

NAME CHANGE for an ADULT

Who Has No Minor Children

1

Forms and Instructions

Law Library Resource Center

**NAME CHANGE FOR AN
ADULT WITH NO MINOR CHILDREN**

CHECKLIST

You may use this packet if the following factors apply to your situation:

- ✓ You are a resident of the county where you are filing this request.
- ✓ You want to ask the Court to change your name, AND
- ✓ You are an adult 18 years or older, and you are not the parent of any minor children, AND
- ✓ You are prepared, under penalty of perjury, to inform the Court *whether you have ever been convicted of a felony*, and *whether there are any pending charges against you for a felony or other offense* involving false statements or misrepresentation of identity, AND
- ✓ You understand the change of name will neither harm your rights nor release you from any obligations or liabilities incurred under your current name, AND
- ✓ You are not changing your name to that of another person for the purpose of committing any crime or furthering any offense involving fraud or misrepresentation of identity.

NOTE: You do NOT need to request a name change through the Court if you get married and want to use your spouse's last name.

READ ME: Consulting a lawyer before filing documents with the court may help prevent unexpected results. A list of lawyers you may hire to advise you on handling your own case or to perform specific tasks, as well as a list of court-approved mediators can be found on the Law Library Resource Center website.

Request a change of name for an adult with no minor children

This packet contains court forms and instructions to file an application to change the name of an adult who is NOT the parent of any minor children. The documents should appear in order as listed. Items in **BOLD** are forms that you will need to file with the Court. Non-bold items are instructions or procedures. Do **not** copy or file those pages!

Order	File Number	Title	# Pages
1	CVNCA1k	Checklist: "You may use these forms if . . ."	1
2	CVNCA1t	Table of Contents (this page)	1
3	CVNCA10p	Procedures: How to File a for a Name Change	5
4	CV10f	"Civil Cover Sheet"	3
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6	CVNC18f	"Notice of Hearing Regarding Application for Change of Name"	1
7	CVNC16f	"Marital Waiver of Notice" (Use Only if Currently Legally Married)	1
8	CVNC24f	"Affidavit of Service by Certified Mail"	1
9	CVNC81f	"Order Changing Name for an Adult"	2
10	CVNC81f	"Order Changing Name for an Adult" (bring both to court)	2

The documents you have received are copyrighted by the Superior Court of Arizona in Maricopa County. You have permission to use them for any lawful purpose. These forms shall not be used to engage in the unauthorized practice of law. The Court assumes no responsibility and accepts no liability for actions taken by users of these documents, including reliance on their contents. The documents are under continual revision and are current only for the day they were received. It is strongly recommended that you verify on a regular basis that you have the most current documents.

LAW LIBRARY RESOURCE CENTER

PROCEDURES: HOW TO FILE FOR A CHANGE OF NAME FOR AN ADULT WITH NO MINOR CHILDREN

- STEP 1:** Fill out the “Civil Cover Sheet” and check box 152 for “Change of Name” on page 2.
- STEP 2:** Fill out the “Application for Change of Name for an Adult.” You or your attorney must complete the Application for your name change.
- STEP 3:** **PHOTOCOPY:** Make two (2) photocopies of your Application.
- STEP 4:** **GO to the Clerk of Court** to file your Application. The Court is open from 8 a.m. to 5 p.m. Monday through Friday. You should go to the Clerk of Court at least two hours before closing. Choose one of the following Superior Court locations:

Downtown Phoenix
201 W. Jefferson St.
Phoenix, AZ 85003

Northeast Court Facility
18380 North 40th Street
Phoenix, Arizona 85032

Northwest Court Facility*
14264 West Tierra Buena Lane
Surprise, Arizona 85374

Southeast Court Facility
222 East Javelina Avenue, 1st Floor
Mesa, Arizona 85210-6201

* You may file here but your hearing will be set at a different location.

