

**PETITION FOR
GUARDIANSHIP OVER
AN ADULT**

**GENERAL
INFORMATION SHEET**

PETITION FOR GUARDIANSHIP OVER AN ADULT

GENERAL INFORMATION SHEET

IMPORTANT

**THIS PACKET IS IN NO WAY INTENDED TO SUBSTITUTE FOR THE
ADVICE OF A PRIVATE ATTORNEY**

Private Counsel Is Always Recommended For Legal Matters

The law allows any person to represent themselves in a legal action. However, filing an action with the court and representing yourself in the courtroom can be a complicated legal procedure and this packet does not attempt to address all the legal issues involved in bringing your matter before the court. This packet is created to help you access the legal system without the assistance of an attorney.

When representing yourself, you are responsible for understanding the law that governs your case and for filing the proper legal documents. The laws and rules are set out in the Nevada Revised Statutes, The Rules of Civil Procedure, and the local rules governing the jurisdiction in which you are filing your documents.

When you sign these documents and present them for filing with the court, it is assumed by the court that you have carefully read the documents, that you understand all the terms in the documents, that you agree with all the provisions in the documents, and that you are aware of all the consequences those provisions may produce.

Before filling in any portion of the following documents, read all the materials included in this packet regarding guardianship, including the definitions of terms.

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What is a Guardianship?

A guardianship is a legal relationship between two people. It is used when someone cannot take care of himself or his property. The person who needs assistance is the "proposed ward". If guardianship is granted, that person will be the "ward". The person who is going to take care of the ward is the "proposed guardian". After the guardianship is granted, that person is the "guardian". The way to ask the Court to establish guardianship is by filing a Petition for Appointment of Guardian.

Are there different types of guardianships?

Yes. There are court-ordered guardianships and guardianships that do not go through the court system. *Some organizations and businesses will not follow a guardianship that has not been ordered by the court.* This packet contains information for court-ordered guardianships. You may contact Nevada Legal Services at 1-800-323-8666, VARN at (775) 883-8278 or the Family Court Self-Help Center in Reno, Nevada at (775) 625-6731 if you would like to pursue a guardianship that does not go through the court system.

There are three types of court-ordered guardianships: (1) Guardianship of the Person, (2) Guardianship of the Estate, (3) Guardianship of the Person and the Estate.

In a guardianship of the person, the guardian is responsible for personal/medical decisions only. Someone else will make all financial decisions, or there are no financial decisions to be made.

In a guardianship of the estate, the guardian is responsible for financial decisions only. Someone else will make personal and medical decisions.

In a guardianship of the person and the estate, the guardian is responsible for the ward's financial and personal/medical well-being.

Please see the Definitions that are part of this packet or Chapter 159 of the Nevada Revised Statutes for more details on the types of court-ordered guardianships and the responsibilities of the guardian for each of these guardianships.

How do I get a court-ordered guardianship in Nevada?

In general, you must file a Petition in the county where the Ward resides. If the Ward does not reside in Nevada, you may file in any Nevada county where the Ward has property or where the Ward is physically present.

You will need to give the proposed ward and relatives within the “second degree of consanguinity” notice that you want to get a guardianship over the proposed ward and also notice of the hearing for your petition. If the proposed ward is in a care facility, you also need to notify the administrator or manager of that facility. The Department of Veterans Affairs must be notified, if the ward receives money from it. You do this by mailing copies of the Petition for Appointment of Guardian(s) and the Citation to Appear and Show Cause to them or by personally serving the Petition and the Citation. If you choose to mail the documents, the mailing must be by certified mail, return receipt requested (the green cards that are mailed back after the person picks up the mail). If you cannot find some of the people entitled to notice, you may ask the court to serve them by publishing the Citation in the newspaper. You must receive the judge’s permission to do this.

You will need to have a court hearing before the judge will decide whether to grant the guardianship. You will need to check with the court clerk or self-help center to ask what steps need to be taken to obtain a hearing date for your petition.

If, after a hearing, the judge decides to grant your petition for guardianship, you will need to file the Order Appointing Guardian and obtain “General Letters of Guardianship”. You will also need to mail notice that the order was filed to the same people who received notice of the petition.

If the guardianship is over an estate, you must file an Inventory with the court. You must file an inventory within 60 days from the date you are appointed guardian.

Please see the Definitions that are part of this packet to learn more about the terms used in this explanation.

How do I file my paperwork?

The procedure for filing paperwork and setting hearings varies from county to county. Please call the clerk’s office for the county in which you plan to file the petition and ask about that court’s procedural requirements. If you are filing in Washoe County or Clark County, you may call the Self-Help Centers for those counties to learn more about the procedures in those courts. The telephone number numbers are:

Family Court Self-Help Center (Washoe County): (775) 325-6731
Family Law Self Help-Center (Clark County) (702) 455-1500

Please Note: If a document must be notarized, a clerk at the court may witness your signature instead of a notary public.

When can I use this set of forms?

You can use this Petition for Appointment of Guardian if:

- The proposed ward is 18 years old or older.
- One or two people will be the guardian(s) of the proposed ward.
- At least one of the person(s) who will be the guardian and the person who will be the ward are Nevada residents.

Note: If the guardianship is for an estate, at least some of the money/property must be in Nevada.

