

CHANGE OF DOMICILE

The attached forms can be used to request permission to remove your child(ren) from the State of Michigan.

The motion requesting change of domicile must be filed with the Circuit Court Records Office. You may hand deliver it or mail it to:

Circuit Court Records
414 Washington Ave, Room 320
Grand Haven MI 49417

There is a filing fee of \$20.00. You will need to obtain a hearing date from the Circuit Court Assignment Clerk in the Circuit Court office, room 300. You will then need to complete the Notice of Hearing.

You must turn in the original copies of all forms. You also must provide a copy of your motion and notice of hearing to the other party. You must then complete and file the attached Proof of Service with Circuit Court Records. The original must be filed, and you should keep a copy for yourself.

After the hearing you will be required to prepare an order allowing or denying the change of domicile. This order must then be given to the Judge for his signature. The original order then would be filed with the Circuit Court Records office. You then should provide a copy to the other party and keep a copy for yourself.

STATE OF MICHIGAN
IN THE CIRCUIT COURT FOR THE COUNTY OF OTTAWA
FAMILY DIVISION

_____, Plaintiff

FILE NO: _____

vs.

MOTION REQUESTING
CHANGE OF DOMICILE

_____, Defendant

NOW COMES THE () Plaintiff () Defendant, _____, in pro per and hereby requests this Court to grant change of domicile for the minor child(ren) in this case. In support therefore, petitioner says as follows:

1. The petitioner, _____, be allowed to move with his or her child(ren) to the state of _____.
2. That the minor child(ren) is/are in the custody of the () Plaintiff () Defendant and have been since _____.
3. That the reason for this request for a change of domicile is:

Dated _____

Signature _____

NOTICE OF HEARING

PLEASE BE ADVISED that hearing on a motion requesting change of domicile will be held in the Circuit Court Courtroom in the Ottawa County Building, 414 Washington Ave, Grand Haven MI, on _____, the _____ day of _____, 20__, at _____ o'clock () a.m. () p.m.

STATE OF MICHIGAN
IN THE CIRCUIT COURT FOR THE COUNTY OF OTTAWA
FAMILY DIVISION

_____, Plaintiff

FILE NO: _____

vs.

_____, Defendant

PROOF OF SERVICE

I, _____, hereby state that on
_____, I mailed a copy of the attached motion requesting
change of domicile to the opposing party/attorney at his/her last know address as follows:

Address: _____

Petitioner