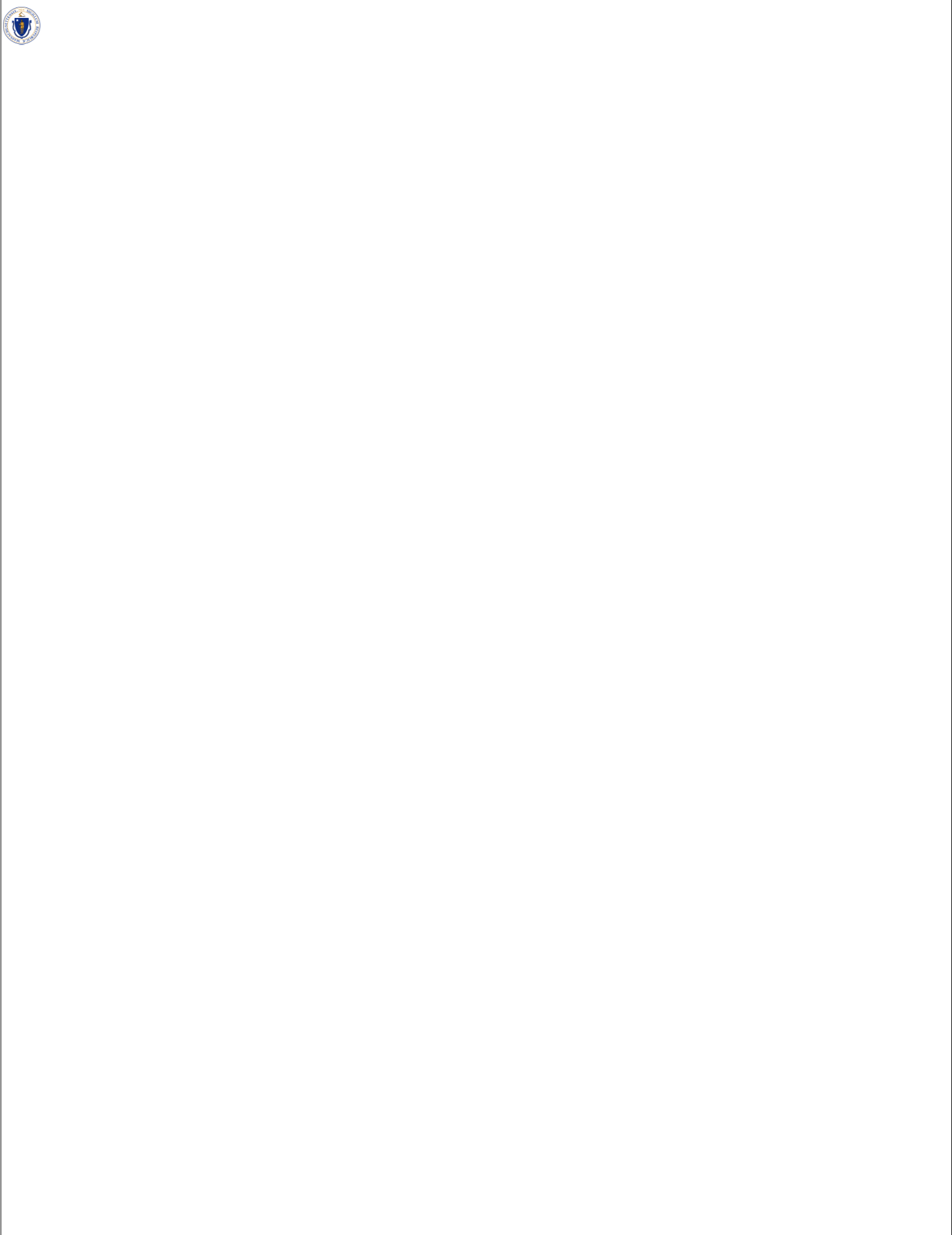
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | | | | | | | | TRIAL COURT OF | | NOTICE OF LIMITED APPEARANCE | | | | | TRIAL COURT USE ONLY | | | |  |
|  | MASSACHUSETTS | |  | Trial Court Rule XVI | | | |  |  | | |  |
|  | COURT | | | | | | | | | | | | | |  |  |
|  | BMC: | | | | {% if courts[0].department == "Boston Municipal Court" %} {{courts[0].division}} {% endif %} | | | | | | | | | |  |
|  | District: | | | | | {% if courts[0].department == "District Court" %} {{courts[0].division}} {% endif %} | | | | | | | | |  |
|  | Housing: | | | | | | {% if courts[0].department == "Housing Court" %} {{courts[0].division}} {% endif %} | | | | | | | |  |
|  | Land: | | | {% if courts[0].department == "Land Court" %} {{courts[0].division}} {% endif %} | | | | | | | | | | |  | | |  | |
|  | DOCKET NUMBER | | |  | |
|  | Probate & Family: | | | | | | | | | {% if courts[0].department == "Probate and Family Court" %} {{courts[0].division}} {% endif %} | | | | |  | {{ docket\_numbers }} | | |  |
|  | Superior: | | | | | | | {% if courts[0].department == "Superior Court" %} {{courts[0].division}} {% endif %} | | | | | | |  |
|  |  | | | | | | | | | | | | | | |  |
|  | CASE NAME / In the Matter of: | | | | | | | | | | | | | | | | | | |  |
| {{ plaintiff\_name }} | | | | | | | | | | | | | | | | | | | |  |
|  |  |  | Plaintiff / Petitioner | | | | | | | | | | | | | | | | |  |
| {{ defendant\_name }} | | | | | | | | | | | | | | | | | | | |  |
|  |  |  | Defendant / Respondent | | | | | | | | | | | | | | | | |  |
|  |  | | | | | | | |  | |  |  |  |  | |  |  |  | |  |
|  | Attorney, | | | | | | | | {{ users[0] }} | | | and Party, | {{ represented\_party }} | | | |  | | |  |
|  | have both signed a written agreement for the Attorney to represent the Party on a limited basis in the following court event(s) or discrete issue(s) as described below (List event date where applicable).   |  |  |  |  |  | | --- | --- | --- | --- | --- | | {%p if need\_motion %}  [X]  {%p else %}  [ ]  {%p endif %} | Motion: | {{ need\_motion\_details }} | Date: | {{ need\_motion\_date }} | | {%p if need\_hearing %}  [X]  {%p else %}  [ ]  {%p endif %} | Hearing: | {{ need\_hearing\_details }} | Date: | {{ need\_hearing\_date }} | | {%p if need\_adr %}  [X]  {%p else %}  [ ]  {%p endif %} | ADR: | {{ need\_adr\_details }} | Date: | {{ need\_adr\_date }} | | {%p if need\_other\_court\_event %}  [X]  {%p else %}  [ ]  {%p endif %} | Other Court Event: | {{ need\_other\_court\_event\_details }} | Date: | {{ need\_other\_court\_event\_date }} | | {%p if need\_trial %}  [X]  {%p else %}  [ ]  {%p endif %} | Trial: | {{ need\_trial\_details }} | Date: | {{ need\_trial\_date }} | | {%p if need\_others %}  [X]  {%p else %}  [ ]  {%p endif %} | Others (Must Specify): | {{ need\_others\_details }} | Date: | {{ need\_others\_date }} | | | | | | | | | | | | | | | | | | | |  |



|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Notice to all other parties: For all matters listed above, both the LAR attorney and the Party must be served. See Trial Court Rule XVI. | | | | |
| |  |  | | --- | --- | | DATED | SIGNATURE OF PARTY | | {{ showifdef('signature\_date') }} | X {%p if defined('clients[0].signature') %}  {%p for client in clients %}  {{client.signature }}  {%p endfor %}  {%p endif %} | | | | | |
| ATTORNEY CERTIFICATION  I certify that I have completed an approved LAR information session as required, and that I have signed a written agreement with the Party above to provide the limited representation in this matter as described above. I also certify that I have served this Notice of Limited Appearance on this Party, all counsel and all parties not represented by counsel. | | | | |
| DATED | SIGNATURE OF ATTORNEY | | | |
| {{ showifdef('attorney\_signature\_date') }} | X {%p if defined('users[0].signature') %}  {{ users[0].signature }}  {%p endif %} | | | |
| NAME (FIRST, MIDDLE, LAST) | | | | B.B.O. NUMBER |
| {{ users[0] }} | | |  | {{ bbo\_number }} |
| FIRM OR AGENCY NAME (IF APPLICABLE) | | | | OFFICE OR HOME PHONE NUMBER |
| {{ firm\_agency\_name }} | | | | {{ users[0].phone\_number }} |
| MOBILE PHONE NUMBER |
| STREET ADDRESS | | | APT/UNIT # | {{ users[0].mobile\_number}} |
| {{ users[0].address.address }} | | | {{ users[0].address.unit }} | FAX NUMBER |
| {{ users[0].fax }} |
| CITY/TOWN | STATE | ZIP CODE | E-MAIL ADDRESS | |
| {{ users[0].address.city }} | {{ users[0].address.state }} | {{ users[0].address.zip }} | {{users[0].email }} | |

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