

Choose Only One Category

Fee	Case Type
----- APPEALS -----	
\$360	<input type="checkbox"/> Administrative Agency Review
\$10	<input checked="" type="checkbox"/> Justice Court
\$225	<input type="checkbox"/> Civil (78A-2-301(1)(h)) (E)
\$225	<input type="checkbox"/> Small Claims Trial de Novo (E)
----- GENERAL CIVIL -----	
\$360	<input type="checkbox"/> Attorney Discipline (T2)
Sch	<input type="checkbox"/> Civil Rights
\$0	<input type="checkbox"/> Civil Stalking (E)
\$360	<input type="checkbox"/> Condemnation/Eminent Domain
Sch	<input type="checkbox"/> Contract
Sch	<input type="checkbox"/> Debt Collection
Sch	<input type="checkbox"/> Eviction/Forcible Entry and Detainer (E)
\$360	<input type="checkbox"/> Extraordinary Relief/Writs
\$360	<input type="checkbox"/> Forfeiture of Property (E)
Sch	<input type="checkbox"/> Interpleader
Sch	<input type="checkbox"/> Lien/Mortgage Foreclosure
Sch	<input type="checkbox"/> Malpractice
Sch	<input type="checkbox"/> Miscellaneous Civil
Sch	<input type="checkbox"/> Personal Injury
\$360	<input type="checkbox"/> Post Conviction Relief: Capital (E)
\$360	<input type="checkbox"/> Post Conviction Relief: Non-capital (E)
Sch	<input type="checkbox"/> Property Damage
Sch	<input type="checkbox"/> Property Rights
Sch	<input type="checkbox"/> Sexual Harassment
Sch	<input type="checkbox"/> Water Rights
Sch	<input type="checkbox"/> Wrongful Death
\$360	<input type="checkbox"/> Wrongful Lien
Sch	<input type="checkbox"/> Wrongful Termination
----- DOMESTIC -----	
\$0	<input type="checkbox"/> Cohabitant Abuse (E)
\$310	<input type="checkbox"/> Marriage Adjudication (Common Law) (T2)
\$310	<input type="checkbox"/> Custody/Visitation/ Support (T2)
\$310	<input type="checkbox"/> Divorce/Annulment (T2)
	<input type="checkbox"/> Check if child support, custody or parent-time will be part of decree
	<input type="checkbox"/> Check if Temporary Separation filed
\$8	<input type="checkbox"/> Vital Statistics §26-2-25 per form
\$115	<input type="checkbox"/> Counterclaim: Divorce/Sep Maint.
\$115	<input type="checkbox"/> Counterclaim: Custody/Visitation/ Support
\$155	<input type="checkbox"/> Counterclaim: Paternity/Grandparent Visitation

Fee	Case Type
\$100	<input type="checkbox"/> Domestic Modification (T2)
\$100	<input type="checkbox"/> Counter-petition: Domestic Modification
\$360	<input type="checkbox"/> Grandparent Visitation (T2)
\$360	<input type="checkbox"/> Paternity/Parentage (T2)
\$310	<input type="checkbox"/> Separate Maintenance (T2)
\$35	<input type="checkbox"/> Temporary Separation (E)
\$35	<input type="checkbox"/> Uniform Child Custody Jurisdiction & Enforcement Act (UCCJEA) (E)
\$35	<input type="checkbox"/> Uniform Interstate Family Support Act (UIFSA) (E)
----- JUDGMENTS -----	
\$35	<input type="checkbox"/> Foreign Judgment (Abstract of) (E)
\$50	<input type="checkbox"/> Abstract of Judgment/Order of Utah Court/Agency (E)
\$30	<input type="checkbox"/> Abstract of Judgment/Order of Utah State Tax Commission (E)
\$35	<input type="checkbox"/> Judgment by Confession (E)
----- PROBATE -----	
\$360	<input type="checkbox"/> Adoption/Foreign Adoption (T2)
\$8	<input type="checkbox"/> Vital Statistics §26-2-25 per form
\$360	<input type="checkbox"/> Conservatorship (T2)
\$360	<input type="checkbox"/> Estate Personal Rep – Formal (T2)
\$360	<input type="checkbox"/> Estate Personal Rep – Informal (T2)
\$35	<input type="checkbox"/> Foreign Probate/Child Custody Doc. (E)
\$360	<input type="checkbox"/> Gestational Agreement (T2)
\$360	<input type="checkbox"/> Guardianship (T2)
\$0	<input type="checkbox"/> Involuntary Commitment (T2)
\$360	<input type="checkbox"/> Minor's Settlement (T2)
\$360	<input type="checkbox"/> Name Change (T2)
\$360	<input type="checkbox"/> Supervised Administration (T2)
\$360	<input type="checkbox"/> Trusts (T2)
\$360	<input type="checkbox"/> Unspecified (Other) Probate (T2)
----- SPECIAL MATTERS -----	
\$35	<input type="checkbox"/> Arbitration Award (E)
\$0	<input type="checkbox"/> Determination Competency-Criminal (E)
\$135	<input type="checkbox"/> Expungement (E)
\$0	<input type="checkbox"/> Hospital Lien (E)
\$35	<input type="checkbox"/> Judicial Approval of Document: Not Part of Pending Case (E)
\$35	<input type="checkbox"/> Notice of Deposition in Out-of-State Case/Foreign Subpoena (E)
\$35	<input type="checkbox"/> Open Sealed Record (E)

(E) Exempt from URCP Rule 26
(T2) Case type defaults to Tier 2 (no monetary damages)

My Name _____
Address _____
City, State, Zip _____
Phone _____
E-mail _____

I am the Plaintiff
 Defendant
 Attorney for the Plaintiff Defendant and my Utah Bar number is

In the Wasatch Justice Court of Utah
4th Judicial District Wasatch County
1361 South Hwy 40, Ste. 100, Heber City, UT 84032

Plaintiff v. Defendant And Defendant	Notice of Appeal Case Number _____ Judge _____
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By and through my attorney, (Attorney, check here if you are appearing for your client.)

I appeal the final judgment entered in this case to the District Court.

I have not included any non-public information in this document.

I declare under penalty of Utah Code Section 78B-5-705 that everything stated in this document is true and correct.

Date _____ Sign here ► _____

Typed or printed name _____

Certificate of Service

I certify that I served a copy of this Notice of Appeal on the following people.

Person's Name	Method of Service	Served at this Address	Served on this Date
(Other Party or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Clerk of Court)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Electronic File		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
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Date _____

Sign here ► _____

Typed or printed name _____