- The guardian(s) has never been disbarred or suspended from practicing law, accounting or any other profession that involves the management or sale of money, investments, securities or real property that requires a license.

What forms and information should be in this packet?

This packet should contain the following documents:

- General Information Sheet
- Petition for Appointment of Guardian
- Confidential Information Sheet
- Confidential Medical Information Sheet
- Affidavit Regarding Petitioner Regarding Medical Certification
- Citation to Appear and Show Cause
- Affidavit of Service
- Order Appointing Guardian
- General Letters of Guardianship
- Notice of Entry of Order
- Inventory, Appraisal and Record of Value

1 Code:
2 (Your name) _____

3 (Address) _____

4 _____
5 (Telephone) _____

6 In Proper Person

7 IN THE _____ JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA

8 IN AND FOR THE COUNTY OF _____

10 In the Matter of the Guardianship of)

11 the person,)

12 the estate,)

13 the person and estate.)

CASE NO. _____

DEPT. NO: _____

14 of:)

15 _____)

An Adult.)

16
17 **PETITION FOR APPOINTMENT OF GUARDIAN(S)**

18 COME NOW, Petitioner (your name) _____ and

19 (co-petitioner's name) _____, in accordance with Chapter

20 159 of the Nevada Revised Statutes, whose petition respectfully represents the following to

21 this Honorable Court:

22
23 **Information Regarding the Petitioner(s)**

24 1. That Petitioner(s) would like to be appointed the general guardian over (proposed
25 ward's name) _____.

26 2. That Petitioner's full legal name is _____.

27 3. That Petitioner currently resides at (street/city/state/zip) _____

1 4. That Petitioner's mailing or post office address is _____

2 _____.

3 5. The Petitioner's date of birth is _____.

4 6. That Co-Petitioner's full legal name is _____

5 _____.

6 7. That Co-Petitioner currently resides at (street/city/state/zip) _____

7 _____.

8 8. That Co-Petitioner's mailing or post office address is _____

9 _____.

10 9. The Co-Petitioner's date of birth is _____.

11 10. That Petitioner **(check one)** has/ has not been judicially determined to have
12 committed abuse, neglect or exploitation of a child, spouse, parent or other person.

13 11. That Co-Petitioner **(check one)** has/ has not been judicially determined to
14 have committed abuse, neglect or exploitation of a child, spouse, parent or other person.

15 12. **(Check All that Apply)**

16 That Petitioner has never been convicted of a felony.

17 That Petitioner has been convicted of a felony (description of conviction)

18 _____ and **(check one)** was/ was
19 not placed on parole and **(check one)** was/ was not placed on probation for such felony.

20 That Co-Petitioner has never been convicted of a felony.

21 That Co-Petitioner has been convicted of a felony (description of
22 conviction) _____ and **(check one)**

23 was/ was not placed on parole and **(check one)** was/ was not placed on probation
24 for such felony.
25

26 13. That Petitioner(s) have not been suspended for misconduct or disbarred from the
27 practice of law, the practice of accounting or any other profession which involves the
28 management or sale of money, investments, securities or real property and requires licensure

1 in Nevada or any other state.

2 14. That Petitioner is the (relationship) _____ of the
3 proposed ward and Co-Petitioner is the (relationship) _____
4 of the proposed ward. Petitioner(s) are competent and capable of acting as guardians of the
5 **(check one)** person/ estate/ person and estate of the ward, and hereby consent to act in
6 this capacity.

7 **15. (Check All that Apply)**

8 That Petitioner is not a private professional guardian and is not currently
9 receiving compensation for services as a guardian to more than one ward who are not related to
10 Petitioners by blood or marriage.

11 That the Petitioner is a private professional guardian. (Copies of
12 documents proving that Petitioner meets the requirements of a "private professional guardian"
13 will be filed with this Petition.)

14 That Co-Petitioner is not a private professional guardian and is not
15 currently receiving compensation for services as a guardian to more than one ward who are not
16 related to Petitioners by blood or marriage.

17 That the Co-Petitioner is a private professional guardian. (Copies of
18 documents proving that Co-Petitioner meets the requirements of a "private professional
19 guardian" will be filed with this Petition.)

20 **Information Regarding the Proposed Ward**

21 16. That the proposed ward, (proposed ward's name) _____
22 _____, age _____ was born on (date of birth) _____.

23 17. That the proposed ward currently resides at (street/city/state/zip) _____
24 _____.

25 The proposed ward has lived at this address for _____ days/ months/ years.

1 18. The name and address of any person or care provider having the care and control
2 of the proposed ward is (name/address of care provider) _____
3 _____.

4 The current care provider has cared for the proposed ward because _____
5 _____
6 _____.

7 19. That the proposed ward is a resident of the State of _____

8 20. The proposed ward has executed the following: **(Check all that apply):**

9 Revocable/living trust. The current trustee is _____
10 and the successor trustee(s) are _____.

11 Durable power of attorney for health care. The agent is _____
12 _____.

13 Durable power of attorney for financial matters. The agent is _____
14 _____.

15 Written nomination of guardian. The agent is _____
16 _____.

17 None of the above

18 Copies of the documents checked above will be filed with this Petition.

19 21. The names and addresses of the following relatives of the ward are:
20

21 **Attach an additional page to the end of this document if you need more**
22 **room to list all of the ward's relatives.**

23

Relative's Name	Relationship to Ward	Address (street address/city/state/zip code)
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	Father	

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	Grandmother on Ward's mother's side	
	Grandfather on Ward's mother's side	
	Grandmother on Ward's father's side	
	Grandfather on Ward's father's side	
	Ward's Spouse	
	Brother/Sister	

22. That a general guardianship is needed for the proposed ward because: _____

Information Regarding the Proposed Ward's Estate

23. That the proposed ward (**check all that apply**) has no assets or income / has assets/ is or will be entitled to assets or income.