- STEP 5:** **DELIVER your APPLICATION and FILING FEE** to the Clerk of Court. Give the Court Clerk the following:
- One (1) Civil Cover Sheet
 - One (1) Original Application for Name Change
 - Two (2) Photocopies of the Application
 - **Filing Fee (\$) Payment.** A list of current fees is available from the Law Library Resource Center and from the Clerk of Court’s website.
If you cannot afford the filing fee and/or the fee for having the papers served by the Sheriff or by publication, you may request a deferral (payment plan) when you file your papers with the Clerk of the Court. Deferral Applications are available at no charge from the Law Library Resource Center.
 - **WAIT** for the Clerk to “**date stamp**” **BOTH COPIES** of your Application and **RETURN** the copies to you.

STEP 6: SCHEDULE your HEARING with Court Administration.

- **Contact Court Administration** by using the appropriate telephone number below, at least four (4) business days after you file your Application for Name Change, to obtain the date, time, place of your hearing, and presiding Commissioner's name.
- **Telephone the number listed below** between the hours of 9 a.m. -12 noon or 1 p.m. – 4 p.m.:

If you filed you Application for Name Change at:

- 201 W. Jefferson, Phoenix, call 602-506-1497
- 18380 North 40th Street, Phoenix, call 602-506-1497
- 222 East Javelina Avenue, Mesa, 1st Floor, call 602-506-2023
- 14264 West Tierra Buena Lane, Surprise, call 602-506-1497*

***Applications may be filed at Northwest Court Facility, but the hearings will be held at one of the other locations.**

STEP 7: COMPLETE AND DELIVER THE “Notice of Hearing.” The “NOTICE OF HEARING Regarding Application for Change of Name” is how you must inform a person concerned with or affected by your name change. If you are married, you **MUST** inform your spouse of your name change.

- Fill out the “NOTICE OF HEARING Regarding Application for Change of Name” form in this packet. Use the information you learned from the telephone call with Court Administration to fill in the date, time and location of the hearing.
- **PHOTOCOPY** the completed “NOTICE OF HEARING” – make at least two (2) photocopies. (You may need more than two (2) copies if you choose to inform more than one person concerned with or affected by your name change.)
- **Deliver** the completed “NOTICE OF HEARING” form to one of the Clerk of Court locations listed in STEP 4 above.

STEP 8: NOTIFY ANY INTERESTED PERSON. An interested person is a person concerned with or affected by your name change.

A Note about Response Times

If you serve an interested party notice by personal service or they agree to signing and notarizing an “Acceptance of Service,” the party will have twenty (20) days after service to file a response. However, if you ask a party to sign and notarize a “Waiver of Notice” and they agree, the party is allowed more time to respond. The party has sixty (60) days to respond after the request for waiver was sent, or ninety (90) days after it was sent outside the United States. A.R.C.P. (12)(a)(1)(A). The “Affidavit of Service,” “Acceptance of Service” or “Waiver of Notice” must be signed and filed with the court as proof.

- A. IF YOU ARE NOT MARRIED:** You must provide **NOTICE** to any person (Interested Party) concerned with or affected by your name change. There are at least two ways to provide NOTICE to an Interested Party:

(1) **HAND DELIVERY**

- GIVE the Interested Party (1) date stamped copy of your **Application**, and (1) **Notice of Hearing** which states the date, time, and place of the hearing.
- ASK the Interested Party to **SIGN AN “Acceptance of Service” form** (Available at the Law Library Resource Center). This “Acceptance of Service” form is your PROOF of NOTICE.
- **NOTARIZE:** Take the Interested Party and the completed, “Acceptance of Service” form to a Notary and have the Interested Party **SIGN the FORM before the Notary.**
- **TAKE the NOTARIZED “WAIVER” form** to the hearing.

