

INSTRUCTIONS

1 OF 4 DOCUMENTS NEEDED WHEN REQUESTING REAPPOINTMENT

Numbers on the left hand side of these instructions match numbers on the form
REMEMBER USE BLACK INK PEN ONLY

PETITION FOR RE-APPOINTMENT AS CONSERVATOR

1. You are the Conservator. PRINT your name, address, & telephone # in the space provided.

DO NOT WRITE IN THE SPACE MARKED “HEARING DATE”; THIS IS FOR COURT USE ONLY

2. The Conservatee is the patient. Fill in his/her name here. first name first ; middle name, last name last

Example: John Smith

3. Fill in the Court Case # ; **you must use the case number when filing any document with the court.** All case numbers for Department 95A begin with M, MP, or ZE followed by six numbers.

PAY ATTENTION THAT YOU FILL IN THE CORRECT COURT CASE #

4. Fill in your name and the last date you were (re)appointed as conservator.

5. If you are filing the “Physician’s Declaration” with this petition, check the first box. If it will be filed on or before the hearing date, check the second box. If you plan to have the Court appoint a physician, YOU MUST BRING the Conservatee (Patient) TO COURT; check the third box.

6. Fill in the date and your signature.

7. If you have questions, please call the Mental Health Clerk’s Office at (323) 226-2917 or 2918.

CONSERVATOR / ATTORNEY

1. NAME _____

ADDRESS _____

TELEPHONE _____

HEARING DATE _____

Do not write in this space

SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES
MENTAL HEALTH COURT

In the Matter of the Conservatorship of

2. _____

Conservatee Name

3. COURT CASE # _____

**Petition for Re-Appointment
As Conservator**

4. The Petitioner _____ Conservator / Attorney, states: that on _____
Appointment Date

the above named Conservatee was declared to be a gravely disabled person as a result of a mental disorder and the petitioner was appointed as conservator pursuant to Welfare and Institutions Code Section 5350 et. Seq.

The conservatee is still gravely disabled as a result of a mental disorder. The opinions of two physicians that the conservatee is still gravely disabled:

- 5. are attached as Exhibit "A"
- will be filed prior to the hearing
- cannot be obtained because _____ and the Conservator will request that the court appoint two physicians to examine the Conservatee

So far as known to petitioner, the following persons an/or agencies are entitled to notice of hearing on this petition:

- Director of Health, State of California
- Los Angeles County Director of Mental Health/Public Guardian
- Attorney for Conservatee
- Conservatee
- Facility in which Conservatee resides
- Others _____

Wherefore, petitioner prays that s/he be re-appointed as Conservator for the Conservatee named in this petition. That the additional powers previously granted to the Conservator and the disabilities imposed on the Conservatee in the original order appointing petitioner be continued.

6. _____
Date

Signature of Conservator