24. That the ward (**check one**) does / does not receive money from the Department of Veterans Affairs.

1 25. The types of assets and/or income are: (if none, write "N/A" on first blank)

2 a. _____ value: \$ _____

3 b. _____ value: \$ _____

4 c. _____ value: \$ _____

5 d. _____ value: \$ _____

6
7 These funds will be safeguarded by: **(Check one)**

8 being placed into a blocked account.

9 a bond which the Petitioners will obtain in an amount set by the court.

10 **General Information**

11 26. That the guardianship **(check one)** is/ is not sought for the purpose of
12 initiating litigation.

13
14 27. That the proposed ward **(check one)** is/ is not a party to any pending criminal
15 or civil litigation.

16 28. That documentation demonstrating the need for a guardianship **(check one)**
17 will be filed when/if it becomes available to the Petitioners/ will be filed at the same time
18 the Petition is filed.

19 29. That a copy of the following form(s) of identification will be filed with the
20 Confidential Information Sheet **(check all that apply for the Petitioners and the Proposed**
21 **Ward)**

22 a. For the Petitioner: Social Security Number/ Taxpayer Identification
23 Number/ Valid Driver's License Number/ Valid Identification Card Number/ Valid
24 Passport Number

25
26 b. For the Co-Petitioner: Social Security Number/ Taxpayer Identification
27 Number/ Valid Driver's License Number/ Valid Identification Card Number/ Valid
28 Passport Number

1 c. For the Proposed Ward: Social Security Number/ Taxpayer Identification
2 Number/ Valid Driver's License Number/ Valid Identification Card Number/ Valid
3 Passport Number

4
5 30. That Petitioner (**check one**) has/ has not been appointed as guardian over the
6 proposed ward in a state other than Nevada. If Petitioner has been appointed Guardian over
7 the proposed ward in another state, Petitioner will file an exemplified copy of the guardianship
8 order with this Court.

9 31. That Co-Petitioner (**check one**) has/ has not been appointed as guardian over
10 the proposed ward in a state other than Nevada. If Co-Petitioner has been appointed Guardian
11 over the proposed ward in another state, Co-Petitioner will file an exemplified copy of the
12 guardianship order with this Court.

13 32. That Petitioner(s) (**check one**) are not/ are requesting special powers as
14 follows (see NRS 159.117 through 159.175 for the only special powers that may be
15 requested): _____
16 _____
17 _____
18 _____
19 _____
20 _____.

21 WHEREFORE, Petitioner(s) pray that this guardianship be granted and for such other
22 and further relief as the court may deem just and proper.

23 DATED this ____ day of _____, _____.

24
25 _____
26 Petitioner

27 _____
28 Co-Petitioner

VERIFICATION OF PETITIONER

STATE OF NEVADA)
COUNTY OF _____)

I, (your name) _____, being first duly sworn under penalty of perjury, hereby depose and say:

That I am the Petitioner in the within action; that I have read the foregoing Petition For Appointment of Guardian(s) and know the contents thereof; that the same is true of my knowledge except as to those matters therein stated upon information and belief and as to those matters, I believe them to be true.

Petitioner

SIGNED and SWORN to before me by (Petitioner's name) _____
on the ____ day of _____, ____.

NOTARY PUBLIC

ACKNOWLEDGMENT OF PETITIONER

STATE OF NEVADA)
COUNTY OF _____)

On this ____ day of _____, _____, before me, the undersigned Notary Public in and for the said County and State, personally appeared (your name)

_____ known to me to be the person described in and who executed the foregoing instrument, and who acknowledged to me that **(check one)**

he/ she did so freely and voluntarily and for the uses and purposes therein mentioned.

WITNESS my hand and official seal.

NOTARY PUBLIC

1 VERIFICATION OF CO-PETITIONER

2 STATE OF NEVADA)
3 COUNTY OF _____)

4 I, (Co-Petitioner's name) _____, being first duly sworn under
5 penalty of perjury, hereby depose and say:

6 That I am the Co-Petitioner in the within action; that I have read the foregoing Petition
7 For Appointment of Guardian(s) and know the contents thereof; that the same is true of
8 my knowledge except as to those matters therein stated upon information and belief and as
9 to those matters, I believe them to be true.
10

11 _____
12 Co-Petitioner

12 SIGNED and SWORN to before me by (Co-Petitioner's name) _____
13 on the ____ day of _____, ____.

14
15 _____
16 NOTARY PUBLIC

17 ACKNOWLEDGMENT OF CO-PETITIONER

18 STATE OF NEVADA)
19 COUNTY OF _____)

20 On this ____ day of _____, _____, before me, the undersigned
21 Notary Public in and for the said County and State, personally appeared (Co-Petitioner's
22 name) _____ known to me to be the person described

23 in and who executed the foregoing instrument, and who acknowledged to me that **(check one)**

24 he/ she did so freely and voluntarily and for the uses and purposes therein mentioned.

