



HEARING OFFICE

REQUEST FOR CONTINUANCE

Pursuant to Rule 15

*This form is to be completed by the Party requesting a continuance of the hearing and must be made for good cause only. **One continuance will be granted if there is no objection by the opposing party.** If the opposing party objects to the continuance, the Hearing Officer shall rule on the request for a continuance on the next calendared Hearing Office date. (See Rule 15). The Hearing Officer may continue the hearing if it appears that the interests of justice require continuation.*

Today's Date:	Complaint Number:
Respondent's Name:	Respondent's Mailing Address:
Requestor's Name:	Date Currently Set for Hearing:
Reason for Request for Continuance: _____ _____ _____	
<u>VERIFICATION:</u> I hereby request that the above-referenced hearing be continued. My request for a continuance is made for good cause as stated above.	
Signature:	Date:

(The opposing party must contact the Hearing Office and advise whether or not they are opposed to a continuance of the hearing. An e-mail can be sent to: hearingoffice@pinalcountyaz.gov)

(To be completed by the Hearing Office.)

The opposing party objects. The opposing party does NOT object.

Granted Denied By: _____

Continued to: _____ Civil Hearing Office Date

I certify that a copy of the foregoing was mailed/delivered _____ to the opposing party.

By: _____
Civil Hearing Office

Contact the Hearing Office at 520-866-6244 or 520-866-6292 for additional information or access the Pinal County Civil Hearing Office Rules of Procedure online at www.pinalcountyaz.gov