

MOTION TO REHEAR

Commonwealth of Virginia VA. CODE §§ 16.1-133.1; 16.1-97.1; 20-66; 8.01-322

.....
CITY OR COUNTY

General District Court
Juvenile & Domestic Relations District Court

.....
STREET ADDRESS OF COURT

I, the undersigned, respectfully request that this Court reopen the case named at right for the following reasons:

.....
DATE OF MOTION

.....
APPLICANT'S TITLE

.....
APPLICANT'S SIGNATURE

NOTICE OF HEARING VA. CODE § 16.1-97.1

TO:

RESPONDENT

Take notice that a hearing will be held in this Court on

..... m. on this motion.

.....
DATE

.....
CLERK

HEARING DATE

CASE NO. ,

**MOTION TO REHEAR
AND
NOTICE OF HEARING**

Commonwealth of Virginia

In re/V.

DATE OF ORIGINAL JUDGMENT OR FINAL HEARING

Service on Respondent type required:

Personal Service Only

Personal or Substituted Service Only

Mailed on
DATE

RETURNS: Each defendant was served according to law, as indicated below, unless not found.

NAME	
ADDRESS	
<input type="checkbox"/> PERSONAL SERVICE	Tel. No.
<input type="checkbox"/> Being unable to make personal service, a copy was delivered in the following manner: <input type="checkbox"/> Delivered to family member (not temporary sojourner or guest) age 16 or older at usual place of abode of party named above after giving information of its purport. List name, age of recipient, and relation of recipient to party named above: <input type="checkbox"/> Posted on front door or such other door as appear to be the main entrance of usual place of abode, address listed above. (Other authorized recipient not found.) <input type="checkbox"/> Served on the Secretary of the Commonwealth.	
<input type="checkbox"/> not found SERVING OFFICER
..... for	
DATE	

NAME	
ADDRESS	
<input type="checkbox"/> PERSONAL SERVICE	Tel. No.
<input type="checkbox"/> Being unable to make personal service, a copy was delivered in the following manner: <input type="checkbox"/> Delivered to family member (not temporary sojourner or guest) age 16 or older at usual place of abode of party named above after giving information of its purport. List name, age of recipient, and relation of recipient to party named above: <input type="checkbox"/> Posted on front door or such other door as appear to be the main entrance of usual place of abode, address listed above. (Other authorized recipient not found.) <input type="checkbox"/> Served on the Secretary of the Commonwealth.	
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..... for	
DATE	