
My Name

Address

City, State, Zip

Phone

Email

I am the Plaintiff/Petitioner Defendant/Respondent
 Attorney for:
 Plaintiff/Petitioner Defendant/Respondent, and my Utah Bar number
is _____
 Person with Power of Attorney for:
 Plaintiff/Petitioner Defendant/Respondent, who is in military service

In the District Justice Court of Utah
_____ Judicial District _____ County
Court Address _____

<p>_____ Plaintiff/Petitioner</p> <p>V.</p> <p>_____ Defendant/Respondent</p>	<p>Request to Submit for Decision</p> <p><input type="checkbox"/> Hearing Requested</p> <p>_____ Case Number</p> <p>_____ Judge</p> <p>_____ Commissioner</p>
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Instructions: Attach the following:

- Notice of Hearing (if a hearing has been requested)
- Proposed Order on Motion for Stay under the Servicemembers Civil Relief Act

By and through my legal representative (attorney or person with power of attorney, check here if you are appearing for your client or the service member.)

I say as follows:

- (1) The Motion for Stay under the Servicemembers Civil Relief Act was filed and served on _____ (date).
- (2) An opposing statement
[] was not filed
[] was filed and served on _____ (date).
- (3) A reply to the opposing statement
[] was not filed
[] was filed and served on _____ (date).
- (4) A hearing [] has [] has not been requested.
- (5) [] I request a hearing.
[] I do not request a hearing.
- (6) I request that the motion be submitted for decision because it is now ready for the court to review and issue a decision.

I have not included any non-public information in this document.

I declare under penalty of Utah Code Section 78B-5-705 that everything stated in this document is true and correct.

_____ Sign here ► _____
Date
Typed or Printed Name _____

Certificate of Service

I certify that I served a copy of this document on the following people.

Person's Name	Method of Service	Served at this Address	Served on this Date
(Other Party or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-File <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Clerk of Court)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-File		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-File <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-File <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

_____ Sign here ► _____
 Date

 Typed or Printed Name