25 WITNESS my hand and official seal.
26

27 _____
28 NOTARY PUBLIC

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Code:
(Your name) _____
(Address) _____

(Telephone) _____

In Proper Person

IN THE _____ JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA

IN AND FOR THE COUNTY OF _____

In the Matter of the Guardianship of)
 the person,) CASE NO. _____
 the estate,)
 the person and estate.) DEPT. NO. _____
of:)
_____)
An Adult.)
_____)

CONFIDENTIAL INFORMATION SHEET

(Complete date of birth and at least one other form of identification for each person)

	Ward	Guardian	Co-Guardian
Date of Birth			
Taxpayer ID Number			
Valid Driver's License Number			

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Valid ID Card Number			
Valid Passport Number			
Social Security Number			

A copy of the above identification is attached.

SUBMITTED BY:

(Petitioner's name)

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Code:
(Your name) _____
(Your address) _____

(Telephone) _____
In Proper Person

IN THE ____ JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
IN AND FOR THE COUNTY OF _____

In the Matter of the Guardianship)
of the Person only)
 Estate only)
 Person and Estate)
of:)
_____,)
_____,)
_____,)
A(n) Minor.)
 Adult.)
_____)

CASE NO. _____
DEPT. NO. _____

CONFIDENTIAL MEDICAL/EDUCATIONAL INFORMATION SHEET

(Attach any doctor's statements or medical records, or report cards or other educational records regarding the ward's health or education to this sheet.)

1 Code:
 2 (Your name) _____
 3 (Address) _____
 4 (Telephone) _____
 In Proper Person

5
 6 IN THE _____ JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
 7 IN AND FOR THE COUNTY OF _____
 8

9 In the Matter of the Guardianship)
 of the Person only)
 10 Estate only)
 11 Person and Estate)
 of:)
 12 _____)
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 14 _____)
 15 _____)
 A(n) Minor.)
 16 Adult.)
 17 _____)

CASE NO. _____
 DEPT. NO. _____

18 **AFFIDAVIT OF PETITIONER REGARDING MEDICAL CERTIFICATION**

19 STATE OF NEVADA)
 20)
 21 COUNTY OF _____)

22 (Petitioner's name) _____, being first duly sworn according
 23 to law, deposes and says:

- 24 1. That I am the petitioner in this case.
 25 2. That I have tried to obtain a physician's certificate regarding the proposed ward's
 26 health. I have done this by (explain what steps you have taken to get the certificate)

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3. That I have not been able to get the certificate from the doctor.

DATED THIS ____ day of _____, _____

(Signature)

SIGNED and SWORN to before me by (Petitioner's name) _____
on the ____ day of _____, _____.

NOTARY PUBLIC

OR

DEPUTY CLERK

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1 Code:
 2 (Your name) _____
 3 (Your address) _____
 4 _____
 5 (Telephone) _____
 6 In Proper Person

7 IN THE _____ JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
 8
 9 IN AND FOR THE COUNTY OF _____

10 In the Matter of the Guardianship)
 11 of the Person only)
 12 Estate only)
 13 Person and Estate)
 14 of:)
 15 _____,)
 16 _____,)
 17 _____,)
 18 A(n) Minor.)
 19 Adult.)

CASE NO. _____
 DEPT. NO. _____

21 **CITATION TO APPEAR AND SHOW CAUSE**

23 TO: _____
 24 _____
 25 _____

27 TO: THE PEOPLE OF THE STATE OF NEVADA, and
 28 TO: Any person having the care, custody and control of the Proposed Ward

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YOU ARE HEREBY CITED AND NOTIFIED to appear before a Judge of the Court at the listed date, time and place to OPPOSE or SHOW CAUSE and inform the court why the proposed ward should not be declared incompetent, of limited capacity, and in need a guardian for his/her

- Person only
- Estate only
- Person and Estate

and to further oppose and explain why Petitioner (name) _____ and Co-Petitioner (name) _____ should not be appointed to act as Guardian(s).

YOU ARE NOTIFIED that, if appointed, the Guardian(s) will have the management and control of the proposed ward's

- Person only
- Estate only
- Person and Estate

YOU ARE NOTIFIED that the proposed ward has the right to appear at the hearing, the right to oppose this Petition, and the right to be represented by an attorney, who may be appointed by the Court if the proposed ward is unable to retain one. THIS CITATION is based upon the verified Petition for Appointment of Co-Guardians filed by Petitioner

(name) _____ and Co-Petitioner (name) _____.

NOTE: The Proposed Ward (unless excused by the Court) and Petitioner(s) must appear at the scheduled hearing; all other interested parties do not need to appear unless they wish to enter an objection.

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DATE AND TIME OF COURT APPEARANCE

(day) _____, the _____ day of (month) _____,
(year) _____ at (time) _____, in Dept. _____
(name of court) _____
(address of court) _____

DATED this _____ day _____, _____.

