Superior Court of Washington County of

In the Guardianship of:	No. Order Appointing Successor [] Limited Guardian of Person (ORAPLGP) [] Full Guardian of Person (ORAPGDP)	
Clerk's Information Summary Due Date for Initial Personal Care Plan and Inventory:		
Due Date for Receipt(s) of Funds in Blocked According Due Date for Report and Accounting: The Clerk Shall Notify the Auditor of Loss of Vot [] Certified Professional Guardian (CPG) [] F [] Lay (Family) Guardian (LGD) ([] Training	ing Rights [] Yes [] No Public Professional Guardian (PUG)	
This matter came on regularly for hearing on a, an Incapa The Court makes the following:	Petition for Appointment of Successor Guardian of acitated Person.	
I. Fi	ndings of Fact	
1.1 Need to Appoint Successor G	uardian	
There is a need to appoint a successor guardian in that the previous guardian:		
[] is deceased [] has resigned [] h	as been discharged.	

1.2 G	Buardian
	The proposed Guardian, (name), is qualified to act as Guardian of the Person and/or Estate of the Incapacitated Person. Proposed Guardian's address, phone numbers and emails are as follows:
	Address:
	*Phone number(s): Business Personal
	Email
1.3	Bond
(Name) be appo	The assets of the Incapacitated Person: [] are unknown, and Bond shall be reviewed at review of inventory. [] total less than three thousand dollars (\$3,000) and no bond is required. [] exceed three thousand dollars (\$3,000), and a bond is required. [] exceed three thousand dollars (\$3,000) and should be placed in a blocked account with an insured financial institution or bonded, unless the guardian is a bank or trust company. [] are to be held by a nonprofit corporation authorized to act as Guardian, and the Court waives any bond requirement. II. Conclusions of Law
	III. Order
It is or	dered:
3.1	Appointment of Guardian
	(Name) is appointed as: [] Full [] Limited Guardian of the Person and/or [] Full [] Limited Guardian of the Estate of (name of Incapacitated Person)
3.2	Letters of Guardianship/Limited Guardianship
	The Clerk of the Court shall issue letters of: [] Full [] Limited Guardianship of the Person and/or [] Full [] Limited Guardianship of the Estate to (name of Guardian), upon the filing of an oath.
	[] Guardian must complete and file proof of completion of Mandatory Guardian Training or obtain an order waiving training.
OD AD	

OR APPOINTING SUCCESSOR GDN (ORAPLGP, ORAPGDP, ORAPLGE, ORAPGD, - Page 2 of 4 WPF GDN 06.0500 (03/2011) RCW 11.88.120

3.3	Guardianship Bond and Security		
	[] Guardianship bond in the amount of \$ or bond is waived.		
	 Bond shall be reviewed at review of inventory. The Guardian shall have access to the following account(s): 		
	All other accounts shall be blocked and the guardian shall file a Receipt of Funds into Blocked Financial Account, WPF GDN 04.0600, with the Court no later than 30 days from the date of this order:		
	If bond is waived, the Guardian is required to report to the Court if the total assets of the Incapacitated Person reaches or exceeds Three Thousand Dollars (\$3,000). Pursuant to RCW 11.88.100, the Guardian of the Estate shall file a yearly statement showing the monthly income of the Incapacitated Person if said monthly income, excluding moneys from state or federal benefits is over the sum of Five Hundred Dollars per month for any three consecutive months.		
3.4	Prior Order Remains in Effect		
	The prior order appointing guardian signed by the court dated is incorporated herein by reference and remains in effect with the new guardian's name being substituted in as the guardian except modified as follows:		
3.5	Guardian's Report		
	The Guardian's report shall cover the [] 12 (twelve)-month [] 24 (twenty-four)-month [] 36 (thirty-six)-month period following the appointment. The Guardian's report is due within 90 days of the end of the reporting period and shall comply with the requirements of RCW 11.92.040(2) and RCW 11.92.043(2).		
Date	·		
	Judge/Court Commissioner		

Presented by:	
Signature of Petitioner/Attorney	Name of Petitioner/Attorney [] WSBA [] CPG #
Address	City, State Zip Code
*Telephone/Fax Number	Email Address
Copy received and approved by:	
Signature of Guardian ad Litem	Print Name of Guardian ad Litem

*If you do not want your personal phone number on this public form, you may list your telephone number on a separate form which may be available to parties and the court, as well as its staff and volunteers, but will not be made available to the public. Use Form WPF GDN 03.0100, Guardianship Confidential Information form (Telephone Numbers), for this purpose.