(2) **CERTIFIED MAIL DELIVERY: MUST BE DONE AT LEAST 30 DAYS BEFORE THE HEARING:**

- **MAIL by CERTIFIED RETURN RECEIPT** the following to the Interested Party: (1) date stamped copy of your **Application**, and (1) **Notice of Hearing** which states the date, time, and place of the hearing.
- Your PROOF of Notice for this “MAIL” step is the postcard you receive in the mail showing delivery.
- **Fill Out** the “Affidavit of Service” form in this packet.
- **NOTARIZE:** Take the completed, “Affidavit of Service” form to a Notary and **SIGN the FORM before the Notary.**
- **TAKE (1) NOTARIZED “Affidavit” form** and (1) **Returned Postcard** to the hearing

B. IF YOU ARE MARRIED:

1. If **SPOUSE AGREES WITH THIS NAME CHANGE APPLICATION**

- GIVE your spouse (1) date stamped copy of your **Application**, and (1) **Notice of Hearing** which states the date, time, and place of the hearing.
- ASK your Spouse to **COMPLETE the form** from this packet called “Marital Waiver of Notice.” This “Marital Waiver” form is your PROOF of NOTICE.
- **NOTARIZE:** Take your Spouse and the completed, “Marital Waiver of Notice” form to a Notary and have your **Spouse SIGN the FORM before the Notary.**
- **TAKE the NOTARIZED “MARITAL WAIVER” form** to the hearing.

2. If **SPOUSE DOES NOT AGREE** with this Name Change Application -OR- YOU ARE **NOT SURE IF SPOUSE AGREES**, choose either **Option (a)**, or **Option (b)**:

Option (a): HAND DELIVERY

- GIVE your spouse (1) date stamped copy of your **Application**, and (1) **Notice of Hearing** which states the date, time, and place of the hearing.
- ASK your Spouse to **SIGN AN “Acceptance of Service” form** (Available at the Law Library Resource Center). This “Acceptance of Service” form is your PROOF of NOTICE.
- **NOTARIZE:** Take your Spouse and the completed, “Acceptance of Service” form to a Notary and have your **Spouse SIGN the FORM before the Notary.**
- **TAKE the NOTARIZED “MARITAL WAIVER” form** to the hearing.

Option (b) CERTIFIED MAIL DELIVERY: MUST BE DONE AT LEAST 30 DAYS BEFORE THE HEARING:

- **MAIL by CERTIFIED RETURN RECEIPT** the following to your Spouse: (1) date stamped copy of your **Application**, and (1) **Notice of Hearing** which states the date, time, and place of the hearing.
- Your **PROOF** of Notice for this "MAIL" step is the postcard you receive in the mail showing delivery.
- **Fill Out** the "Affidavit of Service" form in this packet.
- **NOTARIZE:** Take the completed, "Affidavit of Service" form to a Notary and **SIGN the FORM before the Notary.**
- **TAKE (1) NOTARIZED "Affidavit" form and (1) Returned Postcard** to the hearing.

C. IF YOU DO NOT KNOW WHERE YOUR SPOUSE LIVES: NOTICE BY PUBLICATION:
The Court will not accept NOTICE by Publication unless diligent efforts have been made to locate the person for whom NOTICE is required. For more information about Service by Publication, please see the Law Library Resource Center Packet on "*Service of Court Papers When you Cannot Find the Other Party.*"

(1) If Spouse's last known address is in Maricopa County or a state OTHER THAN ARIZONA:

- **OBTAIN** an "Affidavit of Service" from the Law Library Resource Center.
- **Take** your completed Notice of Hearing to a newspaper of general circulation in Maricopa County.
- **Give** the Classified Advertising Staff your Notice of Hearing.
- **ASK** the newspaper staff to **PUBLISH a LEGAL NOTICE** (Classified advertisement showing the date, time and place of your hearing) **ONCE A WEEK FOR four (4) CONSECUTIVE WEEKS before the hearing.**

(2) If Spouse's last known address is in an Arizona County OTHER THAN MARICOPA COUNTY: You must publish NOTICE in TWO (2) Newspapers.