CLERK OF COURT

By: _____
Deputy Clerk

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Code:
(Your name) _____

(Address) _____

(Telephone) _____
In Proper Person

IN THE _____ JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
IN AND FOR THE COUNTY OF _____

In the Matter of the Guardianship of)
 the person) CASE NO. _____
 the estate) DEPT. NO. _____
 the person and estate)
of:)
_____)
_____, and)
_____)
A(n) Minor.)
 Adult.)
_____)

AFFIDAVIT OF SERVICE

STATE OF NEVADA)
COUNTY OF _____)

_____, being first duly sworn under penalties of
(Print name of person making service)

perjury, states as follows:

1. That I am a person not involved in this action and have no interest in this action and
am over the age of 18 years.

1 THE OTHER PARTIES' LAWYER, FILL IN THE FOLLOWING:

2 by personally serving:

3 (name) _____ (name) _____

4 (address) _____ (address) _____

5 _____

6 name) _____ (name) _____

7 (address) _____ (address) _____

8 _____

9 name) _____ (name) _____

10 (address) _____ (address) _____

11 _____

12 name) _____ (name) _____

13 (address) _____ (address) _____

14 _____

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16 (Attach another sheet if you served more than 8 people by personal service)

17 Date: _____

18 _____

19 (print name)

20 _____

21 (signature)

22 SIGNED and SWORN to before me by (name of person making service) _____

23 _____ on the _____ day of _____, _____.

24 _____

25 NOTARY PUBLIC

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Code: _____
(Your name) _____
(Your address) _____

(Telephone) _____

In Proper Person

IN THE _____ JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA

IN AND FOR THE COUNTY OF _____

In the Matter of the Guardianship of)
 the person,)
 the estate,)
 the person and estate.)
of:)
_____,)
An Adult.)
_____)

CASE NO. _____
DEPT. NO: _____

ORDER APPOINTING GUARDIAN(S)

UPON REVIEW of the verified Petition for Appointment of Guardian(s) submitted by the Petitioner(s), the same having come before the above-entitled Court, and it appearing to the satisfaction of the Court that proper Notice of hearing of this matter has been duly given in the manner required by law; that all allegations contained in the verified petition are true and correct, and that the Ward is a resident of the State of _____, with the Ward appearing with the Ward not appearing, but excused, and good cause appearing therefore;

NOW THEREFORE, IT IS HEREBY ORDERED that the Petitioner, (your name) _____ and Co-Petitioner (co-petitioner's name) _____ are appointed Guardian(s) of the Ward's (ward's name) _____ (check one) person/ estate/ person and estate.

1 **IT IS FURTHER ORDERED** that Letters of Guardianship shall issue to the
2 Guardian(s) upon the administration of the oath of office as required by law.

3 **IT IS FURTHER ORDERED** that **(check one)**

4 no guardianship of the estate is granted; therefore, no bond or blocked account
5 is required.

6 guardianship of the estate is granted, but no bond or blocked account is
7 required at this time.

8 (your name) _____ and (co-petitioner's
9 name) _____ shall post a bond in the sum of
10 \$ _____, either jointly or individually.

11 the Ward's funds shall be placed into a blocked account at a financial
12 institution.

13 **IT IS FURTHER ORDERED** that

14 this guardianship is not over the estate; therefore, no accountings are required.

15 this guardianship is a summary administration and therefore no annual
16 accounting is required.

17 the guardian and co-guardian shall file an accounting every _____ years,
18 beginning _____.

19 the guardian and co-guardian shall file an accounting one time each year,
20 beginning _____.

21 **IT IS FURTHER ORDERED** that the Guardian(s) shall enjoy all normal powers
22 conferred by the Nevada Revised Statutes to take those steps necessary to preserve the real
23 and/or personal property of the Ward of this Court as indicated above.

24 **IT IS FURTHER ORDERED** that Guardian(s) **(check one)**

25 are not granted special powers pursuant to NRS 159.117 through 159.175.

26 are granted special powers as follows (see NRS 159.117 through 159.175 for
27 the only special powers that may be ordered): _____
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Code:

(Your name) _____

(Address) _____

(Telephone) _____

In Proper Person

IN THE _____ JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA

IN AND FOR THE COUNTY OF _____

In the Matter of the Guardianship)

of the Person only)

Estate only)

Person and Estate)

of:)

_____)

_____)

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_____)

_____)

_____)

A(n) Minor.)

Adult.)

_____)

CASE NO. _____

DEPT. NO. _____

GENERAL LETTERS OF GUARDIANSHIP

State of Nevada)

)

County of _____)

On (month) _____ (day) _____ (year) _____, the (name of court)

_____ Judicial District Court, (name of county) _____

County, State of Nevada, appointed (name of guardian) _____

guardian of the (check one) person/ estate/ person and estate for (ward's name)

_____ a(n) (check one) adult/ minor, that the named

1 guardian has qualified and has the authority and shall perform the duties of guardian of the (check
2 one) person/ estate/ person and estate for the named ward as provided by law.

3 In Testimony Whereof, I have hereunto subscribed my name and affixed the seal of the court
4 at my office on _____ (month) _____ (day) _____ (year).

5 (Name of Clerk of Court) _____ CLERK OF COURT

6 By: _____
7 Deputy Clerk Date

8 OATH

9 I, _____, residing at _____
10 _____, whose mailing address is _____

11 _____
12 (mailing address if different from residence)

13 solemnly affirm that I will faithfully perform according to law duties of Guardian and that any
14 matters stated in any petition or paper filed with the Court are true of my own knowledge or if any
15 matters are stated on information or belief, I believe them to be true.

16 _____
17 Guardian

18 SUBSCRIBED AND AFFIRMED before me by (Guardian's name) _____

19 on the _____ day of _____, _____.

