



RICHMOND COUNTY JUVENILE COURT AUGUSTA JUDICIAL CIRCUIT

971 Broad Street, 2nd Floor Suite B Augusta,
Georgia 30901
Office (706) 821-1185 | Fax (706) 821-1196

CHIEF JUDGE TIANNA M. BIAS JUDGE
RAHMAAN BOWICK JUDGE WILLIAM
M. FLEMING JUDGE KATRELL NASH

Private Dependency Packet

You are receiving this packet because you are asking the Juvenile Court to give you temporary legal and physical custody of a child you believe is being abused, neglected, or without proper care. If you choose to proceed without an attorney, you must complete all forms in this packet clearly and fully. The staff is not permitted to perform clerical tasks for the public and cannot provide legal advice. If you have questions about the packet, you are encouraged to speak to an attorney. Once your packet is complete, submit it electronically at www.AugustaGa.gov/1859/Juvenile-Court or place it in a sealed envelope in the drop box next to the security station at 971 Broad Street, Augusta, GA 30901. You will be notified within ten business days whether your packet is approved or rejected. If approved, you must file at the Clerk of Court's Office located at 735 James Brown Blvd, Augusta, GA 30901. This Court does not issue emergency removal orders for private filings. If a child is in immediate danger, contact DFCS at 1-855-GA-CHILD or law enforcement. If DFCS has been involved within the past two years, you must contact DFCS before filing.

Dependency Petition Filing Process:

1. Submit packet electronically through the court website or in the secured drop box on the first floor, located at 971 Broad Street, Augusta, GA 30901.
2. Receptionist collects packets daily and forwards them to the Duty Judge.
3. Duty Judge reviews packets within five days for best interest and completeness.
4. If approved, a hearing is scheduled at least 30 days out and the Summons & Process Form is completed and attached.
5. Petitioner retrieves the packet at the security desk and files the petition with the Clerk of Court located at 735 James Brown Blvd, Suite 1500, Augusta, GA 30901. **The filing fee is \$73.00.**

If Your Petition Is Rejected

You will be notified and may retrieve your packet at the security desk. Packets may be rejected due to being incomplete, an existing DFCS case, or other legal reasons. If you have questions about modifying your petition, consult an attorney. Judges and court staff cannot provide legal advice and cannot explain rejection reasons.

Richmond County Juvenile Court Private Dependency Checklist

Please initial the following statements indicating that you completely understand each statement and sign your signature below.

_____ I understand that I am the Petitioner and that I am responsible for ensuring that the parents are served with a copy of the court pleadings. This includes paying the associated filing fee (s).

_____ I understand that **the Juvenile Court staff members cannot offer any legal assistance.** I understand that **the Clerk of Court staff cannot offer any legal assistance.** If I need legal assistance, I understand that I should contact an attorney.

_____ I understand that this Court **WILL NOT** issue an emergency removal order based on this filing. If I believe that the child is suffering from illness or injury or is in immediate danger from his or her surroundings then I must immediately contact the Department of Family and Children Services (“DFCS”) and/or the Sheriff’s Office to report the abuse and/or neglect.

_____ I understand that if DFCS has had any involvement with this child within the past two years, I must make the Court aware of DFCS’ prior involvement.

_____ I understand that the Juvenile Court does not grant PERMANENT CUSTODY. I understand that if I am seeking permanent custody of a child, I must file my request in Superior Court.

_____ I understand that custody disputes between natural parents or between third parties are matters for the Superior Court and are not under the jurisdiction of the Juvenile Court.

_____ I understand that while I am entitled to represent myself in this matter, I am **STRONGLY** encouraged to obtain the assistance of an attorney.

_____ I understand that the parents of the child(ren) are given an opportunity to have an attorney before there is any hearing/trial.

_____ I understand that as the Petitioner in this case, I am required to prove my allegations of dependency by a legal standard of clear and convincing evidence.

By placing my signature below, I acknowledge the above stated facts.

Dated: _____

Signature

Print name

**PETITION FOR PRIVATE DEPENDENCY
IN THE JUVENILE COURT OF RICHMOND COUNTY
STATE OF GEORGIA**

IN THE INTEREST OF:

_____, SEX ____ DOB: _____ FILE# _____ CASE# _____
_____, SEX ____ DOB: _____ FILE# _____ CASE# _____
_____, SEX ____ DOB: _____ FILE# _____ CASE# _____
_____, SEX ____ DOB: _____ FILE# _____ CASE# _____
CHILD(REN) UNDER 18 YEARS OF AGE

I, _____, as the Petitioner in this case allege the child(ren) named above to be of the sex(es) and age(s) and to have the name(s) there above set forth; that the (Putative) father of said child(ren) is _____, who resides at _____; the mother is _____, who resides at _____; said child(ren) reside(s) at _____, in said county and state, and is/are in the custody and control of _____, who reside(s) at said place; that the said child(ren) is/are subject to the jurisdiction of this Court; that said child(ren) is/are in need of protection of this Court and is/are dependent (O.C.G.A.15-11-2(8)) due to the following conditions (**provide enough detail – do not leave blank**):

That said child(ren) _____ was/were _____ was/were not taken into custody based on a court order or DFCS removal. That it is in the best interest of the child(ren) and the public that this proceeding be brought. That the physical location of the child(ren) at the time of the filing of the Petition is/are _____.

