

6954 East Broadway, Mount Pleasant MI 48858

(989) 775-4800

In the matter of: \_\_\_\_\_  
First, middle, and last name

1. I am interested in the matter as \_\_\_\_\_

2.  I waive notice of hearing and consent to the application/petition for:  
(Nature of application/petition and name of the applicant/petitioner)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

and I declare that I have received a copy of this application/petition.

3.  I waive notice of hearing concerning \_\_\_\_\_  
(Nature of hearing)

\_\_\_\_\_  
Attorney signature  
\_\_\_\_\_  
Attorney name (type or print) Bar no.  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
City, state, zip Telephone no.

\_\_\_\_\_  
Date  
\_\_\_\_\_  
Signature  
\_\_\_\_\_  
Name (type or print)  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
City, state, zip Telephone no.