Instructions for filing form

- 1) Complete all necessary information on the form.
- 2) Save the form and file it with the Court.

If filing by email:

Attach the completed form and send to court@scottsdaleaz.gov.
Only Word and PDF documents will be accepted. Photos (.jpeg or other photo files) will not be accepted.

If filing by fax:

Fax the completed form to Scottsdale City Court at (480) 312-2764.

If filing by mail:

Mail the completed form to Scottsdale City Court, 3700 North 75th Street, Scottsdale, Arizona 85251.

If filing in person:

Bring the completed form to the Court, take a number in the lobby and wait for a Clerk to assist you or you may place your filing in the drop box.

It is the filer's responsibility to ensure the Court is in receipt of your filing. All responses will be sent via USPS mail to the last address on file.



Scottsdale City Court • 3700 N 75th Street Scottsdale, AZ 85251 • (480) 312-2442

Fax: (480) 312-2764 • court@scottsdaleaz.gov • www.ScottsdaleAZ.gov/Court ORI: AZ007111J • Maricopa County, Arizona

| Cas | e #: |
|--|--|
| | aint #: |
| | |
| REQUEST | |
| | |
| []Defendant requests: []a hearing See *Note to Defendant. [] that the Court cancel the hearing requested by the defendant in this case. [] that the Court continue the scheduled hearing on/ | *NOTE TO DEFENDANT: Certain conditions may cause a defendant to be prohibited from possessing firearms by federal law while an Order of Protection is in effect. The conditions are: (1) Defendant and Plaintiff are either married (past or present), live together as intimate partners (past or present), or are parents of a child in common, and (2) the Order of Protection is affirmed or modified at a hearing of which Defendant received actual notice and had an opportunity to participate (even if Defendant fails to appear at the hearing). If you have questions about hearings and state and federal firearms prohibitions, you should contact an attorney. The court cannot give you legal advice. |
| List the reasons for your request: | |
| | |
| Date Requesting Person's Signature | |
| Please inform court staff if interpreter services are needed for this hearing. [] Yes, I need interpreter services for | |
| | Address and telephone number if Defendant is requesting party |