

**IN THE CIRCUIT COURT
OF THE FIRST JUDICIAL CIRCUIT
IN AND FOR ESCAMBIA COUNTY, FLORIDA**

_____, Petitioner

CASE NO.: _____

DIVISION: _____

and

_____, Respondent

PETITION TO ESTABLISH VISITATION

The undersigned Petitioner being sworn hereby requests that the Court grant visitation with the minor child(ren) based upon the reasons as follows:

1. Petitioner is related to the child(ren) by virtue of being the child(ren's)

_____.

(Relationship)

2. The minor child(ren) have been living in the State of Florida during the past six (6) months and are within the jurisdiction of this Court.

3. Petitioner requests visitation with the following child(ren):

_____ Date of Birth: _____

_____ Date of Birth: _____

_____ Date of Birth: _____

_____ Date of Birth: _____

4. The Child(ren) are presently in the care and custody of _____,
whose address is _____.

5. The Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) Affidavit is filed with this Petition.

6. Visitation is being sought in this action for the following reason:

(a) _____ The Petitioner and the () Mother () Father of the child(ren) are divorced, but visitation rights were not established in the Final Judgment of Dissolution of Marriage.

(b) _____ Paternity and/or child support has been established for the above-named child(ren), but visitation rights were not established in the Final Judgment.

(c) _____ Paternity and/or child support has been established through the Department of

Revenue, Child Support Enforcement Office by Administrative Order, but visitation was not established in that action.

(d)_____ The child(ren) have been temporarily placed in the custody of grandparents or other relative(s) by court order and the petitioner has not been allowed visitation.

Other: _____

7. It is in the best interest of the child(ren) that the Petitioner be allowed reasonable visitation as follows:

(a)_____ Standard Visitation pursuant to the Shared Parenting Schedule.

(b)_____ Visitation Schedule as follows: _____

DATED this ____ day of _____, 200_____.

Petitioner's Signature

Petitioner (name typed or printed)

Street Address

City, State, Zip Code

Telephone

I HEREBY CERTIFY that a copy of this Petition/Request for Visitation was provided to the respondent listed below by () sheriff-s service of process this _____ day of _____, 200_____.

Petitioner-s Signature

Copy Furnished to:

Respondent: _____

Address: _____

Telephone: _____