

FILING CODE: EXMT

Your Name: _____

Address: _____

City, State, Zip: _____

Telephone: _____

Email Address: _____

Self-Represented

**DISTRICT COURT
CLARK COUNTY, NEVADA**

<p style="text-align: center;">_____ Plaintiff,</p> <p style="text-align: center;">vs.</p> <p style="text-align: center;">_____ Defendant.</p>	<p>CASE NO.: _____</p> <p>DEPT: _____</p>
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EX PARTE MOTION FOR AN ORDER SHORTENING TIME

Plaintiff / Defendant files this Ex Parte Motion for an Order Shortening Time and requests that this Court shorten the time in which to hear the (*title of the upcoming hearing, i.e. "Motion to Modify"*) _____.

This application is based upon the pleadings and papers on file and the declaration of Movant attached to this motion.

DATED _____, 20____.

Submitted By: (*your signature*) _____

(*print your name*) _____

**DECLARATION IN SUPPORT OF EX PARTE MOTION FOR AN ORDER
SHORTENING TIME**

I declare, under penalty of perjury:

1. I am the Movant in this case. I have personal knowledge of the facts contained herein and am competent to testify to these facts.

2. There is a hearing scheduled for (*current court date*) _____ at (*time of hearing*) _____.

3. (*check one*)

The other party was already served with a copy of the underlying motion on which the hearing is based. The motion was served (*check one*) by mail / by personal service on (*date of service*) _____.

The other party HAS NOT been served with a copy of the motion yet. **I understand emergency hearings are not normally granted until the other party is served with the motion.** The judge should consider my request without waiting for the other party to be served because (*explain why you need the judge to consider your request before the other party is served*)

4. There is an emergency that cannot wait until the regular court date to be heard. The emergency is: (*explain why you need the judge to hear your case quickly*)

5. This Ex Parte Motion for an Order Shortening Time is made in good faith.

6. I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct.

DATED _____, 20____.

Submitted By: (*your signature*) _____

(*print your name*) _____