- **OBTAIN** an "Affidavit of Service" from the Law Library Resource Center.
- **Take** your completed Notice of Hearing to **BOTH** a newspaper of general circulation in Maricopa County **AND a newspaper of general circulation in the County of the Spouse's last known address.**
- **Give** the Classified Advertising Staff your Notice of Hearing.
- **ASK** the newspaper staff to **PUBLISH a LEGAL NOTICE** (Classified advertisement showing the date, time and place of your hearing) **ONCE A WEEK FOR four (4) CONSECUTIVE WEEKS before the hearing.**

AFTER PUBLICATION ONCE A WEEK FOR 4 CONSECUTIVE WEEKS:

- **OBTAIN an AFFIDAVIT OF PUBLICATION** from the Law Library Resource Center.
- **GO to the NEWSPAPER** where the NOTICE was published.
- **REQUEST** newspaper staff to **COMPLETE THE AFFIDAVIT of PUBLICATION**
- **TAKE** the Affidavit of Publication to the Clerk of Court where you filed the name Change Application
- **FILE the AFFIDAVIT of PUBLICATION** with the Clerk of Court.

STEP 9: ATTEND THE HEARING. Adults who request a name change **MUST** attend the hearing. **PLEASE BRING ALL OF THE FOLLOWING TO THE HEARING:**

- **BRING TWO (2) COPIES** of the “**ORDER CHANGING NAME FOR AN ADULT**” to the hearing for the Judge to sign. (One copy will be kept in the Court file, and the other copy of the ORDER will be prepared for certification and then returned to you.)
- Be prepared to **pay a FEE (\$)** for each certified copy of the ORDER.
- **BRING PHOTO IDENTIFICATION** of the person requesting a name change to the hearing. Government-issued photo identification, such as a drivers’ license is acceptable.
- **BRING A COPY** of your original **BIRTH CERTIFICATE**.
- **BRING** A date stamped **copy of ALL of your FILED DOCUMENTS**.
- **BRING PROOF OF NOTICE** (As described in Step 8).
- **BRING A COPY OF YOUR DIVORCE DECREE** (If Applicable).
- **BRING A COPY OF prior NAME CHANGE ORDERS** (If Applicable).
- **BRING PROOF of NATURALIZATION or RESIDENT ALIEN STATUS** (If Applicable).
- **BRING A COPY of ORDERS OF PROTECTION and/or INJUNCTIONS AGAINST HARASSMENT still in effect** (if Applicable).
- **IF YOU ARE NOT A UNITED STATES CITIZEN** and are requesting this name change, **BRING your PASSPORT OR PROOF OF IMMIGRATION STATUS**.

HELPFUL NOTES about ATTENDING the HEARING

1. You must have all of the above documents for the Court to consider your Application.
2. The Court will not issue a Birth Certificate Change unless you bring a copy of your original Birth certificate to the HEARING.
3. Hospital-issued birth certificates ceremonial and generally will NOT satisfy Court requirements.
4. ALWAYS COPY any DOCUMENTS you give to the Court, and keep one copy for your records.
5. The Judicial Clerk will give you a Judge signed copy of the court order if the Judge orders a name change.

STEP 10: AFTER THE HEARING. If the Judge orders a name change to your Birth Certificate:

- **GET CERTIFIED COURT ORDER:** Within 48 hours of the hearing, **TAKE THE** Judge-signed Court **ORDER to the Court CLERK**.
- **PAY the FEE (\$)** to get your **ORDER CERTIFIED** by the CLERK.
- If more than 48 hours after the hearing has passed, you must go to the Clerk of Court Customer Service Center at 601 West Jackson Street in Phoenix to get a **CERTIFIED ORDER**.
- **If you want the State Office of Vital Records to issue you a Birth Certificate with your CHANGED NAME, you must provide Vital Records with a Certified Copy of the Court Order Changing your Name.**
- The State Vital Records Office at 1818 W. Adams, Phoenix, AZ. 85007, is only available for mail-in service. Vital Records general telephone number is 602-364-1300. Please call for another walk-in location. A fee is required for a change to any birth certificate.

In the Superior Court of the State of Arizona
In and For the County of _____

Case Number _____

CIVIL COVER SHEET- NEW FILING ONLY
(Please Type or Print)

Plaintiff's Attorney _____

Attorney Bar Number _____

Is Interpreter Needed? Yes No

If yes, what language(s):

Plaintiff's Name(s): (List all) Plaintiff's Address: Phone #: Email Address:

(List additional Plaintiffs on page two and/or attach a separate sheet).

