



Name of Person Filing \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City, State, Zip Code \_\_\_\_\_  
 Daytime Telephone \_\_\_\_\_  
 Representing Self \_\_\_\_\_

**ARIZONA SUPERIOR COURT, PIMA COUNTY**

In the Matter of the Application of \_\_\_\_\_ )  
 \_\_\_\_\_ )  
 \_\_\_\_\_ )  
 \_\_\_\_\_ )  
 \_\_\_\_\_ )  
 Applicant )  
 \_\_\_\_\_ )

Case No. \_\_\_\_\_  
 ORDER CHANGING NAME FOR AN ADULT

Applicant having filed an Application for Change of Name for an Adult; the cause came on regularly to be heard this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before this Court.

The Court having read the Application and having fully considered the matter, and good cause appearing therefore,

1. IT IS ORDERED that the name of \_\_\_\_\_  
 (Applicant's Current Name)  
 be changed to \_\_\_\_\_  
 (Applicant's New Name)

- 2  For a person born in the State of Arizona, the Office of Vital Records is ordered to amend the birth record to reflect the new name ordered above.
- For a person born in a state other than Arizona, to the extent that the agency that maintains birth records in that state is authorized to honor an order of the Court, that agency is requested or ordered to amend its birth records to reflect the new name as ordered above.

DONE IN OPEN COURT this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
 Judicial Officer

**In the Superior Court of the State of Arizona  
In and For the County of \_\_\_\_\_**

Case Number \_\_\_\_\_

**CIVIL COVER SHEET- NEW FILING ONLY**  
(Please Type or Print)

Plaintiff's Attorney \_\_\_\_\_

Attorney Bar Number \_\_\_\_\_

Plaintiff's Name(s): (List all)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Plaintiff's Address:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(List additional plaintiffs on page two and/or attach a separate sheet).

Defendant's Name(s): (List All) \_\_\_\_\_  
\_\_\_\_\_

(List additional defendants on page two and/or attach a separate sheet)

**RULE 26.2 DISCOVERY TIER OR MONETARY RELIEF CLAIMED:**

**IMPORTANT: Any case category that has an asterisk (\*) MUST have a dollar amount claimed or Tier selected.** State the monetary amount in controversy or place an "X" next to the discovery tier to which the pleadings allege the case would belong under Rule 26.2.

Amount Claimed \$ \_\_\_\_\_  Tier 1  Tier 2  Tier 3

**NATURE OF ACTION**

Place an "X" next to the **one** case category that most accurately describes your primary case. **Any case category that has an asterisk (\*) MUST have a dollar amount claimed or Tier selected as indicated above.**

**TORT MOTOR VEHICLE:**

- Non-Death/Personal Injury\*
- Property Damage\*
- Wrongful Death\*

- Malpractice – Other professional\*
- Premises Liability\*
- Slander/Libel/Defamation\*
- Recovery of Damages under A.R.S. §12-514  
(Please provide Plaintiff DOB: \_\_\_/\_\_\_/\_\_\_)
- Other (Specify) \_\_\_\_\_\*

**TORT NON-MOTOR VEHICLE:**

- Negligence\*
- Product Liability – Asbestos\*
- Product Liability – Tobacco\*
- Product Liability – Toxic/Other\*
- Intentional Tort\*
- Property Damage\*
- Legal Malpractice\*

**MEDICAL MALPRACTICE:**

- Physician M.D.\*  Hospital\*
- Physician D.O.\*  Other\*

**CONTRACTS:**

- Account (Open or Stated)\*
- Promissory Note\*
- Foreclosure\*
- Buyer-Plaintiff\*
- Fraud\*
- Other Contract (e.g., Breach of Contract)\*
- Excess Proceeds – Sale\*
- Construction Defects (Residential/Commercial)\*
  - Six to Nineteen Structures\*
  - Twenty or More Structures\*
- Credit Card Debt (Maricopa County Filings Only)\*

**OTHER CIVIL CASE TYPES:**

- Eminent Domain/Condemnation\*
- Eviction Actions (Forcible and Special Detainers)\*
- Change of Name
- Transcript of Judgment
- Foreign Judgment
- Quiet Title\*
- Forfeiture\*
- Election Challenge
- NCC – Employer Sanction Action (A.R.S. §23-212)\*
- Injunction against Workplace Harassment
- Injunction against Harassment
- Civil Penalty
- Water Rights (Not General Stream Adjudication)\*
- Real Property\*
- Special Action
  - (See lower court appeal cover sheet in Maricopa)
- Immigration Enforcement Challenge (A.R.S. §§1-501, 1-502, 11-1051)
- Expungement

