Reset

FOR CLERK'S USE ONLY

Person Filing: _____

Mailing Address: _____

City, State, Zip Code: _____

Telephone Number: _____

Atlas Number (if applicable) _____

☐ **Representing Self (No Attorney) OR** ☐ **Represented by Attorney**

If Attorney, Bar Number: _____

SUPERIOR COURT OF ARIZONA
MOHAVE COUNTY

Regarding the Matter of:

Case Number: _____

_____
(Name of Petitioner)

AND

_____
(Name of Respondent)

PETITION TO ESTABLISH PARENTING TIME

GENERAL INFORMATION:

1. INFORMATION ABOUT THE PETITIONER:

Name: _____
Address: _____
County of residence: _____
Date of Birth: _____
Occupation: _____
Relationship to minor child(ren) for whom I want the parenting time order:

☐ Mother
☐ Father
☐ Other: (explain) _____

2. INFORMATION ABOUT THE RESPONDENT:

Name: _____
Address: _____
County of residence: _____
Date of Birth: _____
Occupation: _____
Relationship to minor child(ren) for whom I want the parenting time order:

☐ Mother
☐ Father
☐ Other: (explain) _____

Revised: 1/2019

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3. JURISDICTION: WHY I AM FILING THIS COURT CASE IN ARIZONA AGAINST THE OTHER PERSON (Check all that apply.)

- ☐ The person is a resident of Arizona;
- ☐ I believe that I will personally serve the person in Arizona (see packet on service to know about this);
- ☐ The person agrees to have the case heard here and will file written papers in the court case;
- ☐ The person lived with the minor child(ren) in this state at some time;
- ☐ The person lived in this state and provided pre-birth expenses or support for the minor child(ren);
- ☐ The minor child(ren) live/lives in this state as a result of the acts or directions of the person;
- ☐ The person had sexual intercourse in this state as a result of which the minor child(ren) may have been conceived;
- ☐ The person signed a birth certificate that is filed in this state;
- ☐ The person did any other acts that substantially connect the person with this state (see a lawyer to help you determine this).

4. INFORMATION ABOUT MINOR CHILD(REN) FOR WHOM I WANT PARENTING TIME ORDER:

Name: _____
Birthdate: (month/day/year) _____
City, State, Nation of Birth: _____
_____
County of residence: _____
Father: _____
Mother: _____

Name: _____
Birthdate: (month/day/year) _____
City, State, Nation of Birth: _____
_____
County of residence: _____
Father: _____
Mother: _____

Name: _____
Birthdate: (month/day/year) _____
City, State, Nation of Birth: _____
_____
County of residence: _____
Father: _____
Mother: _____

Name: _____
Birthdate: (month/day/year) _____
City, State, Nation of Birth: _____
_____
County of residence: _____
Father: _____
Mother: _____

STATEMENTS ABOUT PATERNITY AND CHILD LEGAL DECISION MAKING AND CHILD SUPPORT:

5. PATERNITY WAS ESTABLISHED BY: (Check one box.)
(A copy of any Order or document referenced here should already be in the court file or is attached.)

- ☐ A Court Order for Paternity from this county or previously transferred to this county stating that _____ is the natural father of minor child(ren). (A.R.S. § 25-501(c))
- ☐ Both parents signing an Acknowledgment of Paternity through the Hospital Paternity Program or other means provided by law after July 18, 1996, and a birth certificate listing the name of the father was issued as a result. (A.R.S. § 36-334).
- ☐ We do not have an order of paternity, but we do have a child support order. (See instructions)
- ☐ Parties were legally married when minor child(ren) was (were) born, conceived or adopted. *

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*** NOTE:** If married when minor child(ren) were born, conceived or adopted, and no Decree of Divorce or Legal Separation has been issued, STOP! Do not use these forms unless advised to do so by an attorney. Requests for legal decision making and visitation (parenting time) must generally be filed as part of a case for Legal Separation or Divorce.

6. INFORMATION ABOUT LEGAL DECISION MAKING OF THE MINOR CHILD(REN): (Check one box)

☐ Mother has had physical custody (legal decision making) of the minor child(ren) for the last 6 months, and I do not contest physical custody.

☐ Father has had physical custody (legal decision making) of the minor child(ren) for the last 6 months, and I do not contest physical custody.