20 (name of Clerk of Court) _____ CLERK OF COURT

21 By: _____
22 Deputy Clerk

23 (OR)

24 _____
25 Notary Public

26 County of: _____

27 State of: _____

28

1 Code:
2 (Your name) _____
3 (Address) _____
4 _____
5 _____
6 (Telephone) _____

In Proper Person

7 IN THE ____ DISTRICT COURT OF THE STATE OF NEVADA
8
9 IN AND FOR THE COUNTY OF _____

10 In the Matter of the Guardianship)
11 of the Person only)
12 Estate only)
13 Person and Estate)
14 of:)
15 _____)
16 _____)
17 _____)
18 A(n) Minor.)
19 Adult.)

CASE NO. _____
DEPT. NO. _____

20
21 **NOTICE OF ENTRY OF ORDER**

22 **TO:** The persons listed on Exhibit 1, attached hereto
23 **PLEASE TAKE NOTICE** that (title on Order) _____
24 was entered in the above-entitled matter on (date) _____, a copy of
25 which is attached hereto.

26 DATED this ____ day of _____, _____.

27 _____
(Your signature)

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EXHIBIT 1

<u>Name of Person/Organization Entitled to Notice</u>	<u>Relationship to Ward</u>	<u>Address</u>
1. _____	_____	_____ _____ _____
2. _____	_____	_____ _____ _____
3. _____	_____	_____ _____ _____
4. _____	_____	_____ _____ _____
5. _____	_____	_____ _____ _____
6. _____	_____	_____ _____ _____
7. _____	_____	_____ _____ _____
8. _____	_____	_____ _____ _____
9. _____	_____	_____ _____ _____
10. _____	_____	_____ _____ _____
11. _____	_____	_____ _____ _____
12. _____	_____	_____ _____ _____

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Name of Person/Organization
Entitled to Notice

Relationship to Ward

Address

13.	_____	_____	_____

14.	_____	_____	_____

15.	_____	_____	_____

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17.	_____	_____	_____

18.	_____	_____	_____

19.	_____	_____	_____

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<u>Name of Person/Organization Entitled to Notice</u>	<u>Relationship to Ward</u>	<u>Address</u>
25. _____	_____	_____
26. _____	_____	_____
27. _____	_____	_____
28. _____	_____	_____
29. _____	_____	_____
30. _____	_____	_____
31. _____	_____	_____
32. _____	_____	_____
33. _____	_____	_____
34. _____	_____	_____
35. _____	_____	_____
36. _____	_____	_____

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B. <u>PERSONAL PROPERTY</u>					
Cash, Checking and Savings Accounts, other Accounts (List)					
4. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
5. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
6. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
Other Interest, Etc. (Describe) ²					
7. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
8. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
Notes, Bonds, Securities, Debts, Etc., (List Name & Address of Debtor, Date Debt Originated, Endorsement W/Date, Estimate As to Amount Collectible) ³					
9. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
10. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
11. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
12. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
Vehicles (Describe)					
13. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
14. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
15. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
Miscellaneous Personal Property (Describe) ⁴					
16. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
17. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
18. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
19. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____

² Interests in partnerships, LLCs, corporations, joint ventures, trusts, etc. Book value may be acceptable to the court until the interest is to be sold, disposed or transferred. The Guardian may need to request instructions from the court on how the value of the Ward's interest is to be listed on this document.

³ Additional items to be listed in this category are: deeds of trust, rents, royalties, life insurance policies with cash values.

⁴ This category includes household items, collectibles and antiques. If the aggregate(total) replacement value exceeds \$5,000.00 an appraisal is required.

VERIFIED RECORD OF VALUE (IN LIEU OF APPRAISEMENT)

I, the undersigned, solemnly affirm that Items listed above in section "I. Record of Value" of this Verified Inventory of the Estate have been examined by me and that I have written the value of these items on the Verified Inventory at the value shown opposite thereof.

I report that the total value of the times listed in this section of this Verified Inventory have a value of \$ _____ dollars and cents.

Guardian

Co-Guardian

II. APPRAISED INVENTORY

	a) Asset Value	b) Amount Owed (Mortgage, lien, loan)	c) Net Asset Value (a-b=c)	d) Ward's** Interest	e) Value of Ward's Interest [cxd=e]
<u>A. REAL PROPERTY</u>					
Description					
1. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
2. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
3. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
<u>B. PERSONAL PROPERTY</u>					
4. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
5. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
6. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
7. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
8. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
9. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____

**Designate Nature of Ward's Interest & % of Ownership; (C) Community; (S) Separate; I.E. 50 % (C) or (S)

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OATH OF APPRAISER, CPA OR EXPERT IN VALUATIONS

STATE OF NEVADA)
)
COUNTY OF _____)

I, the undersigned, appraiser of the estate of the above-named ward, solemnly affirm that I will truly, honestly, and impartially appraise the inventory of the Estate to the best of my knowledge and ability, and the appraisal was completed in compliance with NRS 159.0865.

EXECUTED this _____ day of _____, 20 ____.

SIGNED and SWORN to before me

Appraiser's signature

by (Appraiser's name) _____

Appraiser's name (print)

on the ____ day of _____, ____.

