STATE OF NORTH CAROLINA IN THE GENERAL COURT OF JUSTICE

DISTRICT COURT DIVISION

COUNTY OF BUNCOMBE FILE NO: CVD \_\_\_\_\_\_\_\_\_

Judge: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Plaintiff,

vs. **MOTION TO WAIVE**  **CUSTODY MEDIATION**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Defendant.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name), move the Court to waive mandatory mediation of the child custody issues in this matter for the reasons set forth below (check boxes):

1. I live more than fifty (50) miles from the Buncombe County courthouse

2. The opposing party and I have agreed to attend private mediation

3. The opposing party has abused or neglected the children

4. The opposing party suffers from alcoholism

5. The opposing party abuses drugs

6. The opposing party has abused me

7. Other – Explain any other reason why you believe that mediation would cause you undue hardship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Date Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name

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Address

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Address

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Telephone Number