



Probate Court

TEMPORARY GUARDIANSHIP
(to be filed with *Limited/Permanent Guardianship Petition*)
RIGL 33-15-10

DATE FILED

FOR
COURT USE ONLY

STATE OF RHODE ISLAND

County of _____

Estate of _____

Alias _____

PROBATE COURT OF THE

City or Town of _____

No. _____

Name of Respondent

Street _____

Address _____

City/Town _____ State _____ Zip Code _____ Phone Number _____

Petitioner:

Name _____ Relationship to Respondent _____

Street _____

Address _____

City/Town _____ State _____ Zip Code _____ Phone Number _____

Respectfully requests:

There is occasion for the appointment of a TEMPORARY GUARDIAN of the above respondent; that a petition for the appointment of a guardian of this person and estate is now pending. He/she requests that:

Name of Nominee _____ Relationship to Respondent _____

Street _____

Address _____

City/Town _____ State _____ Zip Code _____

Name of Co-Nominee (if any) _____ Relationship to Respondent _____

Street _____

Address _____

City/Town _____ State _____ Zip Code _____

or some suitable person be appointed to said trust.

Form PC-9.1, Waiver, if applicable.

Petitioner: To the best of my knowledge or belief, the statement(s) contained within this document are truthful and accurate.

Signature of _____ PETITIONER SIGN HERE _____ Date _____

Petitioner _____

Notary:

Name of _____ State _____ County _____

Notary _____

On _____ day of _____, 20____ the petitioner, known to me or proved through satisfactory evidence, signed the document in my presence and swore or affirmed the statements in the documents are truthful and accurate.

Signature of _____ NOTARY SIGN HERE _____ Date _____

Notary Public _____

Commission ID# _____ Commission Expiration Date _____ Notary Seal _____

DECREE

Upon hearing, it is hereby ordered and decreed:

For good cause shown:

Name _____	Street Address _____
City/Town _____	State _____ Zip Code _____
Email _____	Phone Number _____

Name _____	Street Address _____
City/Town _____	State _____ Zip Code _____
Email _____	Phone Number _____

is/are hereby appointed temporary guardian and/or temporary co-guardians of the respondent for the purpose of:

Said appointment will expire on _____ unless further extended by the court.

(date)

Bond Fixed at: \$ _____ ☐ With Surety _____
☐ Without Surety _____

Appointed APPRAISER(S): ☐ Check box if Appraiser(s) is/are the same as above **OR** Complete Appraiser(s) information below.

Appraiser Name _____	Street Address _____
City/Town _____	State _____ Zip Code _____
Email _____	Phone Number _____

Co-Appraiser Name _____	Street Address _____
City/Town _____	State _____ Zip Code _____
Email _____	Phone Number _____

Appointed RESIDENT AGENT

Resident Agent Name _____		
Street Address _____		
City/Town _____	State _____	Zip Code _____
Email _____	Phone Number _____	

Entered as an order and decree of the court on:

Probate Judge _____	Date _____
Signature of Probate Judge _____	

PROBATE JUDGE SIGN HERE