Form CC 381

NOTICE OF HEARING ON PETITION FOR PERSONAL PROTECTION ORDER

Use this form if you did not request an "ex parte" order or the judge refuses to issue an order without a hearing.

INSTRUCTIONS FOR COMPLETING "NOTICE OF HEARING ON PETITION FOR PERSONAL PROTECTION ORDER"

Use this form if you did not request an "ex parte" order or the judge refused to sign an order without a hearing.

Please print neatly. Press firmly because you are printing on five copies.

Items A through D must be completed before you give this form to the court clerk. Please read the instruction for each item. Then fill in the correct information for that item on the form.

A. Fill in the "petitioner" and "respondent" the same way you did on form CC 375 or CC 377.

B. Write in the respondent's name and address.

C. Write in the name of the judge, the date of the hearing, the time of the hearing, and the location of the hearing. The court clerk will tell you this information.

D. Write in today's date and sign your name. Hand the form to the county clerk. The clerk will keep the white and green copies and return the blue, pink, and yellow copies to you.

NOTE: There are only five copies of this form. You will need to make extra copies of this form for each parent, guardian,or custodian of the respondent.

You must read the booklet "Instructions for Personal Protection Orders" for directions on the legal process.

- The court clerk will make sure that the judge receives your petition (form CC 375 or CC 377) and this form.
- Read page 8 of the booklet for details on the hearing.

Original - Court
1st copy - Judge/Assignment clerk (green)
2nd copy - Respondent (blue)
3rd copy - Petitioner (pink)
4th copy - Return (yellow)

Approved, SCAO

STATE OF MICHIGAN 46TH JUDICIAL CIRCUIT OTSEGO COUNTY	NOTICE OF HEARING ON PETITION FOR PERSONAL PROTECTION ORDER	CASE NO.

Court address
225 WEST MAIN STREET, GAYLORD, MI 49735

Court telephone no.
989-731-7500

Petitioner name	v	Respondent name

TO:

You are notified that the petitioner has requested a personal protection order be issued against you. A hearing has been scheduled to decide whether to issue the personal protection order.

Judge: _____

Date: _____

Time: _____

Location: _____

If you require special accommodations to use the court because of a disability or if you require a foreign language interpreter to help you fully participate in court proceedings, please contact the court immediately to make arrangements.

If you do not attend this hearing, a personal protection order can still be entered against you.

_____ Date

_____ Signature

TO THE PETITIONER:

You should serve this notice no later than 5 days before the date of the hearing stated above so that the respondent receives proper notice before the hearing. See the other side for proof of service.

If the respondent is under 18 years of age, you must also serve the parents, guardians, or custodians of the respondent.

Notice of Hearing on Petition for Personal Protection Order
Case No.

PROOF OF SERVICE

TO PROCESS SERVER: You must serve the copies of the notice of hearing on the petition for a personal protection order and file proof of service with the court clerk. If you are unable to complete service, you must return this original and all copies to the court clerk.

CERTIFICATE / AFFIDAVIT OF SERVICE / NONSERVICE

☐ **OFFICER CERTIFICATE**
I certify that I am a sheriff, deputy sheriff, bailiff, appointed court officer, or attorney for a party (MCR 2.104[A][2]), and that: (notarization not required)

OR

☐ **AFFIDAVIT OF PROCESS SERVER**
Being first duly sworn, I state that I am a legally competent adult who is **not** a party or an officer of a corporate party, and that: (notarization required)

☐ I served a copy of the notice of hearing on the petition for a personal protection order by
☐ personal service on: ☐ registered mail, delivery restricted to the respondent and, if the respondent is under 18 years of age, the parent, guardian, or custodian of the respondent (return receipt attached) on:

Name of respondent	Complete address of service	Day, date, time
Name of parent/guardian/custodian	Complete address of service	Day, date, time
Name of parent/guardian/custodian	Complete address of service	Day, date, time

☐ I have personally attempted to serve a copy of the notice of hearing on the petition for a personal protection order on the following persons and have been unable to complete service.

Name	Complete address of service	Day, date, time
Name	Complete address of service	Day, date, time
Name	Complete address of service	Day, date, time

I declare that the statements above are true to the best of my information, knowledge, and belief.

Service fee	Miles traveled	Fee	
$		$	
Incorrect address fee	Miles traveled	Fee	TOTAL FEE
$		$	$

Signature _____

Name (type or print) _____

Title _____

Subscribed and sworn to before me on _____, _____ County, Michigan.
Date

My commission expires: _____ Signature: _____
Date Deputy court clerk/Notary public

Notary public, State of Michigan, County of _____

ACKNOWLEDGMENT OF SERVICE

I acknowledge that I have received a copy of the notice of hearing on the petition for personal protection order on

_____.
Day, date, time

_____
Signature of respondent

_____
Signature of respondent's parent/guardian/custodian

_____
Signature of respondent's parent/guardian/custodian