

<b>STATE OF MICHIGAN PROBATE COURT COUNTY</b>	<b>PETITION TO</b> <input type="checkbox"/> <b>TERMINATE</b> <input type="checkbox"/> <b>MODIFY</b> <b>GUARDIAN FOR DEVELOPMENTALLY DISABLED INDIVIDUAL</b>	<b>CASE NO. and JUDGE</b>
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**Court address** \_\_\_\_\_ **Court telephone no.** \_\_\_\_\_

In the matter of \_\_\_\_\_  
First, middle, and last name

Petitioner's name, address, and telephone no.

Petitioner's attorney, bar no., address, and telephone no.

1. I, \_\_\_\_\_, am interested in this matter and make this petition as  
Name (type or print)  
 \_\_\_\_\_  
State interest/relationship

2. The developmentally disabled individual's address and telephone number are \_\_\_\_\_  
Address  
 \_\_\_\_\_  
City State Zip Telephone no.

3. The guardian's address is \_\_\_\_\_  
 \_\_\_\_\_  
City State Zip

4. The developmentally disabled individual's presumptive heirs are: (Attach a separate sheet if more space is needed.)

NAME	ADDRESS AND TELEPHONE NUMBER	RELATIONSHIP	AGE (if minor)	
	Street address			
	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:16%;">State</td> <td style="width:16%;">Zip</td> <td style="width:35%;">Telephone no.</td> </tr> </table>			City
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	Street address			
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City	State	Zip	Telephone no.	

5. The reasons why the court should take action are \_\_\_\_\_  
\_\_\_\_\_

**I REQUEST** that the court:

6. Terminate  
 a.  all  part of the plenary guardian of the  individual.  estate.  
 b.  all  part of the partial guardian of the  individual.  estate.

7. Accept the resignation of the  
 a. plenary guardian of the  individual  estate.  
 b. partial guardian of the  individual  estate.  
 c. standby guardian.

8. Remove the  
 a. plenary guardian of the  individual  estate,  
 b. partial guardian of the  individual  estate,  
 c. standby guardian,  
who  has  has not been suspended.

9. Appoint \_\_\_\_\_  
Name Address

City State Zip Telephone no.

as  temporary guardian  successor partial guardian  successor plenary guardian  
of the  individual  estate.

10. Appoint \_\_\_\_\_  
Name Address

City State Zip Telephone no.

as standby guardian of the  individual.  estate.

11. Modify the powers of the  plenary guardian  partial guardian of the  individual  estate

as follows: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I declare under the penalties of perjury that this petition has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attorney signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Petitioner signature