

IN THE CIRCUIT COURT FOR _____ COUNTY,
FLORIDA PROBATE DIVISION

IN RE:

File No. _____

Division _____

an alleged incapacitated person

NOTICE OF PETITIONS TO DETERMINE INCAPACITY
AND FOR THE APPOINTMENT OF GUARDIAN

TO:

YOU ARE HEREBY NOTIFIED that petitions have been filed to determine you to be incapacitated and to seek the appointment of a guardian over your person and/or property. Copies of the Petition to Determine Incapacity and the Petition For Appointment of Guardian are attached to this notice. There will be a hearing on the Petition to Determine Incapacity before _____, a Judge of the above court, at _____ in _____, Florida, on _____, _____, at _____ M.

The reason for this hearing is to inquire into your capacity and to determine whether a guardian is to be appointed over your person or property or both.

You have the right to attend this hearing and to present whatever evidence is appropriate. An attorney has been appointed to represent you. The name, address and telephone number of the attorney are: _____
_____. You have the right to substitute your own attorney for the attorney appointed by the court.

If you are determined to be incapable of exercising any of the rights enumerated in the Petition to Determine Incapacity, a guardian may be appointed to exercise those rights on your behalf. If a guardian is appointed, the guardian may have full or partial control of your real estate and personal property, may have the care and custody of your person, and may have the right to regulate certain or all of your activities.

Signed on this _____ day of _____, _____.

CLERK OF THE CIRCUIT COURT

By: _____
Deputy Clerk

CERTIFICATE OF SERVICE BY CLERK

I HEREBY CERTIFY that a copy of the foregoing notice was served on _____
_____, counsel for the alleged incapacitated person, and all next of kin of the alleged
incapacitated person identified in the Petition to Determine Incapacity by _____ on
_____, _____.

CLERK OF THE CIRCUIT COURT

By: _____
Deputy Clerk