

**IN THE CIRCUIT COURT OF THE FIRST JUDICIAL CIRCUIT,  
IN AND FOR ESCAMBIA COUNTY, FLORIDA**

\_\_\_\_\_,  
Petitioner, Case No.: \_\_\_\_\_  
and Division:     A     @ \_\_\_\_\_  
\_\_\_\_\_,  
Respondent.

Check {W}one: ( )Dissolution of Marriage ( )Modification of Custody/Visitation  
( )Modification of Alimony/Child Support ( )Establish Visitation ( ) Stepparent Adoption  
( )Temporary Custody ( )Name Change ( )Paternity

**REQUEST FOR ( ) HEARING ( ) NON JURY TRIAL**

I, \_\_\_\_\_, Petitioner in this case, affirm to the best of my knowledge and belief as follows:

Check {W} 1 or 2 below:

1. ( )There are no issues in the petition/pleadings to be decided by the court in this case.

**OR**

2. ( )There are issues in the petition/pleadings to be decided by the court in this case and pursuant to rule 12.440, Florida Family Law Rules of Procedure, the case is ready to be set for trial. The estimated time needed for the parties to present their cases is *{approximate number of hours}*\_\_\_\_\_.

**AND**

All of the necessary requirements for a hearing/trial have been completed as initialed below:  
*{Initial each item}*

\_\_\_\_\_ All required forms and documents that were listed in the instructions provided to me were filed with the Clerk of Court. All forms and documents were filled out completely, signed and notarized where required.

\_\_\_\_\_The Petition and forms were appropriately served on the other party by ( ) Service by Sheriff ( ) Service by Publication or Posting ( ) Hand Delivered ( ) Filed Acceptance & Waiver of Service. Proof of Service, Publication or Posting is filed with my case.

\_\_\_\_\_ The respondent has filed all the required forms, and/or I have followed the instructions to request a Default, Waive, or Compel of the other party. If an Order to Compel was issued, the time given the other party to comply has passed.

\_\_\_\_\_ **I am providing two (2) self addressed stamped envelopes with this request. One addressed to myself and one addressed to the other party.**

I understand that my file will be reviewed by court staff and I will be contacted at the number below with a court date or further instructions.

_____	_____
Petitioner's Signature	Date Signed
_____	_____
Daytime Telephone Number	Address
	_____

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I certify that a copy of this document was { / *one only* } ( ) mailed ( ) faxed and mailed ( ) hand delivered to the person listed below on { *date* } \_\_\_\_\_.

Other party or his/her attorney:  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
  
Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature of Party  
\_\_\_\_\_  
Printed Name  
\_\_\_\_\_  
Street Address  
\_\_\_\_\_  
City, State, Zip  
\_\_\_\_\_  
Telephone Number  
\_\_\_\_\_  
Fax Number