NOTARY PUBLIC

Appraiser's address

APPRAISAL

I, the undersigned appraiser, CPA or expert in valuation of the Estate of the above-named ward, hereby certify that the items listed in the Verified Inventory under section "II. Appraised Inventory" have been personally examined by me or my authorized agent, and that I appraised these items at the value shown opposite thereof. I report that the total value of the items listed in this section of the Verified Inventory have a value of \$ _____ dollars and cents.

Appraiser

Date

(Repeat Oath & Certification for Each Appraiser; Attach Separate Sheets If Necessary)

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VERIFICATION OF GUARDIAN

STATE OF NEVADA)
)
COUNTY OF _____)

The above guardian being duly sworn, states that he or she is the guardian of the estate of the above-named ward, has read the above and foregoing Record of Value, know the contents thereof, and it is true of his or her own knowledge, except for those matters therein stated on information and belief, and as for those matters believed them to be true.

Guardian

SIGNED and SWORN to before me by (Guardian's name) _____
on the ____ day of _____, ____.

NOTARY PUBLIC

VERIFICATION OF CO-GUARDIAN

STATE OF NEVADA)
)
COUNTY OF _____)

The above co-guardian being duly sworn, states that he or she is the co-guardian of the estate of the above-named ward, has read the above and foregoing Record of Value, know the contents thereof, and it is true of his or her own knowledge, except for those matters therein stated on information and belief, and as for those matters believed them to be true.

Co-Guardian

SIGNED and SWORN to before me by (Co- Guardian's name) _____
on the ____ day of _____, ____.

NOTARY PUBLIC

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Code:
(Your name) _____

(Address) _____

(Telephone) _____

In Proper Person

IN THE _____ JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
IN AND FOR THE COUNTY OF _____

In the Matter of the Guardianship of)
 the person)
 the estate)
 the person and the estate,)
of:)
_____)
an Adult.)

CASE NO. _____
DEPT NO. _____

STATE OF NEVADA)
)
COUNTY OF _____)

REPORT OF THE GUARDIAN OF THE ADULT PERSON

_____ through _____
BEGINNING DATE **ENDING DATE**

I, (name of guardian) _____ am the Guardian of the Person of
(name of ward) _____. My annual report is as follows:

I.

General Information for the Ward and Guardian(s)

Ward's date of birth: _____

Ward's address: _____

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Ward's phone number: _____

Ward's current physician (address and phone number) _____

Name(s) and addresses of guardian(s) _____

Guardian(s) relationship to ward: _____

Number of times guardian(s) visited the ward in the last year: _____

The ward (**check one**) does/ does not continue to need a guardian. (Explain) _____

II.

Physical and Mental Condition of the Ward

(A) The ward currently lives in a (**check one**) private home/ boarding home/ nursing home/ other (explain) _____

(B) The ward's facility provides for the ward's daily living and recreational needs by (describe) _____

(C) The ward (**check one**)

does not attend daily or regular weekly outings, training or work because:

attends daily or regular weekly outings, training or work as follows:

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(D) The activities described in (C), above (**check one**) do/ do not meet the ward's needs. (Explain, if necessary) _____

(E) The ward has had the following medical care during the last year: _____

(F) The ward was last seen by a physician on (date) _____

(G) The ward's current physical health is Good/ Fair/ Poor (please describe)

(H) There (**check one**) have/ have not been any substantial changes in the ward's mental abilities or health in the last year. (If there have been substantial changes, explain.)

III.

Miscellaneous Information

(A) (**Check one**)

The ward does not have any assets or property and does not have annual income more than \$5,000.

The ward does have assets or property or an annual income more than \$5,000. (name) _____ is responsible for these assets. (Note: you may need to

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file an accounting. See accounting instructions and form in a separate packet and NRS 159.177-
NRS 159.181 and NRS 159.076.)

(B) (Check one)

- The ward does not receive any county services.
- The ward receives the following county services:

(C) (Check one)

- The ward does not receive any other services.
- The ward receives the following non-county services:

(D) I would like the court to know the following: (briefly state anything else that you
would like the court to know, or write "N/A")

1 SIGNED and SWORN to before me by (name of guardian) _____

2 on the ____ day of _____, ____.

3

4

NOTARY PUBLIC

5

6

OR

7

DEPUTY CLERK

8

OR

9

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE
AND CORRECT.

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11

Executed on (date) _____ (signature) _____

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Code:
(Your name) _____
(Address) _____
(Telephone) _____

In Proper Person

IN THE _____ JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
IN AND FOR THE COUNTY OF _____

In the Matter of the Guardianship)
of the Estate)
 Person and Estate)
of:)
_____)
A(n) Minor)
 Adult)

CASE NO. _____
DEPT. NO. _____

ACCOUNTING

[First, Second, Third, _____] or Final¹ *Circle of fill-in appropriate number*

_____ through _____
BEGINNING DATE ENDING DATE

DO NOT FILL IN GRAY AREAS

RECAPITULATION (RECAP)	Subtotal	Total
Beginning balance (balance brought forward from inventory or previous accounting)		\$
+ Total from Schedule A	\$	
- Total from Schedule B	\$	
Ending Balance for this accounting period		\$

¹ Final is circled if the guardianship has been terminated or this is the last accounting of this guardian.

