

**PETITION FOR APPOINTMENT OF
CONSERVATOR FOR ADULT RESPONDENT**

IN THE IOWA DISTRICT COURT IN AND FOR _____ COUNTY

CONSERVATORSHIP OF _____

Court File No. _____

**PETITION FOR APPOINTMENT OF
CONSERVATOR FOR ADULT RESPONDENT**

1. I am a person with an interest in the welfare of the above-named respondent. My name, address, and relationship to the respondent are:

2. The respondent's name and address are:

3. The respondent's decision-making capacity is so impaired that the respondent is unable to make, communicate, or carry out important decisions concerning the respondent's financial affairs. The appointment of a conservator is in the respondent's best interest. A brief description of the factual basis for this Petition is:

4. A brief description of the respondent's alleged functional limitations that make the respondent unable to communicate or carry out important decisions concerning the respondent's financial affairs is:

5. A brief description of why there is no less-restrictive alternative to the appointment of a conservator is:

6. The name and address, to the extent known, of the following persons are set forth below.

a. The name and address, to the extent known, of the proposed conservator, and the reason the proposed conservator should be selected, are:

b. The name and address, to the extent known, of any spouse of the respondent are:

c. The name and address, to the extent known, of any adult children of the respondent are:

d. The name and address, to the extent known, of any parents of the respondent are:

- e. The name and address, to the extent known, of any person designated as an attorney in fact in a durable power of attorney for health care which is valid under Iowa Code Chapter 144B, or any person designated as an agent in a durable power of attorney which is valid under Iowa Code Chapter 633B, are:

- f. The name and address, to the extent known, of any legal representative or representative payee are:

- g. The name and address, to the extent known, of any adult who has had the primary care of the respondent or with whom the respondent has lived for at least six months prior to the filing of the petition, or any institution or facility where the respondent has resided for at least six months prior to the filing of the petition, is:

7. Information about the protected person's assets is:

- a. The estimated present value of the real estate owned or to be owned by the respondent is:

\$ _____

- b. The estimated present value of personal property owned or to be owned by the respondent is:

\$ _____

- c. The estimated gross annual income of the respondent is:

\$ _____

8. Additional persons who may have an interest in this proceeding (are/are not) listed in an affidavit attached to this Petition. Additional information relevant to this proceeding (is/is not) listed in an affidavit attached to this Petition.

9. A professional evaluation (is/is not) being filed in this proceeding.

10. The respondent who is an adult is hereby notified as follows: IN A PROCEEDING FOR THE APPOINTMENT OF A CONSERVATOR FOR YOU, YOU HAVE A RIGHT TO BE REPRESENTED BY AN ATTORNEY AND YOU HAVE THE RIGHT TO BE NOTIFIED OF THE ACTIONS THAT A COURT-APPOINTED CONSERVATOR CAN TAKE ON YOUR BEHALF SINCE THIS ACTION INVOLVES A POTENTIAL DEPRIVATION OF YOUR CIVIL RIGHTS. FOR FURTHER INFORMATION CONCERNING YOUR RIGHT TO BE REPRESENTED BY AN ATTORNEY AND POTENTIAL DEPRIVATION OF CIVIL RIGHTS, PLEASE REFER TO THE ORIGINAL NOTICE WHICH ACCOMPANIES THIS PETITION.

Wherefore, I respectfully request that the Court enter an Order setting a hearing on this Petition and prescribing notice of this Petition and notice of the hearing, and upon the hearing, enter a further Order appointing the above-named proposed conservator as conservator for the respondent.

I have read this petition, and I certify under penalty of perjury and pursuant to the laws of the State of Iowa that the preceding statements made in this petition are true and correct.

Date: _____

Signature of Petitioner