**Superior Court of Washington**

**County of** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| In the Guardianship of:  Incapacitated Person | **No**.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Notice of Substantial Change in Circumstances**  **(NTSCC)**  **RCW 11.92.040(3), RCW 11.92.043(3)**  **Clerk’s action required: para 3.** |

**Note: The guardian must file this form within 30 days of a substantial change in circumstances. The guardian must also inform any person entitled to special notice of proceedings under RCW 11.92.150 and any other person designated by the incapacitated person as soon as possible, but in no case more than five business days, after a substantial change in circumstances listed in RCW 11.92.043.**

The following circumstances have changed for the Incapacitated Person:

1. **Financial** (Examples: a substantial increase or decrease in income or assets)

1. **Physical** (Examples: a substantial change in condition, such as hospitalization, illness, or increase or decrease in mental or physical abilities)

1. **Change of Residence**. The address and/or phone number\* of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name) is as follows:

**4. Protection Orders** (Examples: a court issued a Vulnerable Adult Protection Order)

**5.** **Other** (Examples: illness of the guardian that affects their ability to act)

I declare under penalty of perjury under the laws of Washington State that the statements above are true and correct.

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (city) in \_\_\_\_\_\_\_\_\_\_\_ (state), on \_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date).

Signature Printed Name WSBA or CPG No:

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| --- | --- | --- |
|  |  |  |
| Address |  | City State, Zip Code |
|  |  |  |
|  |  |  |
| \*Telephone/Fax Number |  | Email Address |

\* **Privacy notice:** If you do not want your personal phone number on this public form, you may list your telephone number on a separate form which may be available to parties and the court, as well as its staff and volunteers, but will not be made available to the public. Use Form WPF GDN 03.0100, *Guardianship Confidential Information Form (Telephone Numbers)*, for this purpose.