Defendant's Name(s): (List All)

(List additional Defendants on page two and/or attach a separate sheet)

RULE 26.2 DISCOVERY TIER OR MONETARY RELIEF CLAIMED:

IMPORTANT: Any case category that has an asterisk (*) MUST have a dollar amount claimed or Tier selected. State the monetary amount in controversy or place an "X" next to the discovery tier to which the pleadings allege the case would belong under Rule 26.2.

Amount Claimed \$ _____ Tier 1 Tier 2 Tier 3

NATURE OF ACTION

Place an "X" next to the **one** case category that most accurately describes your primary case. **Any case category that has an asterisk (*) MUST have a dollar amount claimed or Tier selected as indicated above.**

100 TORT MOTOR VEHICLE:

- 101 Non-Death/Personal Injury*
- 102 Property Damage*
- 103 Wrongful Death*

- 111 Negligence*
- 112 Product Liability – Asbestos*
- 112 Product Liability – Tobacco*
- 112 Product Liability – Toxic/Other*
- 113 Intentional Tort*
- 114 Property Damage*
- 115 Legal Malpractice*

110 TORT NON-MOTOR VEHICLE:

- 115 Malpractice – Other professional*
 117 Premises Liability*
 118 Slander/Libel/Defamation*
 116 Other (Specify) _____ *

120 MEDICAL MALPRACTICE:

- 121 Physician M.D.* 123 Hospital*
 122 Physician D.O.* 124 Other*

130 & 197 CONTRACTS:

- 131 Account (Open or Stated)*
 132 Promissory Note*
 133 Foreclosure*
 138 Buyer-Plaintiff*
 139 Fraud*
 134 Other Contract (e.g., Breach of Contract)*
 135 Excess Proceeds-Sale*
 Construction Defects (Residential/Commercial)*
 136 Six to Nineteen Structures*
 137 Twenty or More Structures*
 197 Credit Card Debt (Maricopa County Filings Only)*

145 & 150-199 OTHER CIVIL CASE TYPES:

- 156 Eminent Domain/Condemnation*
 151 Eviction Actions (Forcible and Special Detainers)*
 152 Change of Name
 153 Transcript of Judgment
 154 Foreign Judgment
 158 Quiet Title*
 160 Forfeiture*
 175 Election Challenge
 179 NCC-Employer Sanction Action (A.R.S. §23-212)*

- 180 Injunction against Workplace Harassment
 181 Injunction against Harassment
 182 Civil Penalty
 186 Water Rights (Not General Stream Adjudication)*
 187 Real Property *
 145 Special Action against Lower Courts (See lower court appeal cover sheet in Maricopa)
 194 Immigration Enforcement Challenge (A.R.S. §§1-501, 1-502, 11-1051)
 199 Expungement

144 & 150-199 UNCLASSIFIED CIVIL:

- 144 Administrative Review (See Lower Court Appeal cover sheet in Maricopa)
 150 Tax Appeal (All other tax matters must be filed in the AZ Tax Court)
 155 Declaratory Judgment
 157 Habeas Corpus
 184 Landlord Tenant Dispute – Other*
 190 Declaration of Factual Innocence (A.R.S. §12-771)
 191 Declaration of Factual Improper Party Status
 193 Vulnerable Adult (A.R.S. §46-451)*
 165 Tribal Judgment
 167 Structured Settlement (A.R.S. §12-2901)
 169 Attorney Conservatorships (State Bar)
 170 Unauthorized Practice of Law (State Bar)
 171 Out-of-State Deposition for Foreign Jurisdiction
 172 Secure Attendance of Prisoner
 173 Assurance of Discontinuance
 174 In-State Deposition for Foreign Jurisdiction
 176 Eminent Domain– Light Rail Only*
 177 Interpleader– Automobile Only*

- 178 Delayed Birth Certificate (A.R.S. §36-333.03)
- 183 Employment Dispute – Discrimination*
- 185 Employment Dispute – Other*
- 198 Verified Rule 27(a) Petition*
- 196 Verified Rule 45.2 Petition
- 195(a) Amendment of Marriage License
(Maricopa County Filings Only)

- 195(b) Amendment of Birth Certificate
- 163 Other* _____
(Specify)

