

IN THE SUPERIOR COURT OF FORSYTH COUNTY
STATE OF GEORGIA

Plaintiff

vs

Defendant

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Civil Action No. _____

Judge Assigned: _____

Request for Civil Uncontested Hearing

Please complete the attached form and return to:
Forsyth County Clerk of Superior Court
101 East Courthouse Square, Suite 1007
Cumming, GA 30040
Attention: Civil Division

1. All information requested must be provided or you will not be assigned a court date.
2. Please include a self-addressed stamped envelope so a copy of the completed form with a court date assigned may be returned to you.
3. **You are responsible for notifying all other necessary parties and attorneys of the court date assigned.** You must complete and file with the Clerk's Office a certificate of service representing that you have mailed a copy of the complete request for a hearing form to all necessary parties or attorneys.
4. Please note: Uncontested hearings are done once per month.

Name of Party or Attorney requesting hearing: _____

Name(s) of opposing counsel: _____

Purpose of Hearing (Divorce Final, Name Change Final, etc...)

*****TO BE COMPLETED BY CLERK'S OFFICE*****

RULE NISI FOR UNCONTESTED ONLY

A hearing concerning the above referenced matter having been requested, the parties are hereby Ordered to appear on the _____ day of _____, 20 _____ at _____ O'clock _____ .M. in Courtroom _____ of the Forsyth County Courthouse.

This _____ day of _____, 20 _____.

Date returned to requesting party: ____ / ____ / ____

Deputy Clerk or Calendar Clerk

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CERTIFICATE OF SERVICE

This is to certify that I have this day served the parties in the foregoing matter with a copy of the attached hearing request form by depositing said copy in the United States Mail in a properly addressed envelope with adequate postage thereon as follows:

Name and Address of Opposing Attorney/Party:

This _____ day of _____, 20 _____.

Signature of Party requesting hearing