

STATE OF NORTH CAROLINA	File No. _____
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_____ County	In The General Court Of Justice <input type="checkbox"/> District <input type="checkbox"/> Superior <input type="checkbox"/> Before the Clerk <input type="checkbox"/> Small Claims
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IN THE MATTER OF:	<h2>OBJECTION TO REMOTE HEARING</h2> <p>Nature of hearing: _____ Date of Hearing (if scheduled): _____</p>
Name And Address Of Plaintiff / Petitioner / State	
Email Address of Plaintiff / Petitioner / State	
Name And Address Of Defendant / Respondent	
Email Address of Defendant / Respondent	

OBJECTION

The undersigned hereby objects to the hearing referenced above being conducted, or partially conducted, via audio and video transmission, pursuant to G.S. 7A-49.6(d) on the grounds listed below:

I have have not consulted the opposing party / attorney regarding this objection. The opposing party / attorney takes no position on a remote hearing desires a remote hearing agrees to an in-person hearing. The estimated time needed for the hearing on this objection is: _____.

Name Of Person Objecting	Date	Signature
Email Address:	<input type="checkbox"/> Plaintiff or Petitioner / Attorney <input type="checkbox"/> District Attorney / Assistant DA	<input type="checkbox"/> Defendant or Respondent / Attorney <input type="checkbox"/> Other: _____

This Objection to a Remote Hearing is scheduled for hearing:

Date of Hearing	Time Of Hearing <input type="checkbox"/> AM <input type="checkbox"/> PM	Location of Hearing
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CERTIFICATE OF SERVICE

I certify that on this date, a copy of this Objection to a Remote Hearing was served by:

first class mail at the address(es) shown as follows:

- plaintiff / petitioner / attorney for plaintiff or petitioner _____
- defendant / respondent / attorney for defendant or respondent _____
- district attorney _____

personally, delivering a copy to the

- plaintiff / petitioner / attorney for plaintiff or petitioner _____
- defendant / respondent / attorney for defendant or respondent _____
- district attorney _____

Other: _____

Date	Signature	<input type="checkbox"/> Plaintiff or Petitioner / Attorney <input type="checkbox"/> District Attorney / Assistant DA	<input type="checkbox"/> Defendant or Respondent / Attorney <input type="checkbox"/> Other: _____
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ORDER ON OBJECTION TO REMOTE HEARING

This Objection was reviewed by the court out of session. OR After a hearing on the Objection, the Court finds does not find that the moving party has demonstrated good cause that the hearing should not be held via audio and video transmission.

Therefore, it is ORDERED that this hearing shall be held on _____ at _____ in person in Courtroom ____ fully remote via audio video transmission hybrid remote via audio video transmission. If the hearing is to be held via fully remote or hybrid remote means, the following participant(s) is / are permitted to testify remotely _____ from (specify the location(s) from which the participant(s) is / are testifying) _____. The participant(s) must provide contact information to the Court prior to the hearing.

Date	Signature	<input type="checkbox"/> Superior Court Judge <input type="checkbox"/> Clerk of Superior Court	<input type="checkbox"/> District Court Judge <input type="checkbox"/> Asst. CSC	<input type="checkbox"/> Magistrate <input type="checkbox"/> Designee _____
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