

# **INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.900(b), NOTICE OF LIMITED APPEARANCE (09/12)**

## **When should this form be used?**

This form should be used to provide notice to the court and the other attorney or party when an attorney is making a limited appearance for a client under Florida Family Law Rule of Procedure 12.040.

This form should be typed or printed in black ink. After completing and signing this form, the attorney should file the original with the clerk of the circuit court in the county in which the action is pending and keep a copy for his or her records.

## **What should I do next?**

A copy of this form must be served on the other party or his or her attorney and on the attorney's client in the manner required by Florida Rule of Judicial Administration 2.516.

## **Where can I look for more information?**

See Florida Family Law Rule of Procedure 12.040 and Florida Rule of Judicial Administration 2.516.

IN THE CIRCUIT COURT OF THE \_\_\_\_\_ JUDICIAL CIRCUIT,  
IN AND FOR \_\_\_\_\_ COUNTY, FLORIDA

Case No.: \_\_\_\_\_

Division: \_\_\_\_\_

\_\_\_\_\_  
Petitioner,

and

\_\_\_\_\_  
Respondent.

### NOTICE OF LIMITED APPEARANCE

*{Attorney's name}* \_\_\_\_\_ files this Notice of Limited Appearance on behalf of *{name}* \_\_\_\_\_, [choose **one** only] ( ) Petitioner ( ) Respondent, for the following limited purpose(s).  
[choose **all** that apply]:

1. \_\_\_ The hearing set for *{date}* \_\_\_\_\_, at *{time}* \_\_\_\_\_ on the issue(s) of *{specify}* \_\_\_\_\_.
2. \_\_\_ To represent [check **one** only] ( ) Petitioner ( ) Respondent on the following issues throughout the proceedings:
  - a. \_\_\_ Parental responsibility and time-sharing.
  - b. \_\_\_ Equitable distribution of marital assets and liabilities.
  - c. \_\_\_ Alimony.
  - d. \_\_\_ Child support.
  - e. \_\_\_ Other *{specify}*: \_\_\_\_\_

The clerk of the above-styled court is requested to enter this notice of record.

Copies of all future court papers should be served on the undersigned attorney at the address listed and on the [choose **one** only] ( ) Petitioner ( ) Respondent at *{name, address, e-mail address(es), telephone number, and fax number}* \_\_\_\_\_

I certify that a copy of this notice of limited appearance was: [check all used]  
( ) e-mailed ( ) mailed ( ) faxed ( ) hand delivered to the person(s) listed below on  
{date} \_\_\_\_\_.

**Other party or his/her attorney:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
E-mail Address(es): \_\_\_\_\_

\_\_\_\_\_  
Signature of Attorney  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
E-mail Address(es): \_\_\_\_\_  
Florida Bar Number : \_\_\_\_\_

\_\_\_\_\_  
Signature of Petitioner/Respondent  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
E-mail Address(es): \_\_\_\_\_