

**IN THE SUPERIOR COURT OF THE STATE OF WASHINGTON
IN AND FOR THE COUNTY OF KING**

vs.

**NO.
NOTICE FOR HEARING
KENT REGIONAL JUSTICE CENTER ONLY
(Clerk's Action Required) (NTHG)**

TO: THE CLERK OF THE COURT and to all other parties per list on Page 2:
PLEASE TAKE NOTICE that an issue of law in this case will be heard on the date below and the Clerk is directed to note this issue on the calendar checked below.

Calendar Date: _____ **Day of Week:** _____

Nature of Motion: _____

CASES ASSIGNED TO INDIVIDUAL JUDGES - RJC

If oral argument on the motion is allowed (LCR 7(b)(2)), contact staff of assigned judge to schedule date and time before filing this notice. **Working Papers:** The judge's name, date and time of hearing must be noted in the upper right corner of the Judge's copy. **Deliver Judge's copies to Judges' Mailroom at RJC**

Without oral argument (Mon - Fri) With oral argument Hearing

Date/Time: _____

Judge's Name: _____ Trial Date: _____

CHIEF CIVIL DEPARTMENT – RJC

All Chief Civil calendars are at 10:00 on Fridays, except as noted. See signs posted at RJC for calendar location. Deliver working copies to Judges' Mailroom, Room 2D at RJC. In upper right corner of papers write "Chief Civil Department" and date of hearing.

- Extraordinary Writs (Show Cause Hearing) (LCR 98.40)
- Supplemental Proceedings /Judicial Subpoenas (9:15 am) (LCR 69)
- Motions to Consolidate with multiple judges assigned (LCR 40(b)(4) (without oral argument) M-F
- Structured Settlements (9:00 am Fridays) (LCR 40(2)(S))

Non-Assigned Cases:

- Dispositive Motions and Revisions (10:30 am)
- Non-Dispositive Motions M-F (without oral argument)
- Certificates of Rehabilitation- Weapon Possession(**Convictions from Limited Jurisdiction Courts**)(LCR 40(b)(2)(B))

PARTIES: The address of the Regional Justice Center is 401 4th Avenue North, Kent, WA 98032. You must bring this document and appear as scheduled.

Room: _____ See Posted Signs

You may list an address that is not your residential address where you agree to accept legal documents.

Sign: _____ Print/Type Name: _____

WSBA # _____ (if attorney) Attorney for: _____

Address: _____ City, State, Zip _____

Telephone: _____ Date: _____

DO NOT USE THIS FORM FOR FAMILY LAW OR EX PARTE MOTIONS

LIST NAMES AND SERVICE ADDRESSES FOR ALL NECESSARY PARTIES REQUIRING NOTICE

Name _____
Service Address: _____
City, State, Zip _____
WSBA# _____ Atty. For: _____
Telephone #: _____

Name _____
Service Address: _____
City, State, Zip _____
WSBA# _____ Atty. For: _____
Telephone #: _____

Name _____
Service Address: _____
City, State, Zip _____
WSBA# _____ Atty. For: _____
Telephone #: _____

Name _____
Service Address: _____
City, State, Zip _____
WSBA# _____ Atty. For: _____
Telephone #: _____

Name _____
Service Address: _____
City, State, Zip _____
WSBA# _____ Atty. For: _____
Telephone #: _____

Name _____
Service Address: _____
City, State, Zip _____
WSBA# _____ Atty. For: _____
Telephone #: _____

IMPORTANT NOTICE REGARDING CASES

Party requesting hearing must file motion & affidavits separately along with this notice. List the names, addresses and telephone numbers of all parties requiring notice (including GAL) on this page. Serve a copy of this notice, with motion documents, on all parties.

The original must be filed at the Clerk's Office not less than **six** court days prior to requested hearing date, except for Summary Judgment Motions (to be filed with Clerk 28 days in advance).

THIS IS ONLY A PARTIAL SUMMARY OF THE LOCAL RULES AND ALL PARTIES ARE ADVISED TO CONSULT WITH AN ATTORNEY.

The REGIONAL JUSTICE CENTER is in Kent, Washington at 401 Fourth Avenue North. The Clerk's Office is on the second floor, Room 2C. The Judges' Mailroom is Room 2D.