

PLEASE NOTICE

If you wish to participate by telephone, you must complete a **REQUEST TO USE COMMUNICATION EQUIPMENT** and file the form with the Court via e-filing.

You must also provide copies of your **Request to Use Communication Equipment** to the opposing party(s) in your case and to the 20th Circuit Court, Trial Division, 414 Washington Street, Room 300, Grand Haven, MI 49417 via mail or via e-mail to circuitcourt@miottawa.org.

Complete the form in its entirety. If not completed, the form will be returned to you for completion. You must complete a new form for each hearing scheduled. One form does not cover all proceedings.

COURT RULE REGARDING TELEPHONIC COMMUNICATION:

Michigan Court Rule 2.402(B), Use of Communication Equipment, states, in part:

“A party wanting to use communication equipment must submit a written request to the court at least 7 days before the day on which such equipment is sought to be used, and serve a copy on the other parties....”

Michigan Court Rule 2.402 (C) also states:

“The party who initiates the use of communication equipment shall pay for its use....”

**STATE OF MICHIGAN
IN THE 20th CIRCUIT COURT FOR THE COUNTY OF OTTAWA**

Plaintiff,

REQUEST TO USE
COMMUNICATION EQUIPMENT

v

Case Number: _____

Defendant.

Judge: _____

I, _____, hereby request to participate in the hearing scheduled
(print your name)
in this case on _____ at _____ by telephone.
(date of hearing) (time)

I HEREBY STATE THAT I have good cause for this request, pursuant to MCR 3.215 and MCR 2.402.

I AGREE THAT, if the hearing is one regarding parenting time or spousal support/alimony, I HAVE SUBMITTED MY INCOME INFORMATION (as listed on the enclosed "NOTICE") via e-mail to circuitcourt@miottawa.org *no later than 24 hours prior* to the date of the hearing as a confidential exhibit to be considered by the Court in support of this Request and to be destroyed immediately thereafter.

FURTHER, I AGREE I WILL MAKE THE CALL TO THE COURT on the date and time scheduled for my hearing.

Phone Number for Ottawa County Courthouse (Grand Haven): 616-846-8230

Phone Number for the Fillmore Complex (West Olive): 616-786-4108

I also agree that I will bear the burden of any expense(s) incurred.

After **e-filing** this form and separately e-mailing any required information, I will contact the Court at 616-846-8230 to verify that it has been received and whether my request was granted.

Date: _____

(signature)

PROOF OF SERVICE

I, _____, hereby state that on this date I mailed a **copy** of this request to the [] Plaintiff or [] Defendant at his/her last known address and e-filed this document with the Court.

Date: _____

(signature)