MOTION TO WAIVE STATUTORY TIME PERIOD BY AGREEMENT OF THE PARTIES - DIVORCE OR LEGAL SEPARATION

JD-FM-247 Rev. 10-18
C.G.S. § 46b-67(a); P.A. 15-7

STATE OF CONNECTICUT
SUPERIOR COURT
JUDICIAL BRANCH
www.jud.ct.gov

Instructions:
If the parties have an agreement as to all terms of their divorce (dissolution of marriage) or legal separation and ask the court to enter a divorce decree (decree of dissolution of marriage) or legal separation prior to the expiration of the time periods set forth in section 46b-67(a) of the Connecticut General Statutes, complete this form, have your oath taken, and file it with the court for consideration.

For Court Use only
WAIVE90

Judicial District of	At *(Town)*	Docket number

Name of Plaintiff *(Last, First, Middle Initial)*	Name of Defendant *(Last, First, Middle Initial)*
Address of Plaintiff *(Number, street, town, state, and zip code)*	Address of Defendant *(Number, street, town, state, and zip code)*
Phone number of Plaintiff	Phone number of Defendant

The parties in the above captioned matter attest that we have reached an agreement as to all terms of our *(select one)* ☐ divorce (dissolution of marriage); ☐ legal separation; and ask the court to enter a decree prior to the expiration of the time periods set forth in section 46b-67(a) of the Connecticut General Statutes.

Therefore, we ask the court to waive the time periods set forth in section 46b-67(a) of the Connecticut General Statutes so that a decree may enter prior to their expiration.

We request an uncontested hearing on or about (date) _____

Plaintiff

I attest that the information is true and accurate to the best of my knowledge.

Signature of Plaintiff

Print name of Plaintiff

Subscribed and Sworn before me *(Asst. Clerk, Comm. of Superior Court, Notary Public)*

Date signed

Defendant

I attest that the information is true and accurate to the best of my knowledge.

Signature of Defendant

Print name of Defendant

Subscribed and Sworn before me *(Asst. Clerk, Comm. of Superior Court, Notary Public)*

Date signed

Certification

I certify that a copy of this document was or will immediately be mailed or delivered electronically or non-electronically on (date) _____ to all attorneys and self-represented parties of record and that written consent for electronic delivery was received from all attorneys and self-represented parties of record who received or will immediately be receiving electronic delivery.

Name and address of each party and attorney that copy was or will be mailed or delivered to*

*If necessary, attach additional sheet or sheets with name and address which the copy was or will be mailed or delivered to.

Signed *(Signature of filer/Connecticut Attorney)* ▶	Print or type name of person signing	Date signed
Mailing address *(Number, street, town, state and zip code)*		Telephone number

Order

The court has heard this motion and orders it

☐ Granted. The time periods set forth in section 46b-67(a) of the Connecticut General Statutes are waived.

☐ Denied.

By the Court *(Judge)*	Signed *(Judge, Assistant Clerk)*	Date of Order

ADA NOTICE
The Judicial Branch of the State of Connecticut complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation in accordance with the ADA, contact a court clerk or an ADA contact person listed at *www.jud.ct.gov/ADA.*

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