

**IN THE SUPERIOR COURT OF FORSYTH COUNTY  
STATE OF GEORGIA**

	)	
	)	
Plaintiff	)	Civil Action
	)	File No. _____
v.	)	
	)	
	)	
Defendant	)	

**REQUEST FOR CIVIL NON-JURY HEARING for Cases assigned to  
Judge Philip C. Smith, Division 3**

**Please complete this form and return to:**  
Forsyth County Superior Court Clerk, 101 East Courthouse Square, Suite 1007, Cumming, GA 30040, Attention: Civil Division

- All information requested **MUST** be provided or you will not be assigned a court date.
- Please include a self-addressed stamped envelope so a copy of the completed form with a court date assigned may be returned to you.
- You are responsible for notifying all other parties of the court date assigned. **You must complete and file with the Clerk's office a certificate of service representing that you have mailed a copy of the completed and filed request for hearing form to all other parties.**

Name of Attorney or Party requesting hearing: \_\_\_\_\_

Name(s) of opposing counsel: \_\_\_\_\_

Guardian Ad Litem (if applicable): \_\_\_\_\_

Purpose of hearing (Temporary Hearing, Final Hearing, Name of Motion(s) to be heard):

Does the case involve contested custody?       YES       NO  
 If yes, has the case been to mediation?       YES       NO

*(If the case involves contested custody and mediation has not yet been requested and completed, no hearing date will be assigned. Please contact the Judge's Office for a mediation referral request form or for directions on obtaining an emergency hearing.)*

**\*\*Will the hearing take longer than 1 ½ hours total for both parties to complete?**       Yes       No  
 Estimated time:      \_\_\_\_\_ Plaintiff      \_\_\_\_\_ Defendant

*Note: Hearings for 1 ½ hours or less will be scheduled by the Clerk's Office on the appropriate day. If the hearing will take longer than 1 ½ hours, then your request will be forwarded to the Judge's Office to be set on a bench trial calendar. Your matter may be required to be continued to a bench trial calendar set by the Judge's Office if your hearing exceeds 1 ½ hours on a date scheduled by the Clerk's Office. Your hearing date and time will be indicated below.*

**RULE NISI**

A hearing concerning the above referenced matter having been requested, the parties are hereby ordered to appear on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ at \_\_\_\_\_ o'clock \_\_. m. in Courtroom 503 of the Forsyth County Courthouse. This is a \_\_\_\_\_ day calendar including the following dates: \_\_\_\_\_.

A calendar call will be conducted at 9:00 a.m. on the date assigned and priorities will be set at that time. Appearance is mandatory at calendar call to remain on the calendar.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Date returned to requesting party: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
Deputy Clerk or Calendar Clerk

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_____	)	
Plaintiff	)	Civil Action
v.	)	File No. _____
_____	)	Judge Philip C. Smith
Defendant	)	

**CERTIFICATE OF SERVICE**

This is to certify that I have this day served the parties in the foregoing matter with a copy of the attached hearing request form by depositing said copy in the United States Mail in a properly addressed envelope with adequate postage thereon as follows:

**Name and Address of Opposing Attorney/Party:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
Signature of Party Requesting Hearing

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
Phone: \_\_\_\_\_

**Do not file until a completed Rule Nisi has been filed with the Clerk of Court**