☐ A person other than mother or father has had physical custody (legal decision making) of the minor child(ren) for the last 6 months, because of a court case, and I do not contest physical legal decision making. (Describe court case):

Names of Parties: _____

Date of order or judgment (if one already entered): 06/06/19 _____

What the order or judgment said:

_____

_____

_____

Court Case Number: _____

Location of court (city and state): _____

Explain type of case: (Criminal, Order of Protection, Injunction Against Harassment, Divorce, Paternity, etc.) _____

Status of Case Now:

☐ Final Order Entered: Case is Over

☐ Hearing Date Set: On (date) _____at (time) _____

Location/address: _____

☐ Other (explain in detail): _____

☐ A person other than mother or father has had physical custody (legal decision making) of the minor child(ren) for the last 6 months, because of a government agency, and I do not contest physical custody. (Describe the agency – for example, Child Protective Services – date, type of case, and status of case right now):

_____

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7. **INFORMATION ABOUT CHILD SUPPORT FOR CHILD(REN):** An Order for Child Support is dated _____ from (name of court) _____which states that child support is established.

OTHER INFORMATION ABOUT THE MINOR CHILD(REN):

8. **WHERE THE CHILD(REN) WHO IS/ARE UNDER 18 YEARS OLD HAS/HAVE LIVED FOR THE LAST 5 YEARS:** (Attach extra pages if necessary.)

Child's Name _____ Dates: From _____ To _____
Lived with _____ Relationship to child: _____
Street address _____ City, State: _____

Child's Name _____ Dates: From _____ To _____
Lived with _____ Relationship to child: _____
Street address _____ City, State: _____

Child's Name _____ Dates: From _____ To _____
Lived with _____ Relationship to child: _____
Street address _____ City, State: _____

9. **COURT CASES NOT INVOLVING LEGAL DECISION MAKING OR PARENTING TIME RELATED TO THE CHILD(REN) UNDER 18 YEARS OLD:** (Check one box)

☐ I **have** or ☐ I have **not** been a party or a witness in court in this state **or** any other state regarding issues OTHER THAN the legal decision making or parenting time of any minor child(ren) named above. (If so, explain below, using extra pages if necessary. **IF NOT, GO ON**.)

Name of each child: _____

Court state: _____ Court location _____

Court case number: _____ Current status: _____

How the child(ren) is (are) involved:

_____

_____

Nature of the court proceeding: _____

Summary of any Court Order: _____

_____

_____

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10. LEGAL DECISION MAKING, OR PARENTING TIME CLAIMS RELATED TO CHILDREN UNDER 18 YEARS OLD: (Check one box)

☐ I **DO** KNOW **OR** ☐ I **DO NOT** KNOW a person other than the Petitioner or the Respondent who has physical custody (legal decision making) or who claims custody or parenting time rights to any of the minor children named above. (If so, explain below, using extra pages if necessary. **IF NOT, GO ON**.)

Name of each child: _____

Name of person with the claim: _____

Address of person with the claim: _____

Nature of the claim: _____

OTHER STATEMENTS TO THE COURT:

11. DOMESTIC VIOLENCE: (Check here if the following is true.)

☐ Domestic violence has **not** occurred between the parties.

12. VENUE: (Check here if the following statement is true.)

☐ This is the proper court to bring this lawsuit under Arizona law because it is the county of residence of the Petitioner, or the Respondent, or the minor child(ren).

REQUESTS I MAKE TO THE COURT ABOUT VISITATION AND RELATED MATTERS:

13. ☐ Reasonable parenting time rights to (name) _____as follows:

☐ TRANSPORTATION will be provided by (name): _____as follows:

☐ During WEEKENDS: (explain specifically) _____

_____

☐ During the SUMMER MONTHS OR SCHOOL BREAKS: (explain specifically) _____

_____

☐ FOR HOLIDAYS AND BIRTHDAYS: (explain specifically) _____

_____

☐ FOR TELEPHONE CALLS: (explain specifically) _____

_____

☐ OTHER: (explain specifically) _____

_____

14. **(Complete and explain only if you want to have supervised parenting time:) Supervised** parenting time between the minor child(ren) and a parent is in the best interests of the children, pursuant to A.R.S. Section 25-337 and 25-338, because: (Explain reasons for supervision)

_____

_____

☐ **Supervised Parenting Time** to (name) _____ only in the presence of another person, who is named by the court (suggestion below) upon a finding that supervised access is in the best interest of the minor child(ren).

Name of person to supervise: _____

Requested restrictions on parenting time: (Explain here) _____

_____

The cost of supervised parenting time shall be paid by:

☐ the parent being supervised;
☐ the parent having legal decision making;
☐ shared equally by the parties.

15. **Other orders:** Write in here anything else you want the court to order: _____

_____

_____

_____

I declare under penalty of perjury that the foregoing is true and correct.

Signature: _____ Date: _____

Revised: 1/2019