Petitioner prays that process issue, directed to the parties hereto, requiring them to appear before this Court to answer the allegations of this Petition.

Petitioner

Subscribed and sworn to before me, on information and belief this ____ day of _____, 20__.

Attesting Officer/Notary

The above Petition is approved to be filed in the best interest of the public and the above named child(ren).
This ____ day of _____, 20__.

Court Designee (Judge/Clerk)

JUV-2 Dependency Complaint

**DEPENDENCY
COMPLAINT
IN THE JUVENILE COURT OF
RICHMOND COUNTY, GEORGIA**

File #:

Name of physical custodian of alleged dependent child(ren) (Last, F, M):		Age: _____
		DOB: _____
Race: _____	Relationship to	Res Phone: _____
Sex: _____	Child(ren): _____	Bus Phone: _____
Address where alleged dependent child(ren) reside, dependency occurred or is located without a custodian:		
(Street)	(City)	(County) (State) (Zip)
Name of other custodian of the alleged dependent child(ren), (Last, F, M):		Age: _____
		DOB: _____
Race: _____	Relationship to	Res Phone: _____
Sex: _____	Child(ren): _____	Bus Phone: _____
Mother of		Res Phone: _____
Child(ren):		Bus Phone: _____
(Include Mother's Maiden Name in Parentheses)		
Mother's Address:		
(Street)	(City)	(County) (State) (Zip)
Legal Father's Name:		Res Phone: _____
		Bus Phone: _____
Legal Father's Address:		
(Street)	(City)	(County) (State) (Zip)
Putative Father's Name:		Res Phone: _____
		Bus Phone: _____
Putative Father's Address:		
(Street)	(City)	(County) (State) (Zip)
Putative Father's Name:		Res Phone: _____
		Bus Phone: _____
Putative Father's Address:		
(Street)	(City)	(County) (State) (Zip)
Each child's name, age, date and place of birth, and father's name:		

Taken Into Custody: Yes () No ()		
By Whom:		
(Name)	(Agency)	
Placement of Dependent Child:		Date: _____
		Time: _____

**IN THE JUVENILE COURT OF RICHMOND COUNTY
STATE OF GEORGIA**

IN THE INTEREST OF:

_____)
A Child.)

CASE NUMBER: _____)

PARENTAL CONSENT - TEMPORARY CUSTODY AND CONTROL

I, _____, (mother) (father) (legal custodian) of the above-named child, acknowledge receipt of a copy of:

- () The Petition filed by or on behalf of _____ in the Juvenile Court of Richmond County, Georgia, on the ____ day of _____, 20____, alleging the above-named child to be dependent and requesting that temporary custody and control of said child be awarded to _____.
- () The Summons requiring my attendance at a Hearing set for the ____ day of _____, 20____, in the Juvenile Court of Richmond County, Georgia. I specifically acknowledge service of summons and waive any and all further notice on this matter if the Petitioner's request is granted.

I, the (mother) (father) (legal custodian) of said child, acknowledge that I have a right to legal counsel in this matter and a right to a Hearing.

- () I waive my right to legal counsel.
- () I acknowledge that I have legal counsel with whom I discussed this consent.

I waive my right to be present at any hearing on this matter and specifically waive all further notice and summons of hearing. I hereby submit to the jurisdiction of the Court.

I request that the prayers of the Petitioner be granted and state that I am unable to provide for said child at this time. I do hereby state that I oppose any agency or person other than _____ obtaining legal custody of said child and request that should _____ be unable to provide for said child or be unable to obtain temporary custody of said child, I request that the matter be continued to allow me to be present to state my objections to placement of said child.

I specifically acknowledge that I understand that custody of my child may not automatically be returned to me and that a Hearing may be necessary to determine my fitness to regain custody of my child.

I hereby certify that I was not subjected to any duress or undue pressure and freely and voluntarily consent to said child being placed in the temporary custody and control of _____ until I am able to care for (him) (her).

I further state that as of this date my address is: _____

This ____ day of _____, 20 ____.

(Signature)

Before the undersigned officer appeared _____ with whom I am personally acquainted, and after having been duly sworn, (he) (she) did personally subscribe (his) (her) name to the within document.

This ____ day of _____, 20 ____.

NOTARY PUBLIC/COURT DESIGNEE (Must Affix Seal)