

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone

**Check your email.** You will receive information and documents at this email address.

\_\_\_\_\_  
Email

I am  Plaintiff  Defendant  
 Plaintiff's Attorney  Defendant's Attorney (Utah Bar #: \_\_\_\_\_)

In the District Court of Utah

\_\_\_\_\_ Judicial District \_\_\_\_\_ County

Court Address \_\_\_\_\_

<p>_____ Plaintiff</p> <p>v.</p> <p>_____ Defendant</p>	<p><b>Request for Hearing Regarding Enforcement of an Order of Restitution</b></p> <p>_____ Case Number</p> <p>_____ Judge</p>
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1. An Order of Restitution has been issued in this case and served upon me. I object to the way the order is being enforced and request a hearing to explain my objection to the court.
2. The Order of Restitution is being improperly enforced because:  
(Briefly explain.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. I understand:

- This request will not delay or stop enforcement of the Order of Restitution unless a delay is ordered by the court after I have posted a bond. (Utah Code 78B-6-812(2)(b) and 78B-6-808(4)(b)).
- The court will schedule the hearing I have requested within 10 calendar days after this request is filed or as soon after as practical.
- Notice of the hearing will be mailed to all parties.
- I must provide the court with an address where I receive mail to ensure I am aware of the date, time and location of the hearing.

I declare under criminal penalty under the law of Utah that everything stated in this document is true.

Signed at \_\_\_\_\_ (city, and state or country).

\_\_\_\_\_ Date  
Defendant's  
Signature ► \_\_\_\_\_  
Printed Name \_\_\_\_\_

### Certificate of Service

I certify that I filed with the court and served a copy of this Request for Hearing Regarding Enforcement of an Order of Restitution 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 \_\_\_\_\_