proceeding;  
被申请人家人和其他需要通知监护权或保护程序的人员的所在地;
- (b) The length of time the respondent, at any time, was physically present in the state and the duration of any absence;  
被申请人待在本州的时间以及离开的持续时间;
- (c) The location of the respondent's property; and  
被申请人财产所在地; 和
- (d) The extent to which the respondent has ties to the state such as voting registration, state or local tax return filing, vehicle registration, driver's license, social relationship(s), and receipt of services.  
被申请人与州的联系紧密度, 例如投票登记、州或地方纳税申报、车辆登记、驾驶执照、社会关系和接受服务。

Explain: \_\_\_\_\_  
请说明: \_\_\_\_\_

[ ] There are reasonable and sufficient plans for care, services, and/or management of the Individual's property in the other state.

在另一州有合理且充分的照顾、服务和/或个人财产管理计划。

Explain: \_\_\_\_\_  
请说明: \_\_\_\_\_

3. Proper notice was sent to all persons entitled to notice. I have filed a *Declaration of Service*.

已向所有有权获得通知的人员发送适当通知。我已提交送达声明。

4. This court should be satisfied that the guardianship/conservatorship will be accepted by the court in the other state.

本法院应确信另一州的法院将接受该监护权/保护权的转移。

5. **Request for Relief.** I ask the court to:

请求救济。我请求法院:

Issue a provisional order granting this petition to transfer; and

发布临时命令, 批准本次转移申请; 和

After the other state has ruled to accept the transfer, issue a final order confirming the transfer and terminating the Washington state guardianship/conservatorship.

在另一州的法院裁定接受转移后, 颁发最终命令确认转移并终止华盛顿州的监护权/保护权。

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.

本人特此声明, 本人在此表格(包括任何附件)中提供的信息若有不实, 愿依照华盛顿州法律而接受伪证罪处罚。[-] 本人已附上 (#): \_\_\_\_\_ 页。

Signed at (city and state): \_\_\_\_\_ Date: \_\_\_\_\_  
签字地点(城市和州): \_\_\_\_\_ 日期:

►  
Sign here  
请在此处签名

Print name  
请工整填写姓名

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

提交人的律师(如有)填写以下内容:

►  
Lawyer signs here  
律师在此处签名

Print name and WSBA No.  
请工整填写姓名和WSBA编号

Date  
日期