**UNCLASSIFIED CIVIL:**

- Administrative Review
  - (See lower court appeal cover sheet in Maricopa)
- Tax Appeal
  - (All other tax matters must be filed in the AZ Tax Court)
- Declaratory Judgment
- Habeas Corpus
- Landlord Tenant Dispute – Other\*
- Declaration of Factual Innocence (A.R.S. §12-771)
- Declaration of Factual Improper Party Status
- Vulnerable Adult (A.R.S. §46-451)\*
- Tribal Judgment
- Structured Settlement (A.R.S. §12-2901)
- Attorney Conservatorships (State Bar)
- Unauthorized Practice of Law (State Bar)
- Out-of-State Deposition for Foreign Jurisdiction
- Secure Attendance of Prisoner
- Assurance of Discontinuance
- In-State Deposition for Foreign Jurisdiction
- Eminent Domain – Light Rail Only\*
- Interpleader – Automobile Only\*
- Delayed Birth Certificate (A.R.S. §36-333.03)
- Employment Dispute – Discrimination\*
- Employment Dispute – Other\*
- Verified Rule 27(a) Petition\*
- Verified Rule 45.2 Petition
- Amendment of Birth Certificate
- Amendment of Marriage License (Maricopa County Filings Only)
- Application/Motion Objecting to Foreign Subpoena
- Other (Specify)\* \_\_\_\_\_

**EMERGENCY ORDER SOUGHT:**

- Temporary Restraining Order
- Provisional Remedy
- OSC
- Election Challenge
- Employer Sanction
- Other (Specify) \_\_\_\_\_

**COMMERCIAL COURT (Maricopa County Only)**

This case is eligible for the commercial court under Rule 8.1, and plaintiff requests assignment of this case to the commercial court. More information on the commercial court, including the most recent forms, are available on the court’s website at <https://www.superiorcourt.maricopa.gov/commercial-court/>.

Additional Plaintiff(s)

\_\_\_\_\_  
\_\_\_\_\_

Additional Defendant(s)

\_\_\_\_\_  
\_\_\_\_\_

**THIS FORM MUST BE FILLED OUT**  
**FOR**  
**CIVIL DEFAULT\*DOMESTIC DEFAULT\*NAME CHANGE**

Please PRINT the following information to be given to the courtroom Clerk in order to obtain your default or name change. THE INFORMATION MUST BE LEGIBLE AND ADDRESSES COMPLETE WITH ZIP CODES LISTED.

CASE NUMBER: \_\_\_\_\_ ASSIGNED JUDGE: \_\_\_\_\_

CHECK ONE: CIVIL DEFAULT\_\_\_ DOMESTIC DEFAULT\_\_\_ NAME CHANGE\_\_\_ STIPULATED COURT TRIAL\_\_\_

PLEASE COMPLETE THIS AREA FOR DEFAULTS ONLY:

COMPLETE CAPTION: \_\_\_\_\_

VS.

\_\_\_\_\_

PLATINTIFF'S / PETITIONER'S ATTORNEY: \_\_\_\_\_

(Please provide address for an out-of-town attorney)

DEFENDANT'S / RESPONDENT'S ATTORNEY: \_\_\_\_\_

(Please provide address for an out-of-town attorney)

DEFENDANT'S / RESPONDENT'S ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\*\*\*\*\*

COMPLETE THIS AREA FOR NAME CHANGE ONLY:

NAME CHANGE IS FOR:            SELF\_\_\_    A MINOR CHILD \_\_\_

PRESENT NAME OF PERSON RECEIVING: \_\_\_\_\_

A CHANGE OF NAME.

NAME WILL BE: \_\_\_\_\_

ADDRESS OF PERSON FILLING \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF PERSON COMPLETING THIS FORM

Person Filing: \_\_\_\_\_  
Address (if not protected): \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Attorney Bar Number: \_\_\_\_\_  
Representing [ ] Self or [ ] Attorney for \_\_\_\_\_

For Clerk's Use Only

**SUPERIOR COURT OF ARIZONA  
IN PIMA COUNTY**

**In the Matter of:** \_\_\_\_\_

**Case Number:** \_\_\_\_\_

**NOTICE OF HEARING REGARDING  
APPLICATION FOR CHANGE OF  
NAME**

\_\_\_\_\_  
**Name(s) of person(s) requesting name change**

**READ THIS NOTICE CAREFULLY. An important court proceeding that affects your rights has been scheduled. If you do not understand this Notice or the other court papers, contact an attorney for legal advice.**

- 1. NOTICE:** An application for Change of Name has been filed with the Court by the person(s) named above. A hearing has been scheduled where the Court will consider whether to grant or deny the requested change. If you wish to be heard on this issue, you must appear at the hearing at the date and time indicated below.
- 2. COURT HEARING.** A court hearing has been scheduled to consider the Application as follows:

**Hearing Date:** \_\_\_\_\_ **Hearing Time:** \_\_\_\_\_

**Hearing Location:** \_\_\_\_\_

**Hearing Officer:** \_\_\_\_\_

**DATED:** \_\_\_\_\_

(Month/Day/Year)

\_\_\_\_\_  
**Applicant's Signature**