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

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

 Address

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 Address

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 Telephone Number