EMERGENCY ORDER SOUGHT

- Temporary Restraining Order Provisional Remedy OSC Election Challenge
- Employer Sanction Other (Specify) _____

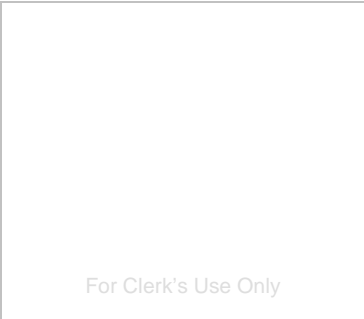
COMMERCIAL COURT (Maricopa County Only)

This case is eligible for the Commercial Court under Rule 8.1, and Plaintiff requests assignment of this case to the Commercial Court. More information on the Commercial Court, including the most recent forms, are available on the Court’s website at:
<https://www.superiorcourt.maricopa.gov/commercial-court/>.

Additional Plaintiff(s):

Additional Defendant(s):

Person Filing: _____
Address (if not protected): _____
City, State, Zip Code: _____
Telephone: _____
Email Address: _____
Lawyer's Bar Number: _____



Representing Self, without a Lawyer or Attorney for Petitioner OR Respondent

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

In the Matter of:

Case Number: CV _____

APPLICATION FOR CHANGE OF NAME FOR AN ADULT

Current Name of Applicant

(A.R.S. § 12-601)

INFORMATION ABOUT ME, THE APPLICANT

1. **BIRTH NAME:** on your original registered state Birth Record (Certificate):

First	Middle	Last

Date of Birth: _____

City of Birth: _____

County of Birth: _____

2. **CURRENT LEGAL NAME:**

First	Middle	Last

Current Address: _____

Current City of Residence: _____

Current State of Residence & Zip Code: _____

This is my married name, and that of my Current Spouse Past Spouse

3. OTHER NAMES: (Check all that Apply)

I was previously married –

- o From _____ to _____ and used the following name:
(Month, Year) (Month, Year)

First	Middle	Last

I was previously married –

- o From _____ to _____ and used the following name:
(Month, Year) (Month, Year)

First	Middle	Last

I changed my name – from this name: _____

- o When? _____ to _____ and used the following name:
(Month, Year) (Month, Year)

First	Middle	Last

I changed my name – from this name: _____

- o When? _____ to _____ and used the following name:
(Month, Year) (Month, Year)

First	Middle	Last

I have used the following alias: _____

- o When? _____ to _____ I used the following name:
(Month, Year) (Month, Year)

First	Middle	Last

I have used the following alias: _____

- o When? _____ to _____ I used the following name:
(Month, Year) (Month, Year)

First	Middle	Last

REQUESTS TO THE COURT

1. I ASK THAT MY NAME BE CHANGED TO:

First	Middle	Last

2. I ask that the birth records be ordered changed to reflect the new name requested above.

STATEMENTS TO THE COURT (REQUIRED BY ARIZONA LAW (A.R.S. § 12-601(C)))

Under Penalty of Perjury, I state the following as true:

(Check the boxes that indicate a true statement.) (For "4", *explain.*)

1. I submit this application solely for the benefit and in the best interests of the person for whom the name change is requested.
2. I understand and acknowledge that this change of name, if granted, will not release me from any obligations incurred or harm any rights of property or action in any previous name.
3. I am not knowingly requesting this change of name to that of another individual for the purpose of committing or furthering any offense of theft, forgery, fraud, perjury, organized crime or terrorism or any other offense involving false statements.
4. I request this name change because: (Explain)

5. Have you ever been convicted of a felony? Yes No

If "Yes," all felony convictions are listed below.

	Felony Case No.	County & State	Sentence	Date of Conviction
1				
2				
3				
4				
5				

Is there anything regarding your felony conviction(s) that you would like to bring to the Court's attention? (Optional)

6. Are there any criminal charges (*felony or misdemeanor*) pending against you at this time?

Yes No

If "Yes," all pending charges are listed below:

	Pending Charges	Name of Court or City & State	Case No.
1			
2			
3			
4			
5			

Is there anything regarding your pending criminal charges that you would like to bring to the Court's attention? (Optional)

UNDER OATH OR BY AFFIRMATION

I swear or affirm under penalty of perjury that the contents of this document are true and correct to the best of my knowledge and belief.

