

**REQUEST FOR HEARING TIME AND DATE**  
NASSAU COUNTY FLORIDA FORECLOSURE CASES

Requesting Law Firm: \_\_\_\_\_

\_\_\_\_\_  
Address

\_\_\_\_\_  
Contact person, phone number, and e-mail address

\_\_\_\_\_  
Local Counsel, phone number, and e-mail address

**\*\*ALL NOTICES OF HEARINGS MUST STATE THE NAME AND PHONE NUMBER OF LOCAL COUNSEL ON THE CASE(S) IN ADDITION TO FIRM COUNSEL. LOCAL COUNSEL, AS WELL AS FIRM COUNSEL IS AUTHORIZED TO RESCHEDULE ANY CONFLICTS IN HEARING DATES AND TIMES THAT ARISE.**

**\*\* REQUESTING PARTY MUST SEND ALL PARTIES A NOTICE OF HEARING. IF ANY MOTION IS LATER ADDED, AN AMENDED NOTICE OF HEARING MUST BE FILED BY THE MOVING PARTY OF THE MOTION SO ADDED.**

*PLEASE WRITE LEGIBLY AND CLEARLY*

Nassau County Case number (45-year-CA-XXXXXX): \_\_\_\_\_

Name of Case: \_\_\_\_\_

Plaintiff's Attorney: \_\_\_\_\_  
Name and Phone

Defendant's Attorney: \_\_\_\_\_  
Name, Phone Number and e-mail address

Motion to be heard: \_\_\_\_\_

How many minutes are you requesting: \_\_\_\_\_

**PLEASE EMAIL TO [LABALL@NASSAUCLERK.COM](mailto:LABALL@NASSAUCLERK.COM).** (After completely filling out this form, please e-mail back to the Court and we will reply with your hearing date and time.)

To be filled out by the Court

**The hearing is set for:**

\_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

**\*\*\*IN THE GRAND JURY ROOM, 3RD FLOOR OF THE\*\*\***  
**ROBERT M. FOSTER JUSTICE CENTER**  
**76347 VETERANS WAY**  
**YULEE, FL 32097**

Reason(s) why the case could not be set for hearing at this time:

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