

Superior Court of Washington, County of _____

In the Guardianship/Conservatorship of:

No. _____

_____,
Individual

**Petition to Change Venue to a Different
County Within Washington State**
(PT)

*Instructions for use: Use this form to change the location of this case from one County **within Washington** to another County **within Washington**. Use form GDN T 701 to transfer this case from the state of Washington to another state.*

Petition to Change Venue

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 a different county in Washington, (county) _____, Washington under RCW 11.130.030.

1. Information about the Guardianship/Conservatorship:

Name of Guardian/Conservator: _____

Date of Appointment: _____

Letters of Guardianship/Conservatorship expire on: _____

Scope: ☐ full ☐ limited guardianship

☐ full ☐ limited conservatorship

2. Reasons to Transfer the Guardianship/Conservatorship to a Different County in Washington (RCW 11.130.030)

Connections to the other county (*check one*):

☐ The Individual or ☐ their property is physically present in or is reasonably expected to move to another county:

Address: _____

Date of move: _____

Explain: _____

[] It is in the interest of justice to move the guardianship/conservatorship proceeding to a different county, explain: _____

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

4. **Costs**

[] I do not ask the court to waive fees and costs.

[] I ask the court to waive the filing, processing, and other fees to change venue, due to the Respondent's limited assets, which total less than \$3,000.00.

5. **Request for Relief.** I ask the court to issue an order granting this petition to transfer.

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: _____



Sign here

Print name

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



Lawyer signs here

Print name and WSBA No.

Date