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**USE THIS FORM IF SOMEONE OTHER THAN THE GUARDIAN
IS THE PERSON WHO WANTS TO END THE GUARDIANSHIP**

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Code:
(Your name) _____
(Address) _____
(Telephone) _____

In Proper Person

IN THE _____ JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
IN AND FOR THE COUNTY OF _____

In the Matter of the Guardianship)
of the Person of:)
_____,)
_____,)
_____,)
A(n) Minor.)
 Adult.)

CASE NO. _____
DEPT. NO. _____

PETITION TO TERMINATE GUARDIANSHIP

COMES NOW, Petitioners, (name(s)) _____

_____, (relationship) _____

of the Ward, in accordance with Chapter 159.1905 of Nevada Revised Statutes, to request
termination of the guardianship over the Ward's Person and respectfully represents the following
to this Honorable Court:

1. That an Order appointing (name of guardian(s)) _____

_____ Guardian(s) of the Person of (Ward's name)

_____ was filed on (date) _____ and

Letters of Guardianship were filed on (date) _____.

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2. That the name(s) and address(es) of the Petitioner(s) are:

Name: _____

Address: _____

Name: _____

Address: _____

3. That the name(s) and address(es) of the Guardian(s) are:

Name: _____

Address: _____

Name: _____

Address: _____

4. (CHECK ONLY ONE BOX)

That the Ward is currently (age) _____ years old, having been born on (date of birth) _____. The Ward currently resides at:

Address: _____

OR

That the Ward died on (date) _____.

5. That the guardianship over the Ward is no longer needed because _____

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believe them to be true.

Petitioner

SIGNED and SWORN to before me by (your name) _____

on the ____ day of _____, _____.

NOTARY PUBLIC
OR

DEPUTY CLERK

ACKNOWLEDGMENT OF PETITIONER

STATE OF NEVADA)
)
COUNTY OF _____)

On this ____ day of _____, _____, before me, the undersigned Notary Public in and for the said County and State, personally appeared (your name) _____ known to me to be the person described in and who executed the foregoing instrument, and who acknowledged to me that (check one) he/ she did so freely and voluntarily and for the uses and purposes therein mentioned.

WITNESS my hand and official seal.

NOTARY PUBLIC
OR

DEPUTY CLERK

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VERIFICATION OF CO-PETITIONER

STATE OF NEVADA)
)
COUNTY OF _____)

I, (Co-Petitioner's name) _____, being first duly sworn under penalty of perjury, hereby depose and say:

That I am the Co-Petitioner in the within action; that I have read the foregoing Petition to Terminate Guardianship and know the contents thereof; that the same is true of my knowledge except as to those matters therein stated upon information and belief and as to those matters, I believe them to be true.

Co-Petitioner

SIGNED and SWORN to before me by (Co-Petitioner's name) _____
on the ____ day of _____, _____.

NOTARY PUBLIC
OR

DEPUTY CLERK

ACKNOWLEDGMENT OF CO-PETITIONER

STATE OF NEVADA)
)
COUNTY OF _____)

