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| STATE OF NORTH CAROLINA  GUILFORD COUNTY | | | | FILE NUMBER(S): | | |
| IN THE GENERAL COURT OF JUSTICE  DISTRICT COURT DIVISION | | |
| Plaintiff(s)  vs.    Defendant(s) | | | | CIVIL COURT  REMOTE HEARING  REQUEST FORM | | |
| NOW COMES, the undersigned attorney(s) or party/parties (if self-represented) in this action and do hereby request a remote hearing in , Guilford County, for the above captioned action.   1. I/We estimate that the length of the hearing will be           . (Please be advised of time limits in all cases – see Protocol for Remote Hearings.) 2. I/We agree to abide by the time limits as designated by the Court. 3. Issue(s) to be heard: 4. I/We certify that in the above-captioned case: 5. There are no present or anticipated discovery issues that would interfere with the hearing. 6. I/We know of no parties or witnesses that will not be available for trial. 7. The case is ready for trial, and counsel (and all parties are) is prepared to proceed. 8. I/We request the following dates:   a.            b.            c.            d.   1. Opposing counsel | | | | | | |
| Signature: |  | | | Signature: |  | |
| Pro Se Plaintiff  Attorney | | | | Pro Se Defendant  Attorney | | |
| Name: |  | | | Name: |  | |
| Date: |  | | | Date: |  | |
| Address: |  | | | Address: |  | |
| Phone: |  | | | Phone: |  | |
| Email: |  | | | Email: |  | |
|  | | **THIS SECTION SHALL ONLY BE COMPLETED BY THE TRIAL COURT COORDINATOR** | | | |  |
| The request for a remote is  approved  not approved.  A hearing will be scheduled for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in  Greensboro  High Point, Courtroom \_\_\_\_. | | | | | | |
| Date: | | | Trial Court Coordinator/Designee: | | | |