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**IN THE SUPERIOR COURT OF THE STATE OF WASHINGTON
IN AND FOR THE COUNTY OF PIERCE**

In the Guardianship of:) **Case No.:**
)
) **PETITION FOR ORDER EXTENDING**
) **TIME**
)
) Clerk's code: **(PTEXT)**
_____,)
An Incapacitated Person.)
_____)

COMES NOW the
 Guardian
 Guardian ad Litem, or
 Attorney for _____

and petitions the Court as follows:

- 1. Relief Requested.**
- An order extending the currently scheduled due date of *(name of activity, filing or service)* :
_____ from _____ until _____.
- An order directing the Clerk of the Court to reissue Letters of Guardianship through:
_____.

//

//

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1 **2. Statement of Facts.** The above-listed activity, filing or service is currently due to occur on or by the
2 date stated above. An extension of time for this requirement is requested for the following reasons, which
3 constitute good cause for the extension of time to complete the activity:

4 _____
5 _____
6 _____
7 _____
8 _____

9 The current letters of guardianship are set to expire on _____. To insure that the
10 guardian is able to carry out his/her fiduciary duty the court should direct the Clerk of the Court to reissue
11 Letters of Guardianship effective through _____.

12 **I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON
13 THAT THE FOREGOING IS TRUE AND CORRECT.**

14 Signed at _____, Washington this ____ day of _____ 20__.

15 _____
16 Signature of Guardian

15 _____
16 Printed Name

17 _____
18 Address

17 _____
18 Telephone/Fax Number

19 _____
20 City, State, Zip Code

19 _____
20 Email Address