STATE OF INDIANA)   **IN THE ELKHART SUPERIOR COURT 6**

)

COUNTY OF ELKHART)   **CASE NO:** _____

IN RE THE _____**OF:** _____

                                                  (Child's Name if Required)

_____

Name of Person Filing

Select One: ☐ Mother ☐ Father ☐ Other:_____

And

_____

Name of Person Responding

Select One: ☐ Mother ☐ Father ☐ Other:_____

NOTICE OF INTENT TO RELOCATE RESIDENCE

☐ This Notice is being filed at least (90) ninety days before I intend to move.

                                  OR

☐ This Notice is being filed no later than ten (10) days after I obtained the information and is being provided no later than thirty (30) days before I intend to move.

     Comes now _____, the ☐ Mother ☐ Father ☐ Other: _____

in this matter, and consistent with the requirements of Indiana Code § 31-17-2.2, hereby provides notice of my intent to

relocate my residence to _____ ☐ Mother ☐ Father ☐ Other as follows:

                              (Name of Other Party)

1.   I do intend to move the residence of any children who are subject to the jurisdiction of this Court.

2.   I intend to move to _____, _____, _____ _____.

                              (Address)   *(City)*   *(State)*   *(Zip)*

3.   My cellular telephone number ☐ will ☐ will not change. My new number is _____.

4.   I intend to move to this address on _____.

                                     (Date)

5.   I am moving to this address because:

6. I propose the following changes to non-relocating parties' parenting time as follows:

To _____, non-relocating party: You may file with this Court your written objection to this proposed relocation, and /or your additional petition to modify an existing custody order, parenting time order, grandparent visitation order, or child support order. You must file this with the Court within sixty (60) days of your receipt of this Notice.

I have personal knowledge of the facts stated above and I affirm under the penalties for perjury that the foregoing representations are true.

/s/_____   _____
Signature   Date

_____
Printed Name

_____
Email Address

CERTIFICATE OF SERVICE

I hereby certify that I sent a copy of this document by first class mail to the other person's attorney, or to the other person if they are not represented by an attorney, via:
☐ Registered mail at this address: _____
☐ Certified mail at this address: _____
☐ Sheriff
☐ E-Service per Trial Rule 86 at this email address: _____
☐ Other: _____

_____   _____
Signature   Date