

APPLICATION TO RENEW, CHANGE OR CANCEL AN ORDER

In the Provincial Court of British Columbia
Under Part 3 of the *Adult Guardianship Act*

COURT FILE NO.:
COURT LOCATION:

APPLICATION TO RENEW, CHANGE OR CANCEL AN ORDER

Case name
as it appears on the order.

In the matter of:

ADULT'S NAME

Your name and current address for service.

Filed by:

NAME

APPLICANT

ADDRESS FOR SERVICE

CITY

PROVINCE

POSTAL CODE

PHONE

FAX

Notice to:

NAME

RESPONDENT

ADDRESS FOR SERVICE

CITY

PROVINCE

POSTAL CODE

PHONE

FAX

Other party's name and address for service.

And to:

ADULT'S NAME

DATE OF BIRTH
MMM DD YYYY

ADDRESS FOR SERVICE

CITY

PROVINCE

POSTAL CODE

PHONE

FAX

And to:

NAME

ADDRESS FOR SERVICE

CITY

PROVINCE

POSTAL CODE

PHONE

FAX

And to:

NAME

ADDRESS FOR SERVICE

CITY

PROVINCE

POSTAL CODE

PHONE

FAX

And to:

NAME

ADDRESS FOR SERVICE

CITY

PROVINCE

POSTAL CODE

PHONE

FAX

Names and addresses of other persons who must be served, including the adult who is the subject of the application.

What changes to the order are you asking for?
Please describe, and explain why they are needed.
Attach additional sheet if you require more space to describe the changes requested.

I ask that the attached order dated

MMM	DD	YYYY
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be renewed as follows:

OR

I ask that the attached order dated

MMM	DD	YYYY
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be changed as follows:

From:

To:

OR

I ask that the attached order dated

MMM	DD	YYYY
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be cancelled.

Check box if designated agency is asking to renew, change or cancel an order made under section 56(3)(a) Adult Guardianship Act. Attach a copy of the report. →

A report of a review under section 57 of the Act is attached

Sign your name and state today's date.

Dated

MMM	DD	YYYY
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Signature of applicant or applicant's lawyer

State name of lawyer, if any.

Name of applicant's lawyer