STATE OF NORTH CAROLINA			File No.		Additional File No.(s)		
Mecklenburg County			In The General Court Of Justice ☐ District ☐ Superior ☐ Before The Clerk ☐ Small Claims				
Name And Address Of Plain	IN THE MATTER OF tiff / Petitioner / State	:					
Email Address of Plaintiff / Petitioner / State			NOTICE AND MOTION TO RESOLVE COURT SCHEDULING CONFLICT				
Name And Address Of Defendant / Respondent							
Email Address of Defendant				er In Re: Priorities Between Su	olina General Rules of Practice; perior and District Court Matters		
INSTRUCTIONS: This form is to be used by attorneys to provide notice of a court scheduling conflict between matters in the same priority category as outlined in Rule 3.1 of the North Carolina General Rules of Practice and the Administrative Order In Re: Priorities Between Superior and District Court Matters. The REQUESTING PARTY must complete all of the information required below. Copies of the completed form must be distributed to opposing counsel, the clerk of court of all courts and the appropriate judges in all cases. When the attorney learns of the conflict before the date on which the matters are scheduled to be heard, the appropriate judges are the Senior Resident Superior Court Judge for matters pending in Superior Court and the Chief District Court Judge for matters pending in District Court; otherwise, the appropriate judges are the presiding judges over those matters. For notice to the Senior Resident Superior Court Judge and Chief District Court Judge, completed forms must be emailed to Mecklenburg. Scheduling Conflicts @nccourts.org.							
NOTICE AND MOTION TO RESOLVE COURT SCHEDULING CONFLICT							
judges involving matter proceedings. The unc	ers in the same priority	category at approximate category at approximate category at approximate category.	ately the same time. The resolve this schedulin	ne undersigned is unal	or before two or more ble to attend both court ne undersigned and the		
File No.	Case Type	Case Age	Date of Hearing or Trial	Estimated Time and Length of Hearing or Trial	Date Notice of Hearing or Trial Received		
Is Defendant in custody? Yes No If Yes, please list			st applicable File No.(s)				
Is a Jury Involved? Yes No			e list applicable File No.(s)				
	ne case should have priority o		Date	Signature			
Email Address:		-	☐ Plaintiff or Petitioner / Attorney ☐ Defendant or Respondent / Attorney				
			District Attorney / Assista	· =	espondent / Attorney		

CCF-91, 3/2023 (OVER)

	CERTIFICATE (OF SERVICE					
I certify that on this date, a copy of this Motion to Resolve Court Scheduling Conflict was served by:							
☐ first class mail at the address(es) as follows:							
plaintiff / petitioner / attorney for plaintiff or petitioner							
defendant / respondent / attorney for defendant or respondent							
district attorney							
personally, delivering a copy to the							
plaintiff / petitioner / attorney for plaintiff or petitioner							
defendant / respondent / attorney for defendant or respondent							
district attorney							
☐ Other							
Date Signature		Plaintiff or Petitioner / Attorney	Defendant or Respondent / Attorney				
ODDED ON MA	District Attorney / Assistant DA Other:						
ORDER ON MOTION TO RESOLVE COURT SCHEDULING CONFLICT							
☐ This Motion was reviewed by the court out of session.							
Therefore, it is ORDERED that this court scheduling conflict is resolved as follows:							
Date Signature	T	Superior Court Judge Distri	ict Court Judge Magistrate				
		= '	CSC Designee				