



JDF 1013	<b>Waiver of Service</b>	
<b>A. District Court</b>  Colorado County:  Mailing Address:	Clerk's Event Code: WAIV <i>This box is for court use only.</i>	
<b>B. Parties to the Case</b>  Petitioner: & Respondent:	<b>C. Case Details</b>  Number: Division/Courtroom:	

## 1. My Information (*the Respondent's*)

First Name:

Middle:

Last Name:

Mailing Address:

City, State, and Zip Code:

Phone:

Email:

Do you need an interpreter?  No  Yes, in (*language*)

If this information changes, file form *JDF 1312 – Contact Information Change*.

## 2. Accept Service

I am the Respondent and have received and accepted service of the Summons, Petition, and:  
(*check all that you received*)

Case Management Order.  Notice of Initial Status Conference.  
 Parenting Plan.  Sworn Financial Statement.  
 Other: (*please identify*)

This waiver does not mean I agree with the facts or requests made in the Petition. I reserve the right to receive notices of settings and the right to respond and appear in person.

### 3. Next Step

I understand:

- a) My [\[JDF 1015\] – Response to the Petition](#) is due within 21 days. 
- b) I can file and serve the form online through [\[Colorado Courts Efilng\]](#) (CCE). 

### 4. For Military Members

**Note:** If you are on active duty in the U.S. military, you can request a pause (*stay*) on these proceedings. See the Servicemembers Civil Relief Act (50 U.S.C. §520, et seq.). Please check with your base legal officer or other attorney.

If checked, I am a member of the military and decided to waive the stay provisions of the Servicemembers Civil Relief Act. I also waive my right to court-appointed counsel under the Act and permit the action to proceed.

### 5. Verified Signature

I declare under penalty of perjury under the law of Colorado that the foregoing is true and correct.

Executed on the *(date)*      day of *(month)*      *(year)*  
at City: *(or other location)*  
and State: *(or country)*

Print Your Name:

Your Signature:

Lawyer Signature: *(If any)*

Lawyer Bar Number and Contact Information: *(If any)*