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Schedule A	Subtotal	Total
Income/ Receipts/Increases in Value		
Total Income (from <i>Worksheet 1</i>):	\$	
Receipts or Refunds Received (from <i>Worksheet 2</i>):	\$	
Increases in Value of Assets (from <i>Worksheet 3</i>):	\$	
Gains of Sales of Assets (from <i>Worksheet 4</i>):	\$	
Total Increase to Estate:		\$

Worksheet 1, Income/Interest²

Description	Amount
	\$
	\$
	\$
	\$
	\$
TOTAL	\$

Worksheet 2, Receipts/Refunds Received³

Description	Amount
	\$
	\$
	\$
	\$
TOTAL	\$

² Income/Interest may come from, but is not limited to: social security; wages from employment; and interest income.
³ Receipts/Refunds may include, but are not limited to: retirement payments, annuity payments, rental receipts, loan payment receipts, collected receivables, refunds on utility deposits, refunds on home/apartment rental deposits.

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Worksheet 3, Increases in Value of Assets⁴

Description	Amount
	\$
	\$
	\$
	\$
TOTAL	\$

Worksheet 4, Gains on Sales of Assets⁵

Description	a) Sales Price	b) Recorded Value	c) Amount of Gain [a - b = c]
			\$
			\$
			\$
			\$
			\$
TOTAL			\$

⁴ Increases in values of assets may include, but are not limited to: real property, antiques, collectibles; gains in value of investment accounts, stocks, or other securities.

⁵ If an asset was sold for more than its recorded value in the inventory or the last accounting, the amount received above that value is a gain on the sale of an asset.

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Worksheet 6, Decreases in Value of Assets⁶

Description	Amount
	\$
	\$
	\$
	\$
	\$
	\$
TOTAL	\$

Worksheet 7, Losses on Sale of Assets⁷

Description	a) Recorded Value	b) Sales Price	c) Amount of Loss [a-b=c]
			\$
			\$
			\$
			\$
			\$
			\$
			\$
TOTAL			\$

⁶ Decreases in value of assets may include, but is not limited to: real property, antiques, collectibles, investment accounts, stocks, securities, motor vehicles.

⁷ If an asset is sold for less than its recorded value in the inventory or last annual accounting, the amount which is less than the recorded value is the loss on the sale of the asset.

Assets of the Estate at the Ending Date of the Accounting

	Value of Ward's Interest
A. REAL PROPERTY	
Description	
1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____
B. PERSONAL PROPERTY	
Cash, Checking and Savings Accounts, other Accounts (List)	
4. _____	\$ _____
5. _____	\$ _____
6. _____	\$ _____
Other Interest, Etc. (Describe)	
7. _____	\$ _____
8. _____	\$ _____
Notes, Bonds, Securities, Debts, Etc., (List Name & Address of Debtor)	
9. _____	\$ _____
10. _____	\$ _____
11. _____	\$ _____
12. _____	\$ _____
Vehicles (List)	
13. _____	\$ _____
14. _____	\$ _____
15. _____	\$ _____
Miscellaneous Personal Property (Describe)	
16. _____	\$ _____
17. _____	\$ _____
18. _____	\$ _____
19. _____	\$ _____
Other (Describe)	
20. _____	\$ _____
21. _____	\$ _____
22. _____	\$ _____
23. _____	\$ _____
TOTAL	\$ _____

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VERIFICATION OF PETITIONER

STATE OF NEVADA)
)
COUNTY OF _____)

I, (your name) _____, being first duly sworn under penalty of perjury, hereby depose and say:

That I am the Petitioner in the within action; that I have read the foregoing Petition For Appointment of Guardian(s) and know the contents thereof; that the same is true of my knowledge except as to those matters therein stated upon information and belief and as to those matters, I believe them to be true.

Petitioner

SIGNED and SWORN to before me by (Petitioner's name) _____

on the ____ day of _____, ____.

NOTARY PUBLIC

ACKNOWLEDGMENT OF PETITIONER

STATE OF NEVADA)
)
COUNTY OF _____)

On this ____ day of _____, _____, before me, the undersigned Notary Public in and for the said County and State, personally appeared (your name) _____

_____ known to me to be the person described in and who executed the foregoing instrument, and who acknowledged to me that **(check one)** he/ she did so freely and voluntarily and for the uses and purposes therein mentioned.

WITNESS my hand and official seal.

NOTARY PUBLIC

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VERIFICATION OF CO-PETITIONER

STATE OF NEVADA)
)
COUNTY OF _____)

I, (co-petitioner's name) _____, being first duly sworn under penalty of perjury, hereby depose and say:

That I am the Co-Petitioner in the within action; that I have read the foregoing Petition For Appointment of Guardian(s) and know the contents thereof; that the same is true of my knowledge except as to those matters therein stated upon information and belief and as to those matters, I believe them to be true.

Co-Petitioner

SIGNED and SWORN to before me by (Co-Petitioner's name) _____

on the ____ day of _____, ____.

NOTARY PUBLIC

ACKNOWLEDGMENT OF CO-PETITIONER

STATE OF NEVADA)
)
COUNTY OF _____)

On this ____ day of _____, _____, before me, the undersigned Notary Public in and for the said County and State, personally appeared (co-petitioner's name)

_____ known to me to be the person described in and who executed the foregoing instrument, and who acknowledged to me that **(check one)**

he/ she did so freely and voluntarily and for the uses and purposes therein mentioned.

WITNESS my hand and official seal.

NOTARY PUBLIC