

This notice should be served at once and returned to the clerk of the court.

NOTICE

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

BY PROBATE COURT OF THE _____ OF _____
City or Town Name of City or Town

BY THE COUNTY OF _____ AND THE STATE AFORESAID
Name of County

To: _____

Estate of: _____

No: _____ Greeting: _____

A petition for Limited Guardianship/Guardianship has been filed in the Probate Court of the City/Town of:

_____ has requested that the Probate
Name of Petitioner

Court appoint a limited guardian/guardian for you.

A hearing regarding this Petition shall be held:

On (Date): _____

At (Time): _____

at the Probate Court for the town of: _____

Address: _____

The Petitioner requests that the Probate Court consider the qualification of the following individual as guardian:

Name of Proposed Guardian

A guardian ad litem will be appointed by the Probate Court to visit you to explain the process and inform you of your rights.

You have the right to attend the hearing to contest the petition, to request the powers of the guardian be limited, or to object to the appointment of particular individual guardian. If you wish to contest the petition, you have the right to be represented by an attorney, at state expense, if you're indigent.

If the petition is granted and a guardian is appointed, the Probate Court may give the guardian power to make decisions about one or more of the following:

Your health cares; your money; where you live; and with whom you associate.

Copies of this notice will be mailed to:

The administrator of any care or treatment facility where you live or receive primary services; your spouse; and heirs at law; any individual or entity known to petitioner to be regularly supplying protection services to you.

CERTIFICATION OF SERVICE

I certify that I hand-delivered and read this Notice to:

_____ Name of Recipient

On the _____ day of _____ .
Day Month

Signature

Name (Print or Type)

No. Address

City/Town State Zip Phone Number

CERTIFICATION OF NOTICE

I certify that, as required by Rhode Island General Laws section 33-15-17-1©, I mailed a copy of this Notice to the following persons, at the addresses listed, on the

_____ day of _____, _____.
Day Month Year

Name Address

Signature

Name (Print or Type)

No. Address

City/Town State Zip Phone Number

Subscribed and sworn to before me this _____ day of _____,

Notary public (please print name)

Notary public signature

WITNESS

Judge of the Probate Court of the _____ of _____

this _____ day of _____.

Signature of Clerk