Date

Petitioner's Signature

Printed Name

STATE OF _____

COUNTY OF _____

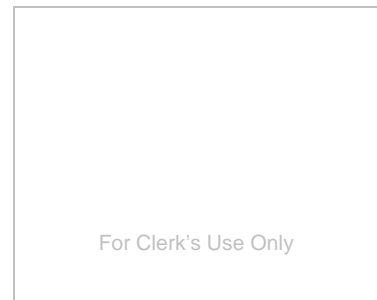
Subscribed and sworn to or affirmed before me this: _____ by
(date)

_____.

(notary seal)

Deputy Clerk or Notary Public

Person Filing: _____
Address (if not protected): _____
City, State, Zip Code: _____
Telephone: _____
Email Address: _____
Lawyer's Bar Number: _____



Representing Self, without a Lawyer or Attorney for Petitioner OR Respondent

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

In the Matter of: _____

Case Number: _____

NOTICE OF HEARING REGARDING APPLICATION FOR CHANGE OF NAME

Name(s) of person(s) requesting name change

READ THIS NOTICE CAREFULLY. An important court proceeding that affects your rights has been scheduled. If you do **not** understand this Notice or the other court papers, contact an attorney for legal advice.

1. **NOTICE:** An application for Change of Name has been filed with the Court by the person(s) named above. A hearing has been scheduled where the Court will consider whether to grant or deny the requested change. If you wish to be heard on this issue, you must appear at the hearing at the date and time indicated below.
2. **COURT HEARING.** A court hearing has been scheduled to consider the Application as follows:

DATE: _____ TIME: _____

BEFORE:

Commissioner _____
125 W. Washington Street
Courtroom _____
Phoenix, AZ 85003

Commissioner _____
18380 North 40th Street
Courtroom _____
Phoenix, AZ 85032

Commissioner _____
222 E. Javelina Avenue
Courtroom _____
Mesa, AZ 85210

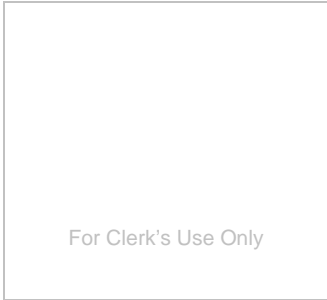
Commissioner _____
101 W. Jefferson , ____ floor
Courtroom _____
Phoenix, AZ 85003

Commissioner _____
201 W. Jefferson , ____ floor
Courtroom _____
Phoenix, AZ 85003

DATED: _____
(Month/Day/Year)

Applicant's Signature

Person Filing: _____
Address (if not protected): _____
City, State, Zip Code: _____
Telephone: _____
Email Address: _____
Lawyer's Bar Number: _____



Representing Self, without a Lawyer or Attorney for Petitioner OR Respondent

**SUPERIOR COURT OF ARIZONA
IN MARICOPA COUNTY**

In the Matter of: _____ Case Number: _____

MARITAL WAIVER OF NOTICE

(Person Requesting Name Change)

REQUIRED INFORMATION, UNDER OATH OR AFFIRMATION:

1. INFORMATION ABOUT ME (the spouse of the applicant):

Name: _____

Address: _____

Telephone: _____

Date of Birth: _____
Month Date Year

I am married to the Applicant (the person requesting the name change).

2. I waive notice of all further proceedings in this matter.

UNDER OATH OR BY AFFIRMATION

I swear or affirm under penalty of perjury that the contents of this document are true and correct to the best of my knowledge and belief.

