Request for Ex Parte Order

(Request, Affidavit, Order)

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When to Use:	 You have a case started; and You want the court to enter an order; and
	You have specific facts that irreparable harm will occur if you
	must schedule a hearing and give the other party the required
	amount of notice (9 days); or
	 An adverse reaction will occur if you must give notice to the other party before an order is entered.
Filing Foos:	\$20; or
Filing Fees:	\$100 for orders regarding parenting time
Method of Payment:	Credit Card
Where to File:	https://mifile.courts.michigan.gov
Filing Type:	Motion; or
	Motion to Modify Parenting and/or Custody, Post Judgment
Copies:	Original, plus 1 copy if the other party does not have a MiFILE
•	account.
Additional Information:	The court cannot change custody without a hearing.
	Both parties are entitled to be heard (at a hearing) and must receive notice of any hearing that is scheduled on the case. A request for an ex-parte order is a request for the court to enter an order without a hearing.
	An ex-parte order is a temporary order. You will need to file a motion and have a hearing if you are requesting more than a temporary change to an order.
	An ex parte order is effective as soon as the judge signs it. However, it is not enforceable until the other party is served (receives) a copy of the order. It is your responsibility to serve a copy of all documents on the other party.
	You can serve this motion electronically if the other party has a MiFILE account. You will need to send a copy of this motion to the other party if he or she does not have a MiFILE account. You can send this motion by regular, first class mail.
	Once you have served the other party, you must file a proof of service with the Clerk's office.
	You may purchase copies and stamped envelopes in the Legal Self-Help Center.

Request for Ex Parte Order

Case Number

	Ottawa County			
Со	urt address: 414 Washington, Room 320	Grand Haven,	MI, 49417	Court phone number: 616-846-8315
Pla	nintiff		Defendant	
	me:n			☐ moving party
	one #:ail:			
1.	· · · · · · · · · · · · · · · · · · ·	_		he date of the order is
2. Irreparable Harm I believe the following irreparable harm (something that cannot be fixed) v does not grant my request:		•		
	I have written down the specific reasworn statement to this request.	sons why I be	elieve this ha	rm will occur. I have attached my
3. Request for Order (check all that apply) I ask the court to enter an order: Suspending the plaintiff's defendant's parenting time. Parenting time should be suspended with the children listed below.				
	Child's na	me		Date of birth
Ĺ	Other:			
۱d	eclare that the statements above are	true to the b	est of my kn	owledge.
Da	te: Sig	gned:		

Affidavit

Sworn statement regarding request for ex parte order

Case Number

Court address: 414 Washington, Room 320, Grand Haven, MI, 49417

Court phone number: 616-846-8315

Plaintiff	Defendant
Name:	Name:
amount of notice.	dule a hearing and give the other party the required ve notice to the other party before an order is entered.
2. The specific reasons I believe irreparable harm	or an adverse reaction will occur are:
You must sign this form in front of a notary	·.
Date: Signe	ed:
Acknowledged before me in Ottawa County, Michigan, on _	, by
	County, Michigan Acting in the County of, Michigan My commission expires

Order

Regarding Request for Ex Parte Order

Case Number

Court address: 414 Washington, Room 320, Grand Haven	, MI, 49417 C d	ourt phone number: 616-846-8315
Plaintiff	Defendant	
Name:	Name:	
Address:	Address:	
Phone #:	Phone #:	
The Court has reviewed the plaintiff's defen	idant's request for a	n ex parte order.
The pleadings submitted do not establish the li or harm will occur before a hearing can be held, or action as required by MCR 3.207. The request for a be requested with proper notice to the other party	that notice of the h an order without a h	earing will precipitate adverse
The Court has determined that irreparable harr is not granted. The request for an order without a		•
The plaintiff's defendant's parenting ti	me with the childre	
Child's name		Date of birth
Other:		
Either party may object to this order. If an objectio court may rescind or modify this order at that hear must be obeyed until further order of the court.		
You must complete form FOC 61 (Objection to Ex P want to object to this order. This form can be four from the time you received this order to file your o	nd at <u>www.courts.mi</u>	i <u>.gov</u> . You have 14 calendar days
	Cinquit Count Indo	
	(ILCIIIL (UIILL IIIU at	ב
	Circuit Court Judge	

Proof of ServiceRequest for Ex Parte Order & Order

Case	Number
Case	NULLINE

Court address: 414 Washington Ave., Room 320, Grand Haven, MI 49417 Court phone number: 616-846-8315

Plaintiff:	Defendant:
Name:	Name:
Address:	Address:
Phone #:	
Request for Ex Part	llowing documents to the other party on (date)e Order (with attachments) quest for Ex Parte Order
I personally served the documents by order	uments; or dinary first-class mail to the other party's address listed above.
I declare that the above statem	ent is true to the best of my knowledge.
Date	Signed