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

vs.	**NO.** **NOTICE FOR HEARING** **SEATTLE COURTHOUSE 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 – SEATTLE

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 C203**

[ ] Without oral argument (Mon - Fri) [ ] With oral argument Hearing
Date/Time:_____
Judge's Name: _____ Trial Date: _____

CHIEF CRIMINAL DEPARTMENT – SEATTLE (E1201)

[ ] Bond Forfeiture 3:15 pm, 2nd Thursday of each month
[ ] Certificates of Rehabilitation- Weapon Possession (**Convictions from Limited Jurisdiction Courts**) 3:30 First Tues of each month

CHIEF CIVIL DEPARTMENT – SEATTLE (Please report to E847 for assignment)

Deliver working copies to Judges' Mailroom, Room C203. *In upper right corner of papers write "Chief Civil Department" or judge's name and date of hearing*

[ ] Extraordinary Writs (Show Cause Hearing) (LCR 98.40) 1:30 p.m. Tues/Wed -report to Room E847
[ ] Supplemental Proceedings/ Judicial Subpoenas (1:30 pm Tues/Wed)(LCR 69)
[ ] Motions to Consolidate with multiple judges assigned (LCR 40(a)(4) (without oral argument) M-F
[ ] Structured Settlements (1:30 pm Tues/Wed)(LCR 40(2)(S))

Non-Assigned Cases:

[ ] Non-Dispositive Motions M-F (without oral argument).
[ ] Dispositive Motions and Revisions (1:30 pm Tues/Wed).
[ ] Certificates of Rehabilitation (**Employment**) 1:30 pm Tues/Wed (LR 40(a)(2)(B))

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 SEATTLE COURTHOUSE is in Seattle, Washington at 516 Third Avenue. The Clerk's Office is on the sixth floor, room E609. The Judges' Mailroom is Room C203.