Date

Spouse's Signature

STATE OF _____

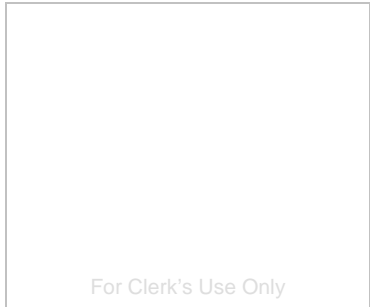
COUNTY OF _____

Subscribed and sworn to or affirmed before me this: _____ by
(date)

(notary seal)

Deputy Clerk or Notary Public

Person Filing: _____
Address (if not protected): _____
City, State, Zip Code: _____
Telephone: _____
Email Address: _____
Lawyer's Bar Number: _____



Representing Self, without a Lawyer or Attorney for Petitioner OR Respondent

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

Name of Applicant

Case Number: _____

AFFIDAVIT OF SERVICE BY CERTIFIED MAIL

1. I am familiar with the facts stated in this Affidavit, and I make this Affidavit to show that I have served copies of the **“Application for Change of Name”** and the **“Notice of Hearing Regarding Application for Change of Name”** on the person named below by certified mail/restricted delivery, return receipt requested.

Person served (name of other party): _____

Address where other party was served: _____

Date of receipt by the other party: _____

2. The Application and Notice listed above were received by the other party as shown by the receipt, the original of which is attached to this Affidavit on a separate piece of paper.

UNDER OATH OR BY AFFIRMATION

I swear or affirm under penalty of perjury that the contents of this document are true and correct to the best of my knowledge and belief.

Date

Petitioner's Signature

STATE OF _____

COUNTY OF _____

Subscribed and sworn to or affirmed before me this: _____ by
(date)

_____.

(notary seal)

Deputy Clerk or Notary Public

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

For Clerk's Use Only

In the Matter of:

Name of Applicant

Case Number: _____

ORDER CHANGING NAME OF AN ADULT

THE COURT FINDS:

1. This case has come before this Court
 to change the current legal name of the Applicant.
 to change the birth record of the Applicant
2. This Court has jurisdiction to change the legal name and/or the Birth Record of the Applicant.
3. Good cause exists to grant the application for change of name.

THE COURT ORDERS:

1. The current legal name of the Applicant:

First Middle Last

Date of Birth: _____
Month Day Year

Place of Birth: _____
City State Nation

IS CHANGED TO:

First Middle Last

The Birth record name of the Applicant:

First Middle Last

Date of Birth: _____

Month Day Year

Place of Birth: _____

City State Nation

IS CHANGED TO:

First Middle Last

2. For a person born in the State of Arizona, the Office of Vital Records is ordered to amend the birth record to reflect the new name as above ordered.

For a person born in any other state, to the extent that the agency that maintains birth records in that state is authorized to honor an order of this Court, that agency is requested or ordered to amend its birth records to reflect the new name as above ordered.

3. This Order does not release the Applicant from any obligations incurred or harm any rights of property or action in any original name.

4. Other orders: _____

DONE IN OPEN COURT: _____

Date

Judicial Officer

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

For Clerk's Use Only

In the Matter of:

Name of Applicant

Case Number: _____

ORDER CHANGING NAME OF AN ADULT

THE COURT FINDS:

1. This case has come before this Court
 to change the current legal name of the Applicant.
 to change the birth record of the Applicant
2. This Court has jurisdiction to change the legal name and/or the Birth Record of the Applicant.
3. Good cause exists to grant the application for change of name.

THE COURT ORDERS:

1. The current legal name of the Applicant:

First Middle Last

Date of Birth: _____
Month Day Year

Place of Birth: _____
City State Nation

IS CHANGED TO:

First Middle Last

The Birth record name of the Applicant:

First Middle Last

Date of Birth: _____

Month Day Year

Place of Birth: _____

City State Nation

IS CHANGED TO:

First Middle Last

2. For a person born in the State of Arizona, the Office of Vital Records is ordered to amend the birth record to reflect the new name as above ordered.

For a person born in any other state, to the extent that the agency that maintains birth records in that state is authorized to honor an order of this Court, that agency is requested or ordered to amend its birth records to reflect the new name as above ordered.

3. This Order does not release the Applicant from any obligations incurred or harm any rights of property or action in any original name.

4. Other orders: _____

DONE IN OPEN COURT: _____

Date

Judicial Officer