

**FORM 36FOC
L01**

**MOTION TO RESCIND LICENSE
SUSPENSION**

YOU MAY USE THIS FORM IF:

- The Court has entered an order suspending your license and you want to ask the court to restore your license.

DO NOT USE THIS FORM IF:

- You have an attorney. Contact your attorney for legal assistance.

INSTRUCTIONS FOR USING FORM 36FOC L01

FILING A MOTION

1. FILL OUT THE MOTION FORM.

Use the instructions on page 4. Type or print neatly.

If you fail to provide all of the required information, your motion may be denied or dismissed.

2. SERVE THE OTHER PARTY.

Complete section H. On the date you mail a copy of the motion to the other party, fill in the date and sign your name under the "Certificate of Mailing".

3. CALL THE JUDGE'S OFFICE TO SCHEDULE YOUR HEARING AND COMPLETE THE NOTICE OF HEARING FORM.

The telephone number for the Judge's office is (269) 657-8229.

Complete the following on the Notice of Hearing form:

- a. Case number;
- b. Plaintiff's name, address, and telephone number;
- c. Defendant's name, address, and telephone number;
- d. The date and day of the hearing;
- e. The time of the hearing. Circle a.m. or p.m., depending on whether your hearing is in the morning or afternoon.

You must serve the other party with a copy of the Notice of Hearing.

On the date you mail a copy of the motion and Notice of Hearing to the other party, fill in the date and sign your name under the "Certificate of Mailing".

File the original Notice of Hearing and two copies with the Van Buren County Clerk.

4. FILE THE MOTION FORM WITH THE COUNTY CLERK.

Take the original and two copies of the motion to the County Clerk in the county where your case is located. (Van Buren County Clerk, 212 Paw Paw Street, Paw Paw, MI 49079)

You must pay a \$20.00 motion fee. Make your money order payable to "Van Buren County Clerk". The County Clerk will accept no personal checks. If you can't afford to pay the motion fee, ask the County Clerk for an Affidavit and Order, Suspension of Fees/Costs to fill out (Form MC20 not included in this packet).

The County Clerk will keep the original and one copy of the motion, the Notice of Hearing, and any attachments for the court file and the Friend of the Court. The Clerk will return one true copy to you.

You must attend the hearing on the motion; otherwise, your motion may be dismissed.

INFORMATION ABOUT ATTENDING THE HEARING:

Bring all supporting papers that you have.

1. By using this form packet, you are representing yourself in a court action regarding your license(s). Since you are representing yourself, you are expected to conduct yourself as an attorney would, and to follow the same general rules as an attorney would.
2. Make a list of information you feel is important for the Judge to know. The information should relate to the reasons stated in your motion. You can use this as a reminder to bring up the points that you feel are important.
3. If you feel you need to order someone to attend the hearing, follow the procedures in Michigan Court Rule 2.506 or consult with an attorney.
4. Go to the Judge's courtroom on the scheduled day and time. Dress neatly. Get there ten or fifteen minutes early.
5. Do not interrupt any hearing that may be in progress. Take a seat in the back of the courtroom and wait for your case to be called.
6. When you are called, sit at the appropriate table, marked "Plaintiff" or "Defendant". You may be asked the following:
 - a) your name;
 - b) What your request(s) is(are);
 - c) The facts or reasons for your request.

MOTION CHECKLIST

Use the following checklist to make sure you have done all the steps that are needed.

DID YOU...

- | | | | |
|----|---|--------------------------|-----|
| 1. | Fill out all requested information on the form? | <input type="checkbox"/> | Yes |
| 2. | Make all necessary copies? | <input type="checkbox"/> | Yes |
| 3. | Pay the motion fee to the County Clerk? | <input type="checkbox"/> | Yes |
| 4. | Serve the other party a copy of the motion, Notice Of Hearing, and all attachments? | <input type="checkbox"/> | Yes |

IF YOU CANNOT ANSWER "YES" TO ALL OF THE ABOVE STEPS, A HEARING ON YOUR MOTION MAY BE DELAYED OR YOUR MOTION MAY BE DISMISSED.

If you fail to do even one of the required steps, the order you get from the court may not give you the relief that you want.

INSTRUCTIONS FOR COMPLETING

"MOTION TO RESCIND LICENSE SUSPENSION"

Please print neatly with an ink pen, or use a typewriter.

Items A through H must be completed before your motion can be filed with the court. Please read the instructions for each item, then fill in the correct information for that item on the form.

- A. Before you fill in the case number, get your court papers for divorce, separate maintenance, paternity, or family support and copy the case number from those court papers onto this form.
- B. Also use your court papers to fill in the "Plaintiff" and "Defendant" boxes. If the other party has an attorney, include the attorney's name and address. Please note, the Plaintiff and Defendant will always be according to the initial filing of the action, therefore, copy the names from those court papers onto this form. For example, if your name is in the box that says "Plaintiff", then you should write your name in the "Plaintiff" box on this motion form. Once you have written the names where they belong, you must check the box "licensee" in the same box as your name.
- C. Complete the information regarding your date of birth and license number(s).
- D. Write in the date the court entered the order suspending your license.
- E. Check all boxes that apply to you and why you are asking the court to restore your license(s).
- F. Check the box that applies to you.
- G. Write today's date and sign your name.
- H. On the date you serve the other party, write in the date, and sign your name.

Original - Court
1st copy - Plaintiff
2nd copy - Defendant
3rd copy - Friend of the Court

Approved, SCAO

STATE OF MICHIGAN 36 TH JUDICIAL CIRCUIT VAN BUREN COUNTY	NOTICE OF HEARING	CASE NUMBER
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Friend of the Court Address: 219 Paw Paw Street, Paw Paw, MI 49079 Fax No. 269-657-6666 Telephone No. 269-657-7734

Plaintiff's name, address, and telephone number

Attorney:

v

Defendant's name, address, and telephone number

Attorney:

A hearing will be held on _____ at _____
Date Time

at Circuit Court, 212 Paw Paw Street, Paw Paw, MI 49079 before Paul E. Hamre P32636
Location Bar Number

Judge Referee for the following purpose:

Motion to Rescind License Suspension.

If you require special accommodations to use the court because of a disability, please contact the court immediately to make arrangements. When contacting the court, provide your case number(s).

CERTIFICATE OF MAILING

I certify that on this date I mailed a copy of the notice of hearing by ordinary mail to the parties at the addresses stated above.

Date

Signature