
Name

Address

City, State, Zip

Phone

Email

In the [] District [] Justice Court of Utah

_____ Judicial District _____ County

Court Address _____

<p>_____ Plaintiff/Petitioner</p> <p>V.</p> <p>_____ Defendant/Respondent</p>	<p>Order on Motion to Consolidate</p> <p>_____ Case Number</p> <p>_____ Judge</p> <p>_____ Commissioner (domestic cases)</p>
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The matter before the court is a Motion to Consolidate. This matter is being resolved by:
(Choose all that apply.)

The default of Plaintiff/Petitioner Defendant/Respondent.

The stipulation of the parties.

The pleadings and other papers of the parties.

A hearing held on _____ (date), notice of which was served on all parties.

Plaintiff/Petitioner

was present was not present.

was represented by _____ (name).

was not represented.

Defendant/Respondent

was present was not present.

was represented by _____ (name).

was not represented.

The court finds:

1. Case number _____ and this case involve the same parties, facts and circumstances. All issues of law can be resolved in a single case.

The court orders:

2. The Motion to Consolidate is:

denied

granted. Case number _____ is consolidated into this case, which is case number _____.

Commissioner's or Judge's signature may instead appear at the top of the first page of this document.

Date Signature ► _____
Commissioner _____

Date Signature ► _____
Judge _____

Approved as to form.

Date Signature ► _____
Plaintiff/Petitioner or Attorney _____

Date Signature ► _____
Defendant/Respondent or Attorney _____

Certificate of Service

I certify that I filed with the court and am serving a copy of this Order on Motion to Consolidate on the following people.

Person's Name	Service Method	Service Address	Service Date
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Signature ►

Date _____

Printed Name _____