District Court Juvenile Court	t y, Colorado				
Court Address:	y, Colorado				
In re:					
The Marriage of:					
The Civil Union of:					
Parental Responsibilities concer	rning:				
Petitioner:					
and					
Co-Petitioner/Respondent:			•		•
and concerning:				COUR	RT USE ONLY
Grandparent(s)	parent(s) Intervenor(s):				
	(-)				
Attorney or Party Without Attorney	(Name and Address):	C	Case Nu	mber:	
Phone Number:	E-mail:		Division		Courtroom
FAX Number:	Atty. Reg. #:				Courtroom
VERIFIED PLEADING AFF					• • • • • • • • • • • • • • • • • • • •
VISITATION PURSUANT	΄ ΤΟ §19-1-117, C.R.	S. AND RUL	E 24 (OF TH	HE COLORADO

Note to Responding Party: If you disagree with this Pleading Affidavit, the Colorado Civil Rules of Procedure allow you to file a written response with the Court which must be filed within 21 days of the date this Pleading Affidavit was served on you or mailed to you.

The intervenor(s), the Imaternal Impaternal Imparent(s) Imparent(s) Imparent(s) of the minor child(ren), states the following for the purpose of establishing visitation between the Imparent(s) Imparent(s) Imparent(s) and the child(ren), pursuant to §19-1-117, C.R.S.

A Pleading Affidavit seeking an Order for grandparent/great-grandparent visitation has has not been filed in the last two years. If one has been filed, please identify the date filed ______ and state in section 8 below, the reasons why you believe you have good cause to now file again for visitation.

١.	Information about Intervenor (1):			Check if in Military		
	Full Legal Name:			Date of Birth:		
	Current Mailing Address:					
	City:	_State:	Zip Code:	Home Phone #:		
	Email Address:			Cell Phone #:		
	Intervenor has the following Child(ren)'s grandmo Child(ren)'s great-gra	other Child	d(ren)'s grandfather			

2.	(Check if in Military Date of Birth:				
	Current Mailing Address:						
	City: S	state:	Zip Coo	de:	Hom	e Phone #:	
	Email Address:					Cell Phone #:	
	Intervenor has the following relationship with the minor child(ren): Child(ren)'s grandmother Child(ren)'s grandfather Child(ren)'s great-grandmother Child(ren)'s great-grandfather						
3.	Information about the Mothe	er:	Petitioner	Respo	ndent/Co	-Petitioner	Check if in Military 🏼
	Full Legal Name:						
	Current Mailing Address:						
	City:S						
	Email Address:					Cell Phone #:	
4.	Information about the Fathe Full Legal Name: Current Mailing Address:						
	City:S	state:	Zip Coo	de:	Hom	e Phone #:	
5.	The minor child(ren) is/are:						

5. The minor child(ren) is/are:

Full Name of Child	Present Address	Sex	Date of Birth

- 6. The parental rights of the parents of the minor child(ren) have been terminated. **UYes UNo** If Yes, please furnish the case number: _____
- 7. Visitation with the grandparent(s) great-grandparent(s) is in the child(ren)'s best interest for the following reasons:

Transportation of the child(ren) will be as follows:					
Have any Temporary or Permanent Protection/Restraining Orders or any Criminal Mandatory Protection/Restraining Orders (MRO) or Emergency Protection Orders been issued against the grandparent(s)/great-grandparent(s) or any of the parties within two years prior to the filing of this Petition?					
No Yes If your answer was Yes , complete the following:					
The Protection/Restraining Order was DTemporary DPermanent DMRO and issued against					
in a IMunicipal Court ICounty Court IDistrict Court in the					
County of, State of, in case number on					
(date).					
What was the subject matter of the Protection/Restraining Order or Emergency Protection Order?					

I/We respectfully request that this Court enter an Order for visitation between the \Box intervenor(s)/grandparent(s) \Box Intervenor(s)/great-grandparent(s) and the minor child(ren) as set forth in this Pleading Affidavit and any other orders necessary to effectuate the best interests of the child(ren).

□ I/We respectfully request a hearing before the Court before an order is entered. (Optional)

By checking this box, I am acknowledging I am filling in the blanks and not changing anything else on the form.

By checking this box, I am acknowledging that I have made a change to the original content of this form.

VERIFICATION AND ACKNOWLEDGEMENT

I _______(name) swear/affirm under oath, and under penalty of perjury, that I have read the foregoing Verified Pleading Affidavit for Grandparent/Great-Grandparent Visitation Pursuant to §19-1-117, C.R.S. and Rule 24 of the Colorado Rules of Civil Procedure and that the statements set forth therein are true and correct to the best of my knowledge and belief.

Signature of Grandmother Date	Signature of Grandfather Date				
Signature of Great-Grandmother	Signature of 🖵 Great-Grandfather				
Attorney Signature, if any	Attorney Signature, if any				
The foregoing instrument was subscribed and	The foregoing instrument was subscribed and				
affirmed, or sworn before me in the County of	affirmed, or sworn before me in the County of, State of Colorado,				
, State of Colorado,					
this day of, 20	this day of, 20				
by	by				
My Commission Expires:	My Commission Expires:				
Notary Public/Deputy Clerk	Notary Public/Deputy Clerk				

CERTIFICATE OF SERVICE

I certify that on ______ (date) a true and accurate copy of this Verified Pleading Affidavit for Grandparent/Great-Grandparent Visitation Pursuant to §19-1-117, C.R.S. and Rule 24 of the Colorado Rules of Civil Procedure was served on the other party by:

Hand Delivery, DE-filed, DFaxed to this number	, or
by placing it in the United States mail, postage pre-paid, and addressed to the fo	ollowing

То: _____

Signature